

# Cas Cliniques

An underwater photograph of a coral reef. In the foreground, two bright yellow butterflyfish with dark spots on their heads are swimming. The background shows a diverse coral reef with various colors and textures, and other fish swimming in the clear blue water.

A la recherche de l'Harmonisation  
naso-labio-maxillo-mandibulaire

# **Classe II brachyfaciale**

## BRACHIFACCIALI E MORSI COPERTI

Nei *brachifacciali* e nei *morsi coperti*, la propulsione mandibolare accompagnata da una disocclusione posteriore induce un cambiamento di direzione, verso l'avanti delle fibre muscolari temporo-masseterine e il loro rilassamento.

La neutralizzazione temporanea delle forze occlusali consente, così, un movimento rapido dei denti, e la correzione del morso profondo essendo attive solo le forze espresse del PUL (arretramento dei settori laterali mascellari e avanzamento mandibolare) = correzione sagittale et verticale (eggrezione)

Se si considera che, in un trattamento classico fisso, i movimenti dento-alveolari provocati dagli elastici inter-mascellari (da 4 a 8 once) sono rallentati dalla potente contrazione massetero-temporale (pressione che va dai 200 ai 300 kg/cm<sup>2</sup>), si comprende l'utilità del PUL.



## Cas brachyfacial (Hypodivergent)



Propulsion → Inocclusion postérieure



Neutralisation provisoire des fibres musculaires temporo-masseterines et des forces occlusales



Action rapide dento-alvéolaire → Egression postérieure



Favorise la croissance mandibulaire → Orthopédie



Réduction rapide de l'Overjet → Favorise la rééducation de la respiration et de la langue

Classe II : 1/3 Expansion + 1/3 Propulsion + 1/3 Recul secteurs latéraux sup





## Casi brachifacciali (Hypodivergente)



Propulsione → Disocclusione posteriore

Neutralizzazione temporanea delle fibre muscolare  
temporo-masseterine e dei forze occlusali (250Kg/cm<sup>2</sup>)

Movimento dento-alveolare rapido → Estruzione dei denti posteriore

Propulsione mandibolare → Azione ortopedica

Riduzione rapida del Overjet → Rieducazion de la  
respirazione e della posizione della lingua

Classe II : 1/3 Ezpansione + 1/3 Propulsione + 1/3 Arretramento dei settori laterali mascellari

## La désocclusion postérieure (Korn)

Test de propulsion et désocclusion postérieure



Temps d'occlusion par jour ?

Marcel Korn, D.M.D.

Orthodontics and Dento-Facial Orthopedics

Diplomate of the American Board of Orthodontics

### **La Composante Musculaire du Problème de la Relation Centrée**

- Il doit y avoir une composante musculaire et fonctionnelle à ce problème.
- La mandibule ne reste en occlusion que 23.68 min. par jour, et est en désocclusion 23,½ h. par jour (en fonctionnement normal).
- La mandibule doit être en désocclusion, sans contact entre les dents : 23½ h. par jour.
- Désocclusion, et non pas non-occlusion, doit être notre objectif.

### **L'Exercice Musculaire**

Les concepts de :

- Ré-entraînement musculaire
- Repositionnement mandibulaire
- Changement de la posture mandibulaire au repos
- Contrôle de l'hyperfonction

### **Orthodontie Posturale**

Douleur vive / Douleur Chronique

#### Douleur Vive

- un symptôme
- utile biologiquement
- biologiquement nécessaire
- provoque de l'anxiété
- répond aux narcotiques
- pathologie et diagnostic reconnaissables
- guérison probable

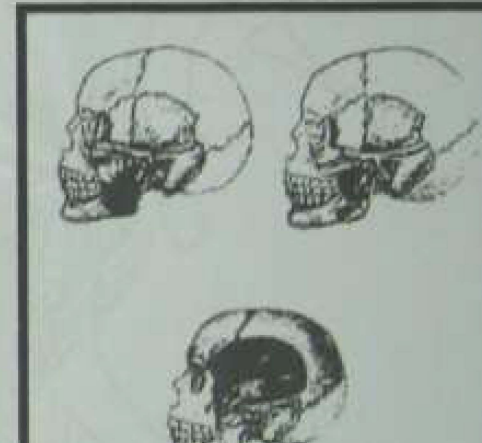
#### Douleur Chronique

- une maladie
- pas de cicatrisation ou de valeur biologique
- accompagné d'une dépression
- conduit aux drogues
- interaction psychophysique complexe
- guérison peu probable.

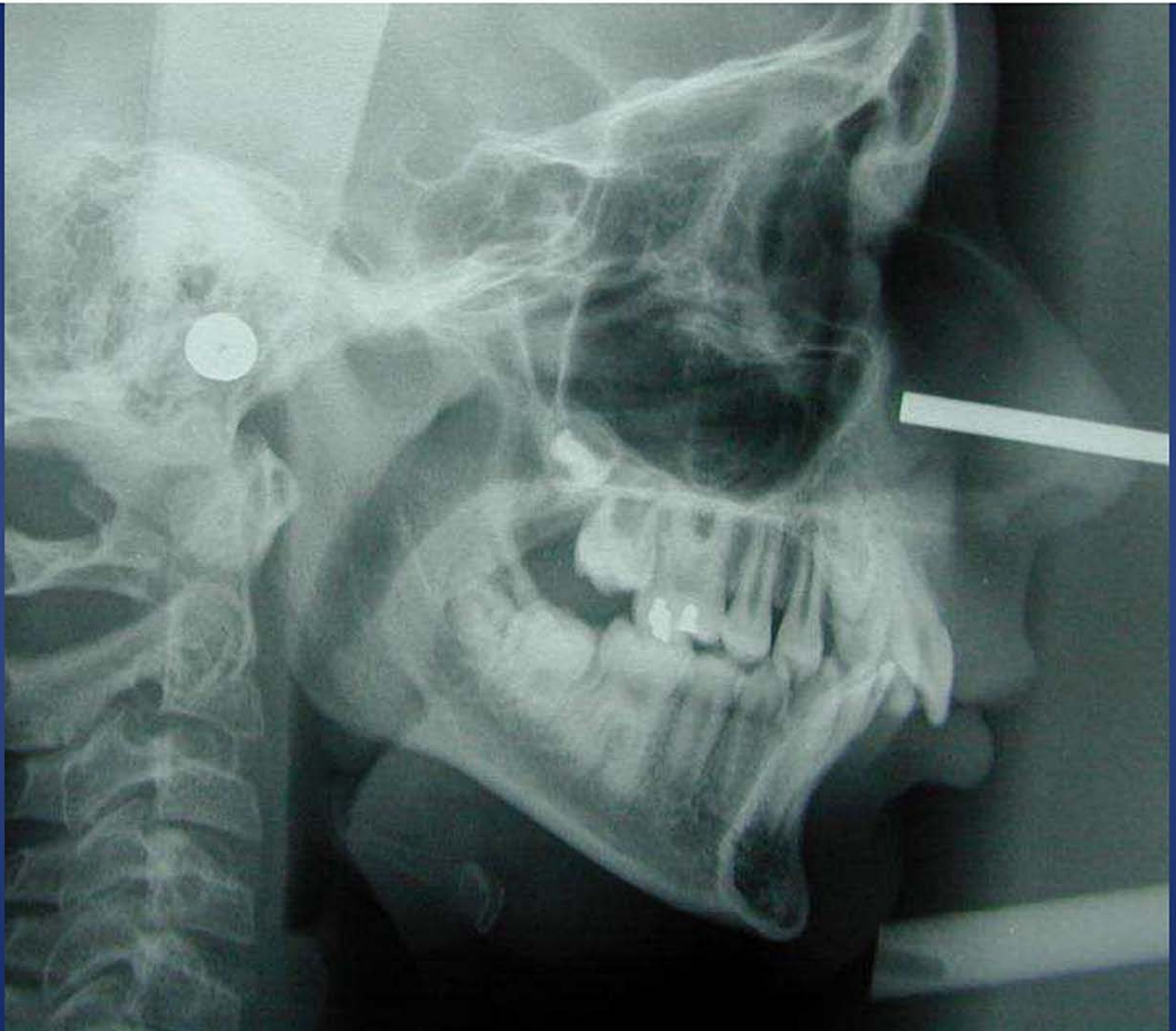
### **Etat Musculaire :**

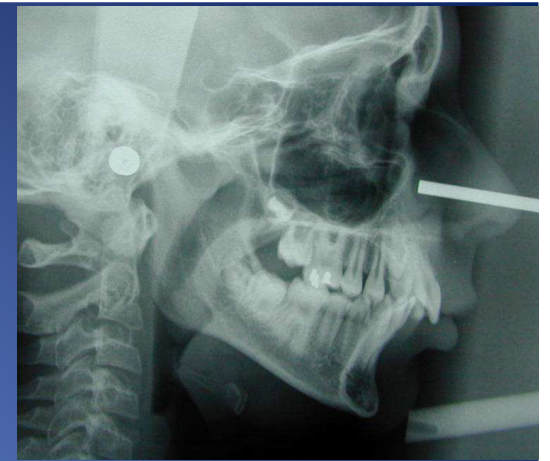
**hypertonie / hypotonie**

Un temps d'occlusion trop important entraîne une hypertonie



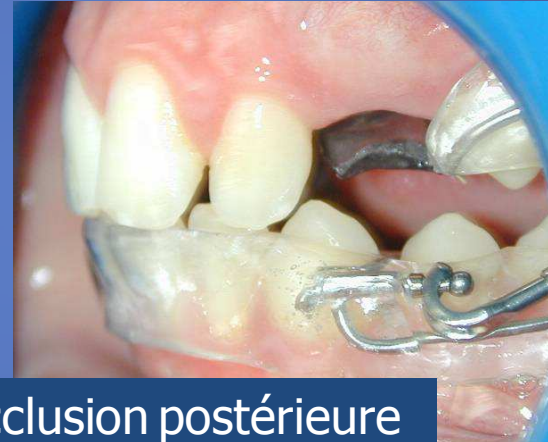






6781 P.Florian 12 ans et demi

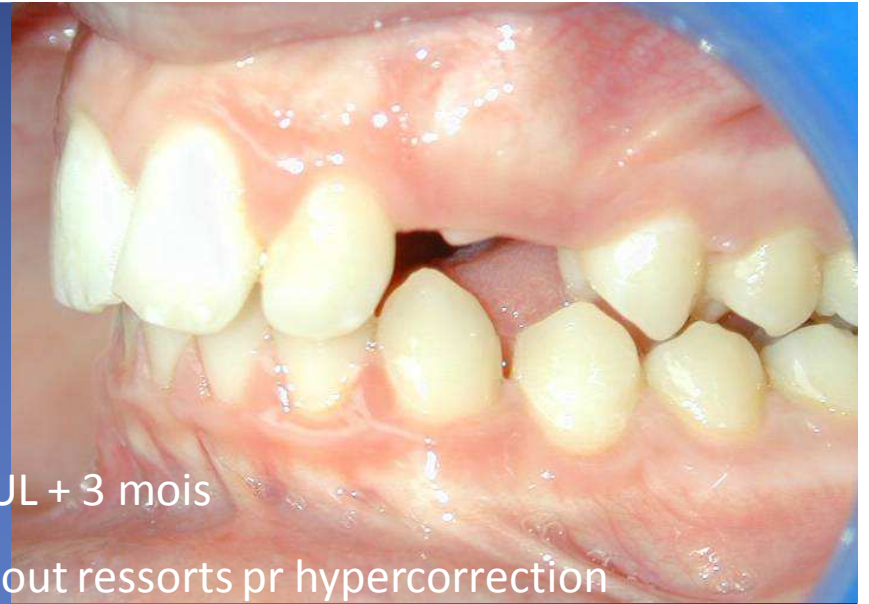




Propulsion + désocclusion postérieure

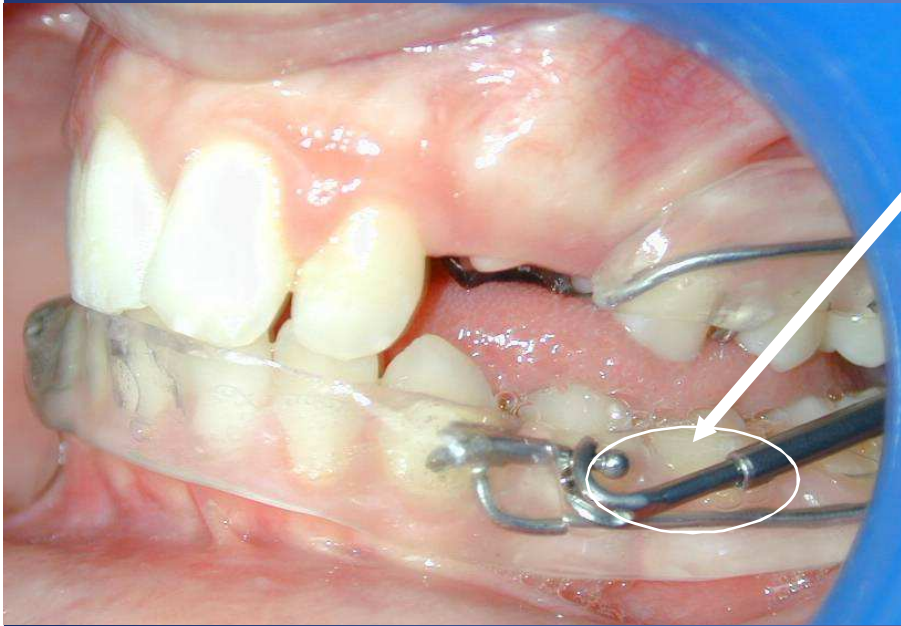


PUL + 3 MOIS



PUL + 3 mois

Ajout ressorts pr hypercorrection



PUL + 6 mois



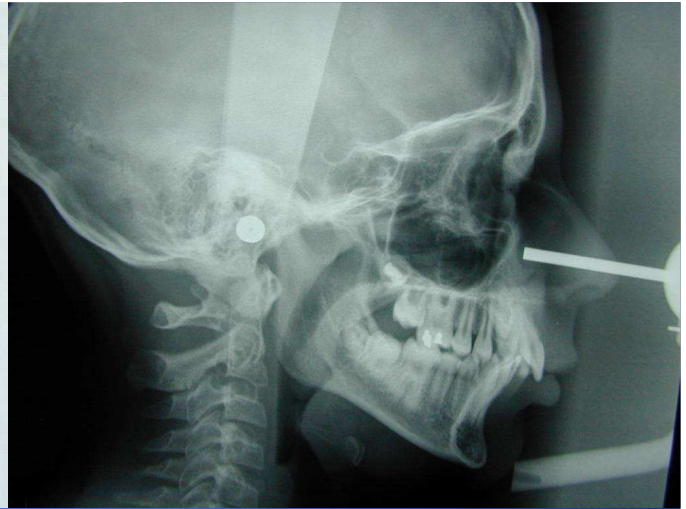
Pul+10 mois  
Hyperclasse 1



Fixe sup seul

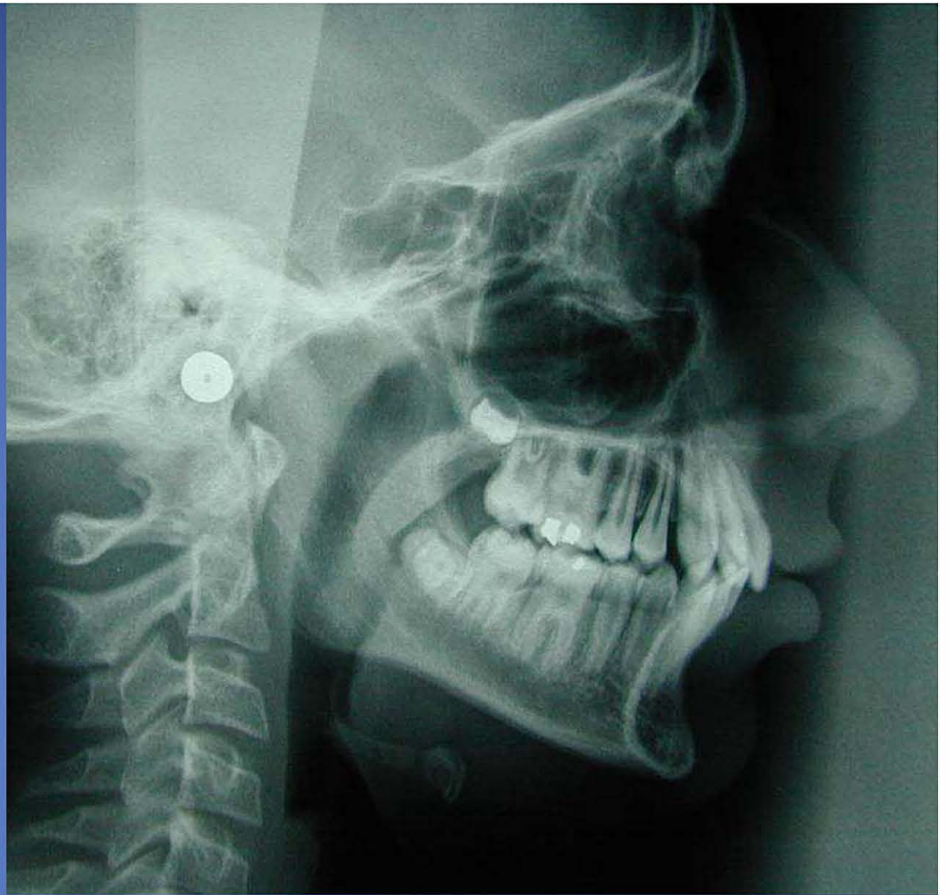
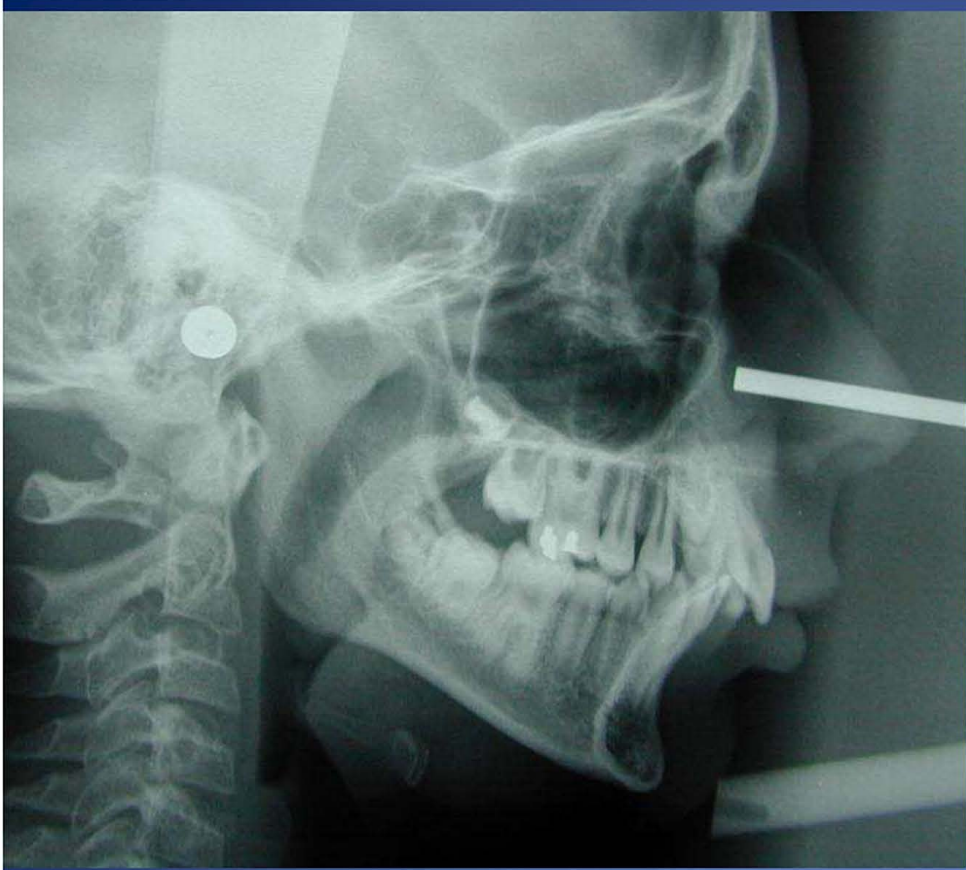






- PUL 10 mois
- Alignement sup seul 8 mois
- Contention







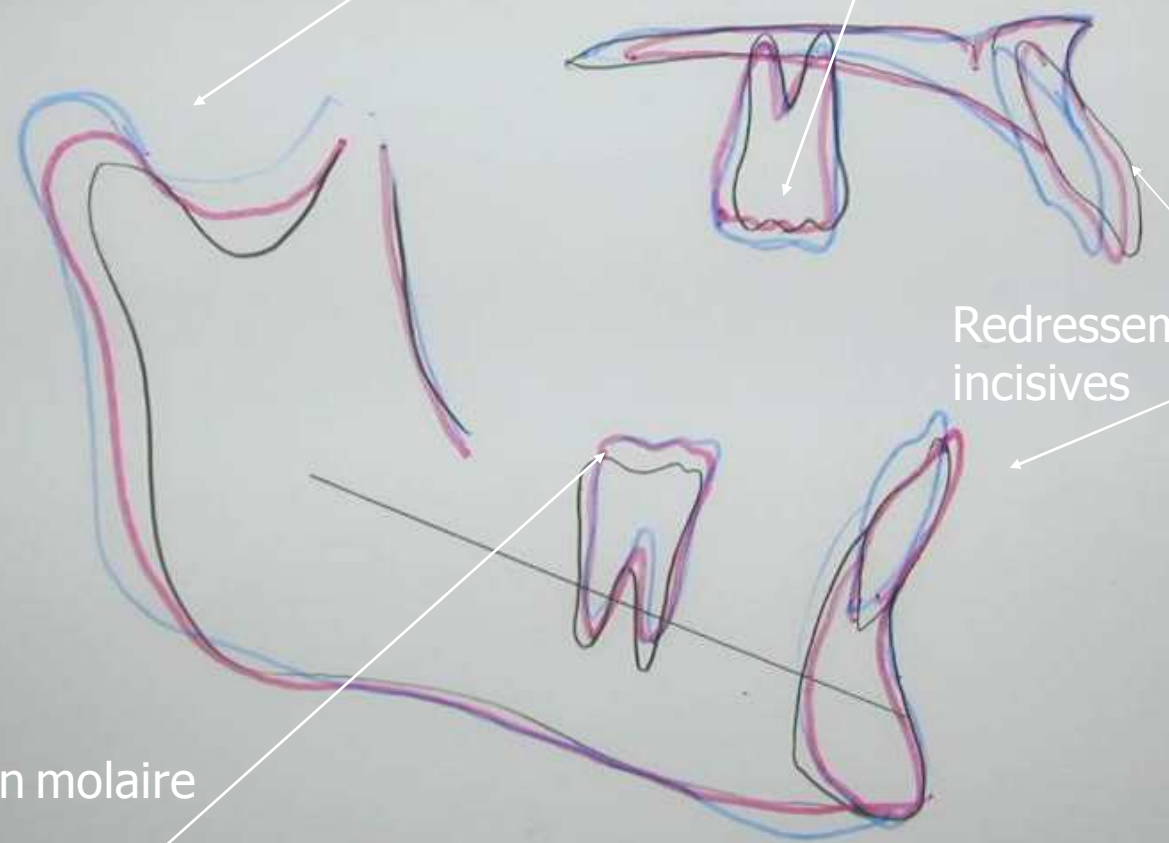
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11/04  
09/06

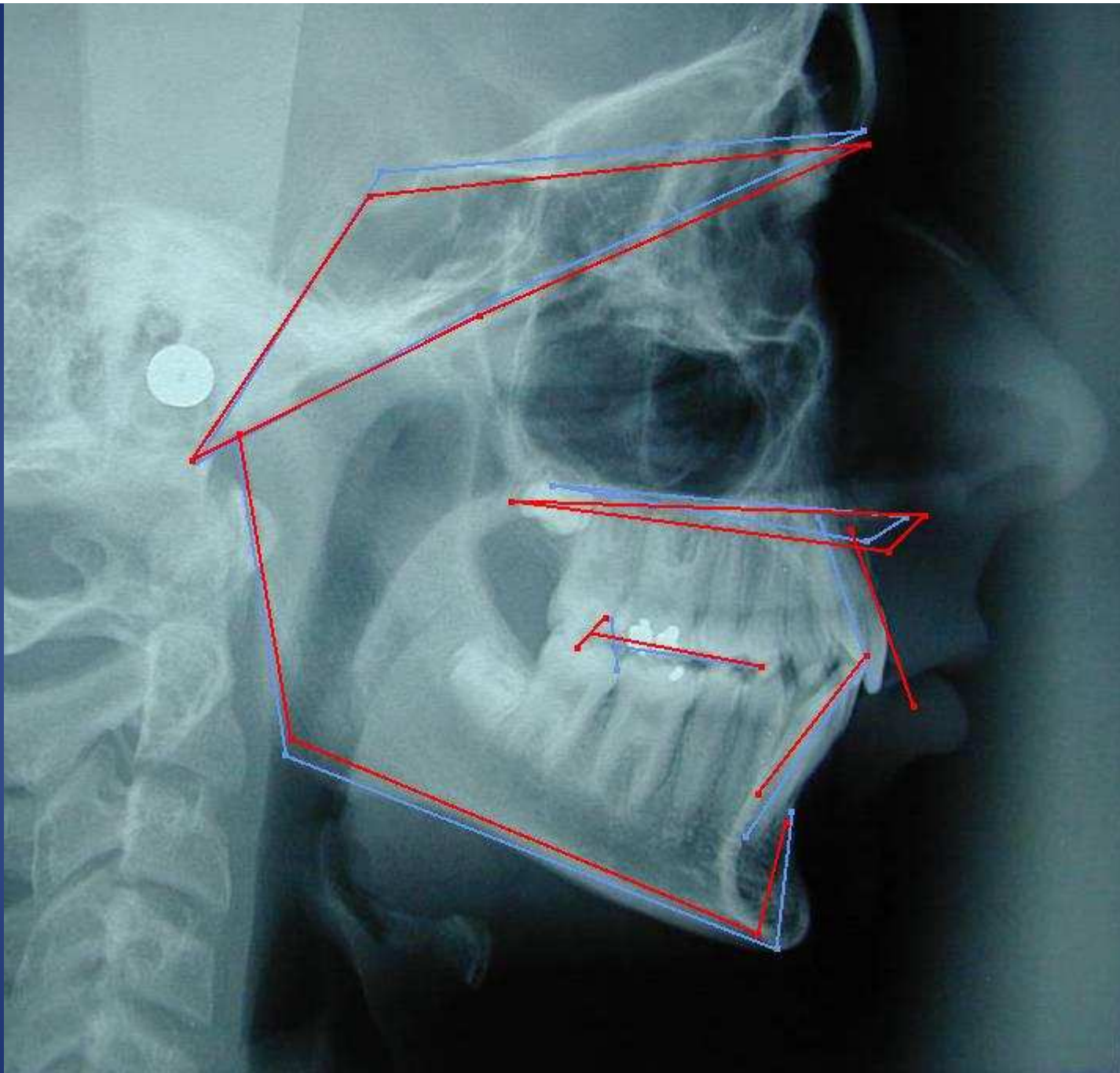
Allongement mandibulaire

Egression molaire

Redressement des incisives

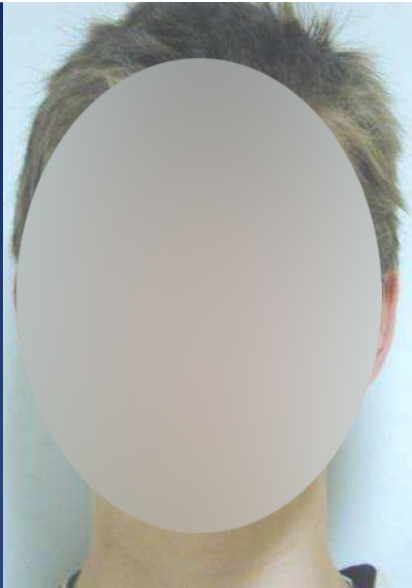
Egression molaire





Superposition Procuste : Avant – Après

Class II Ado brachy  
*PUL sans bagues*



5941 Philippe B.  
14 Y.







PUL + 6 M



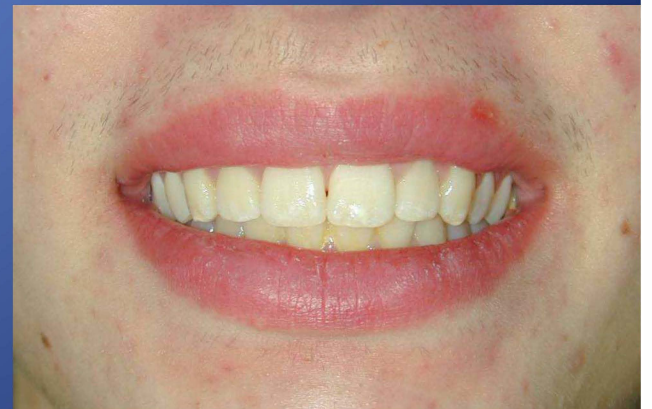
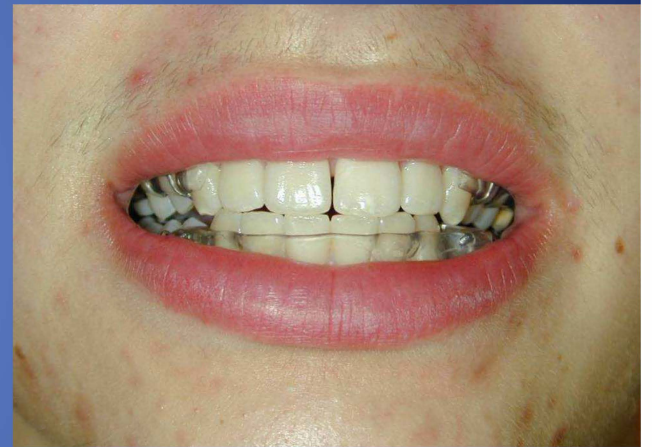
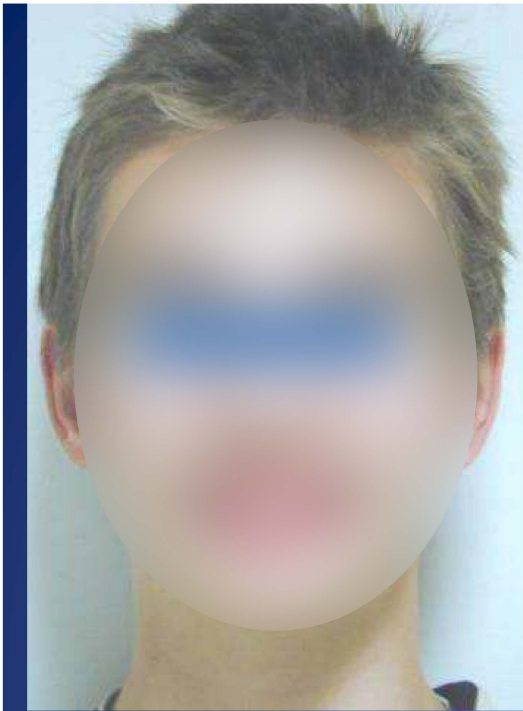




PUL  
+  
Prefinisher

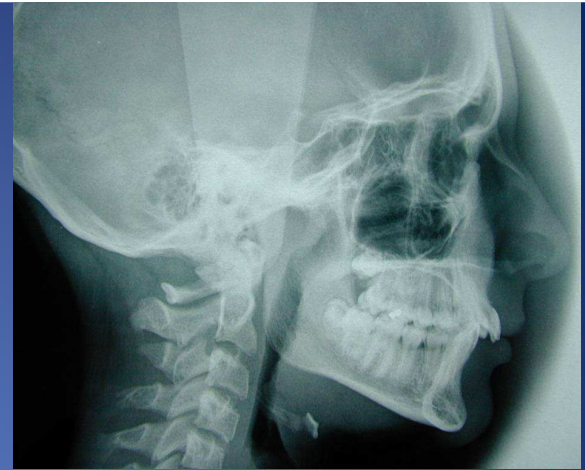
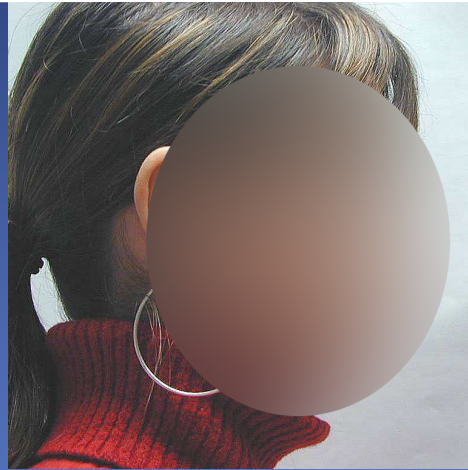




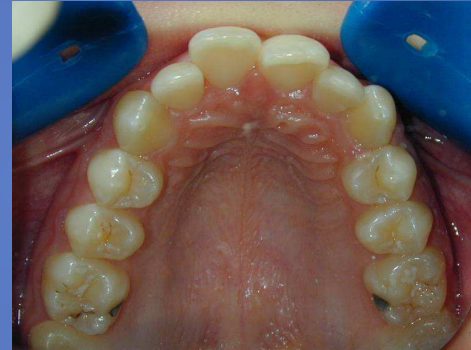




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6922 LUCIE L. 13 ANS





Mars 2004

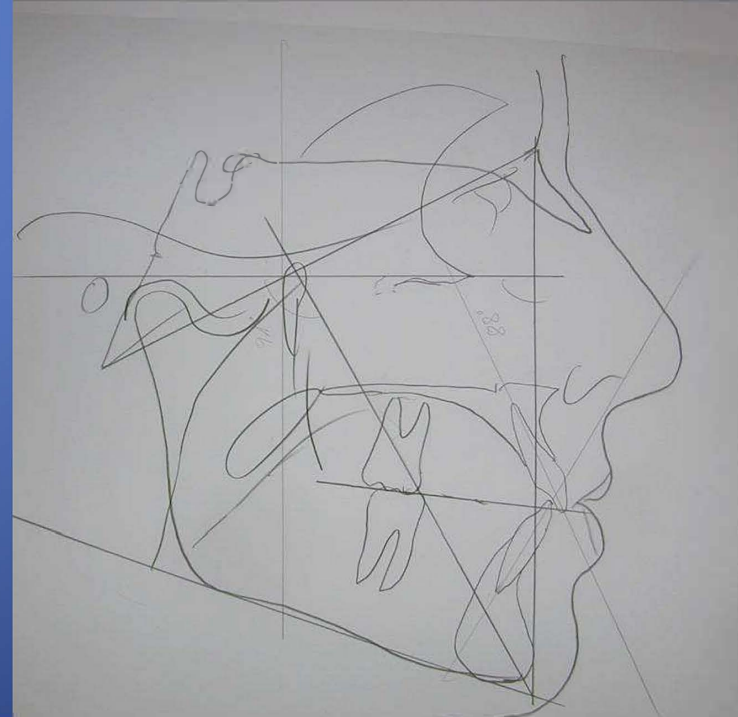
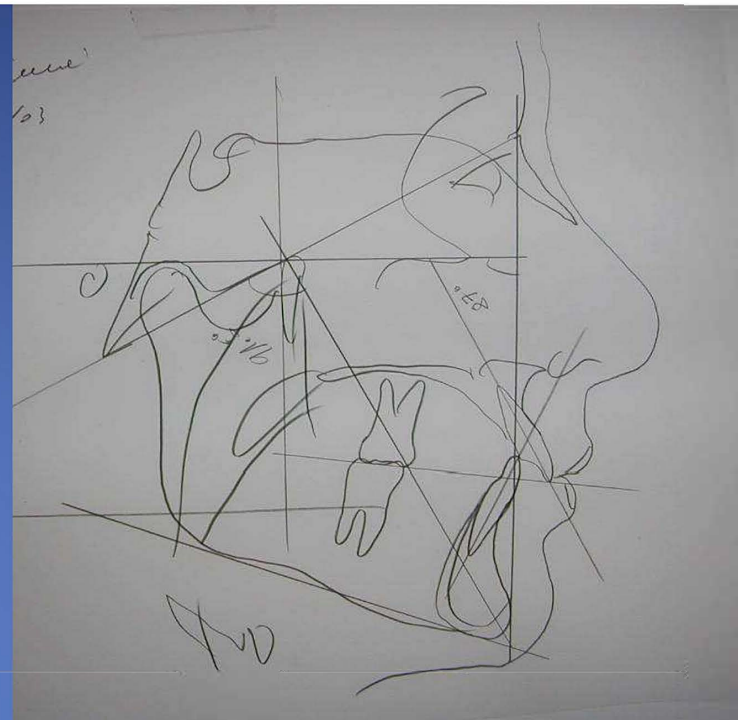


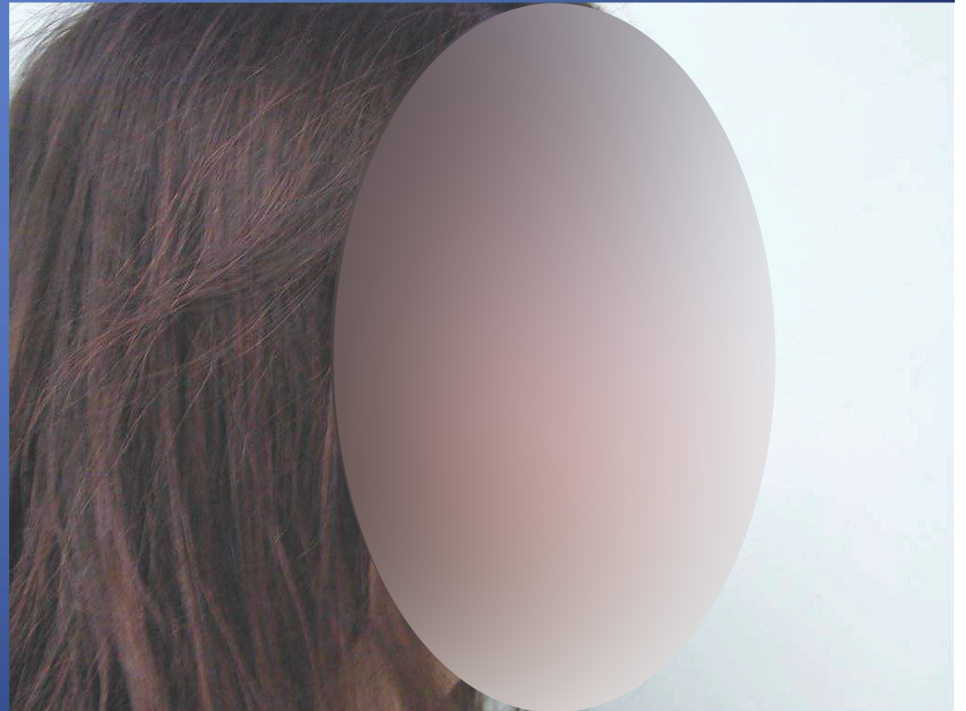
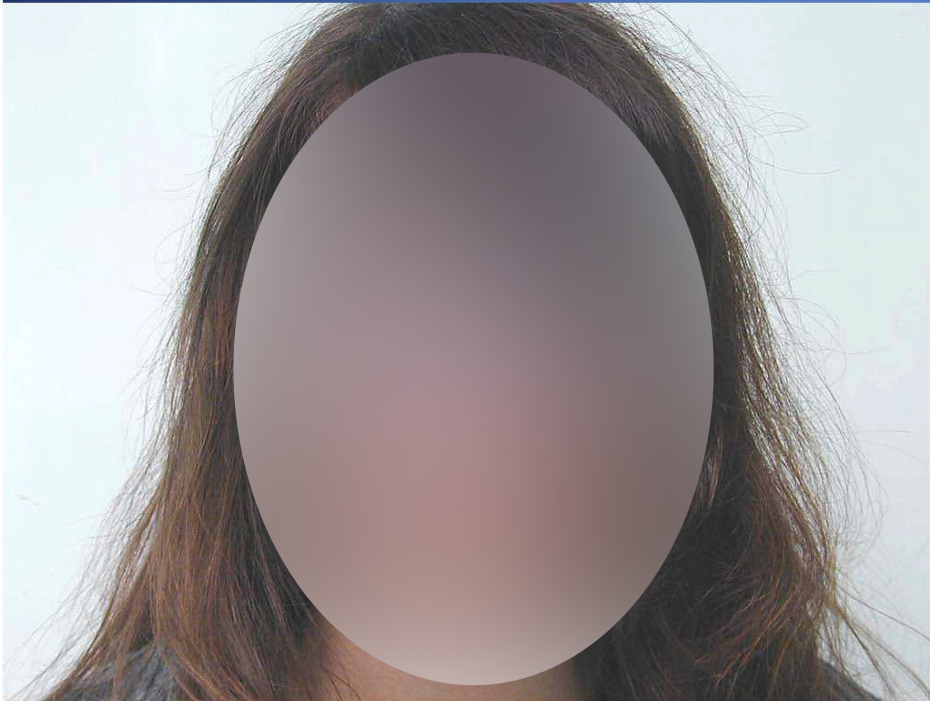
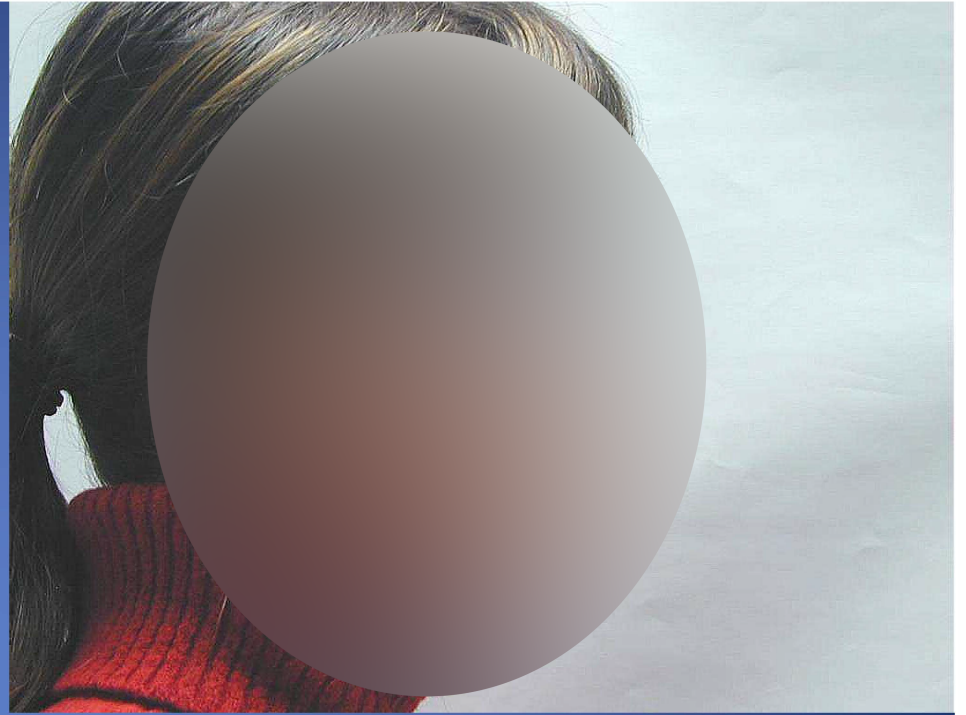


Aout 2004 : PUL +6 M





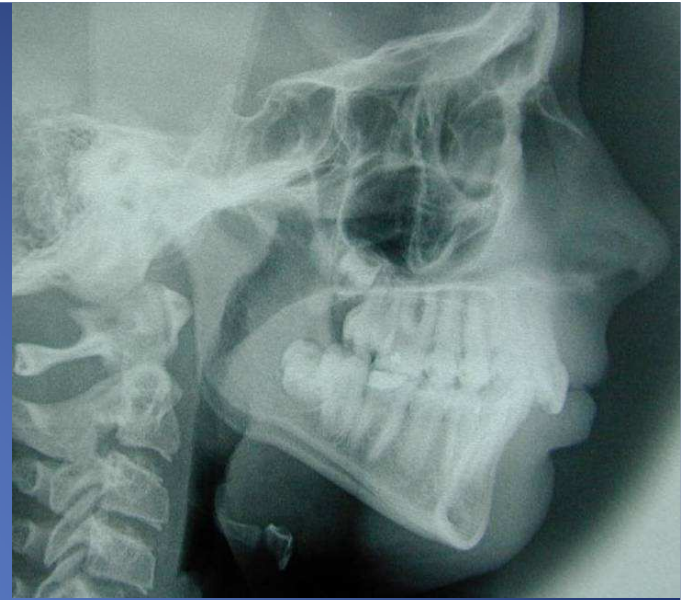
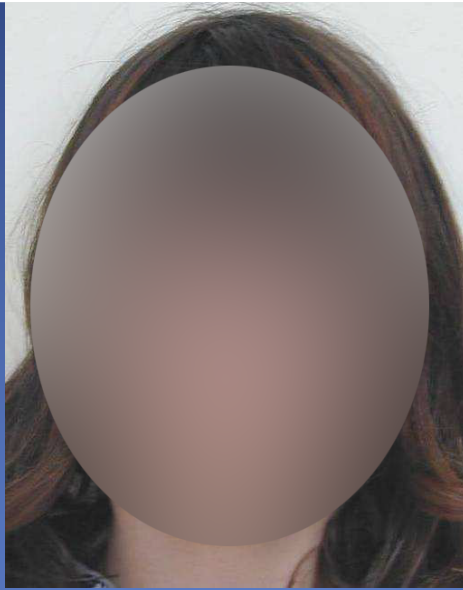








Afop Mai 2010



6608 Juliette S.

12 ans

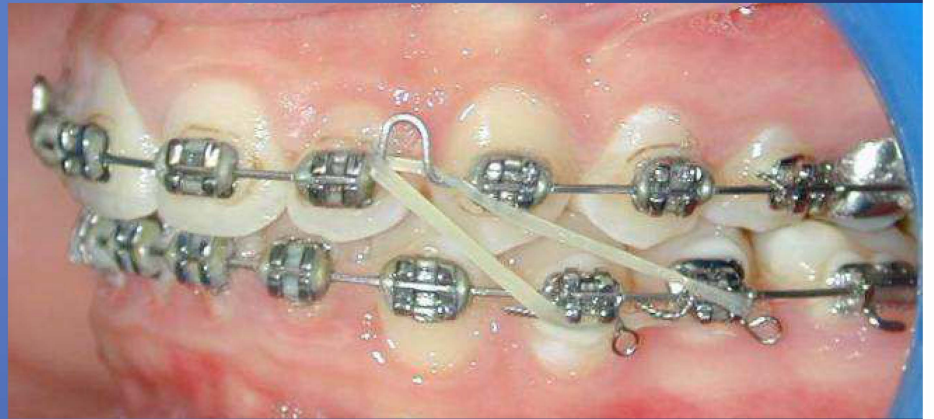






PUL + 6 M



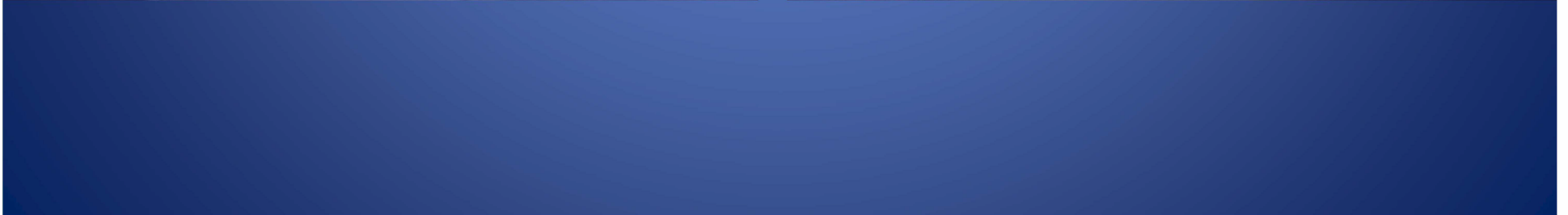
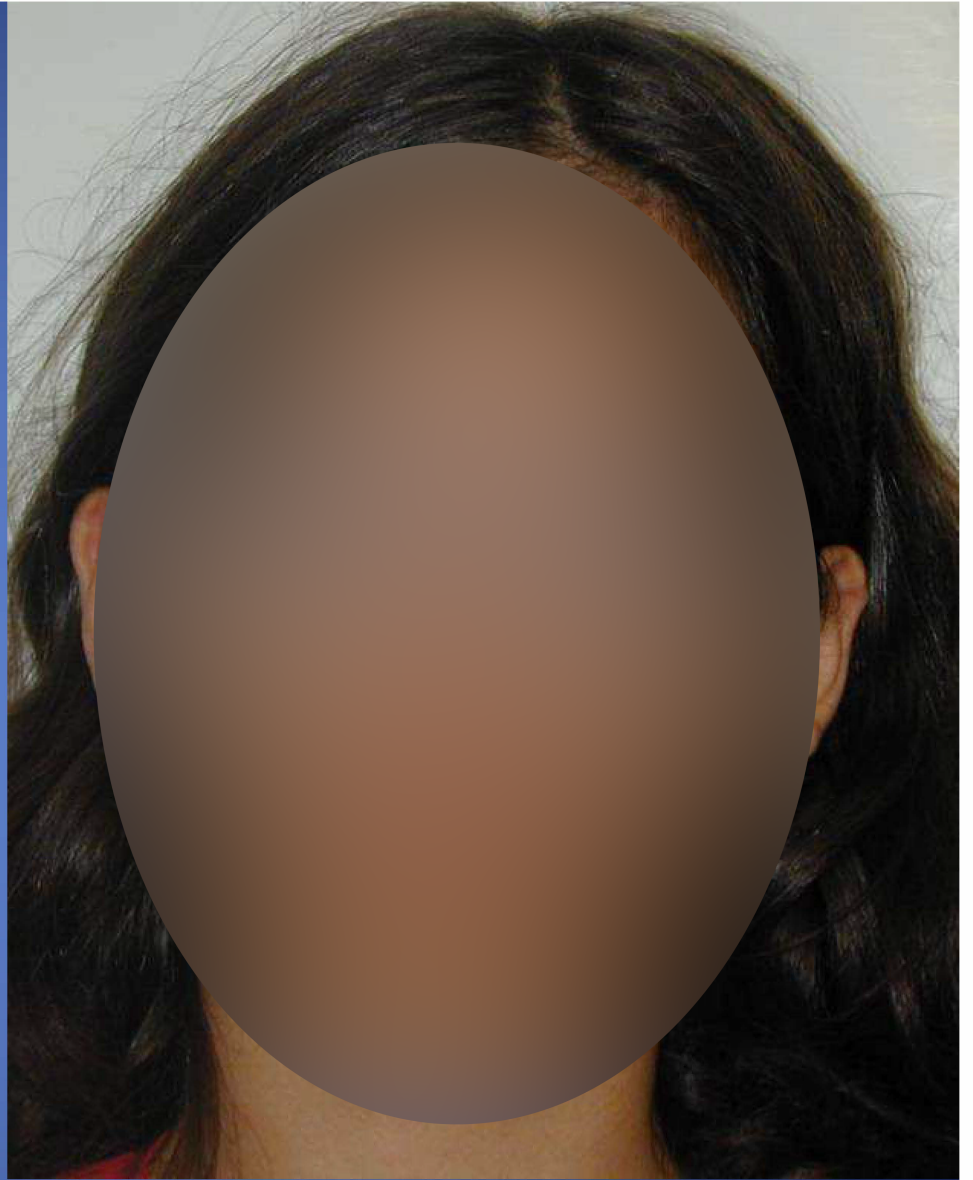


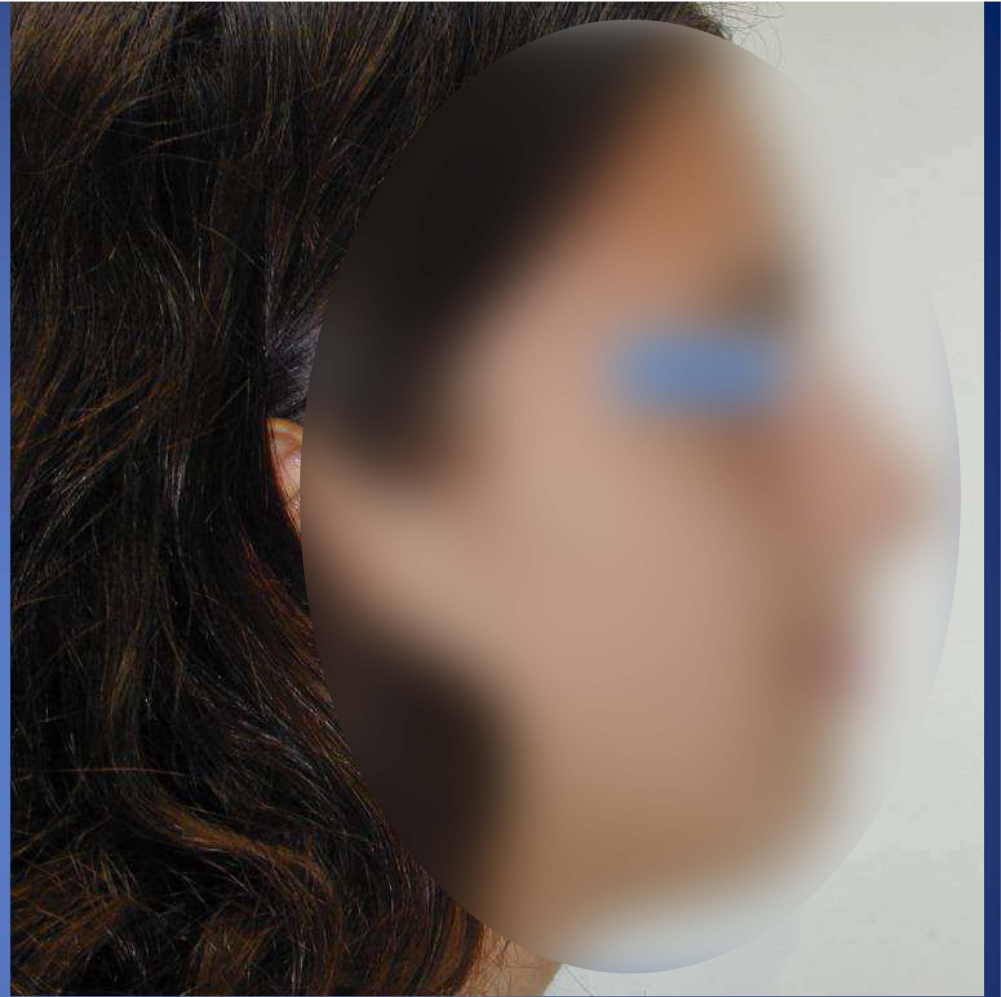


PUL: 12 M

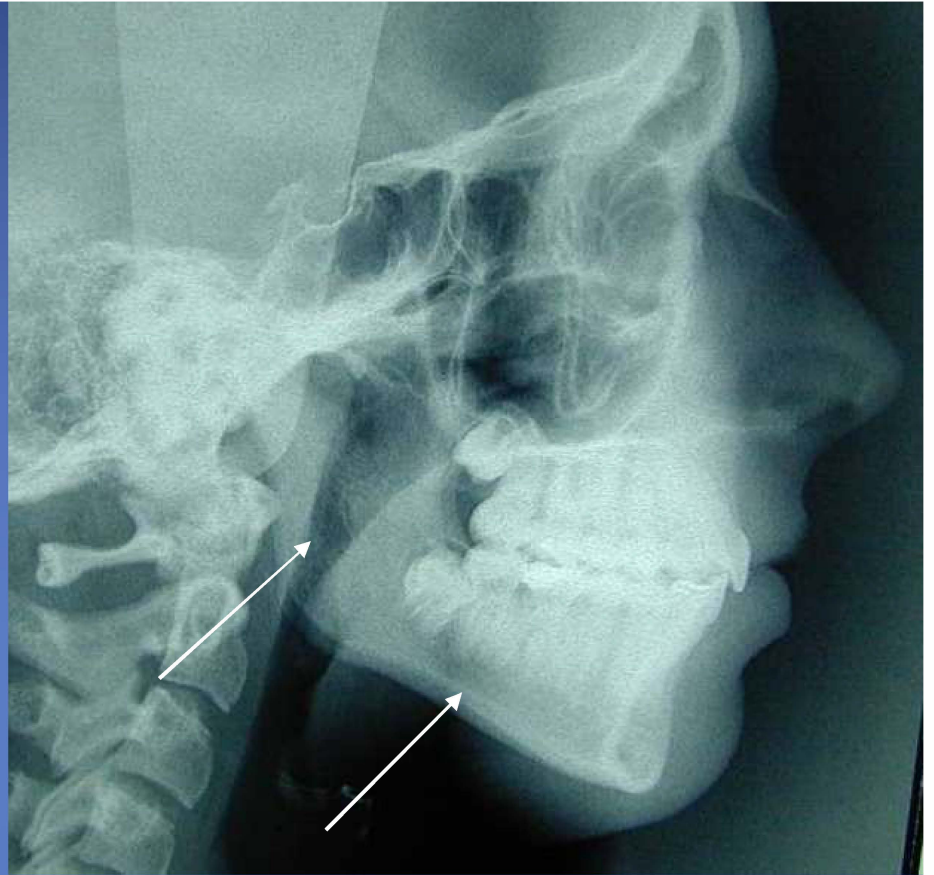
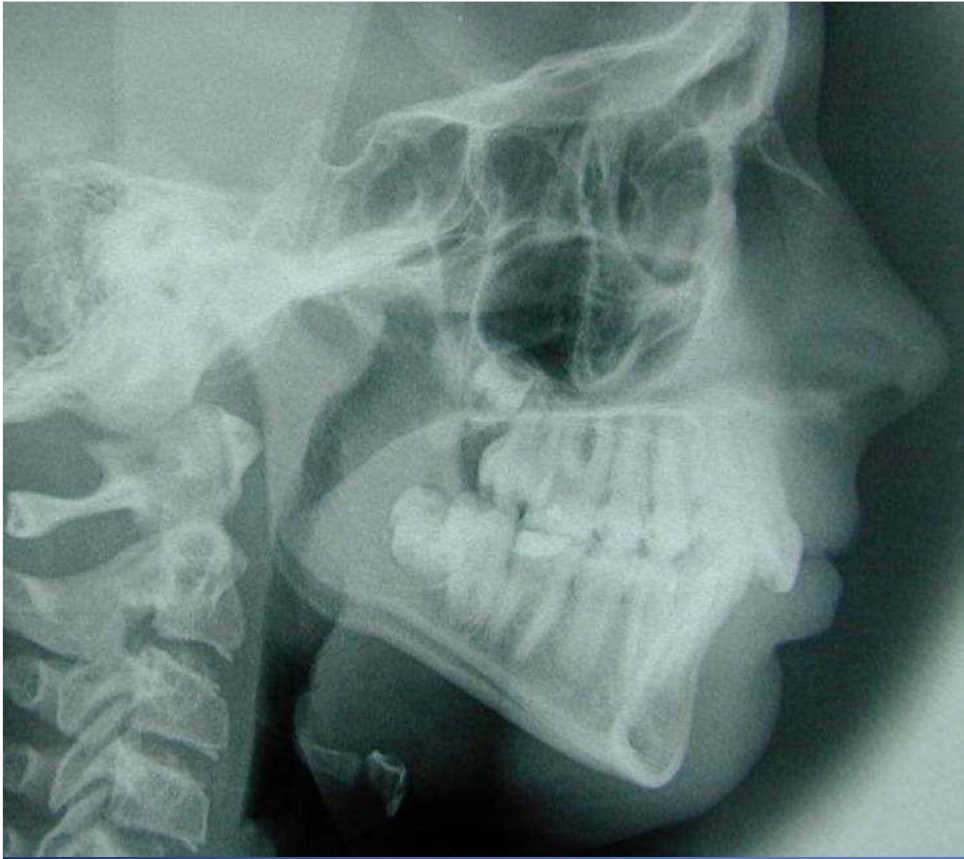
Braces: 12 M







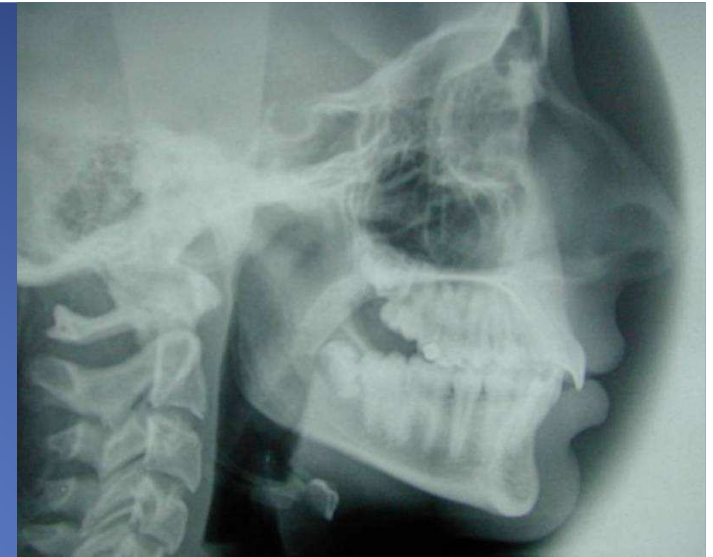




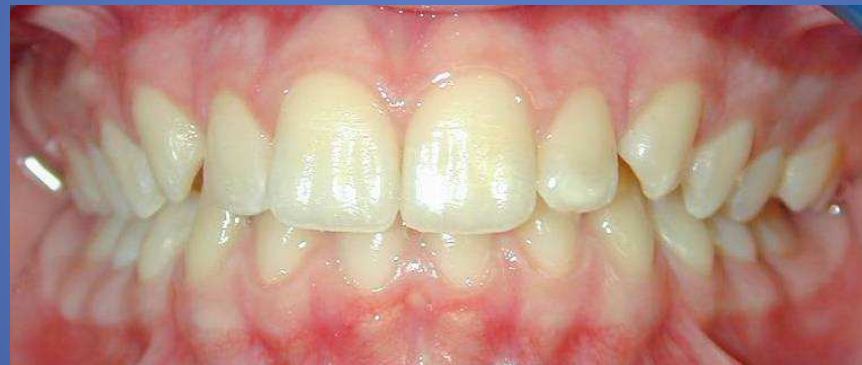


**Interposition linguale latérale**

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6883 Laure Di. 14 Y





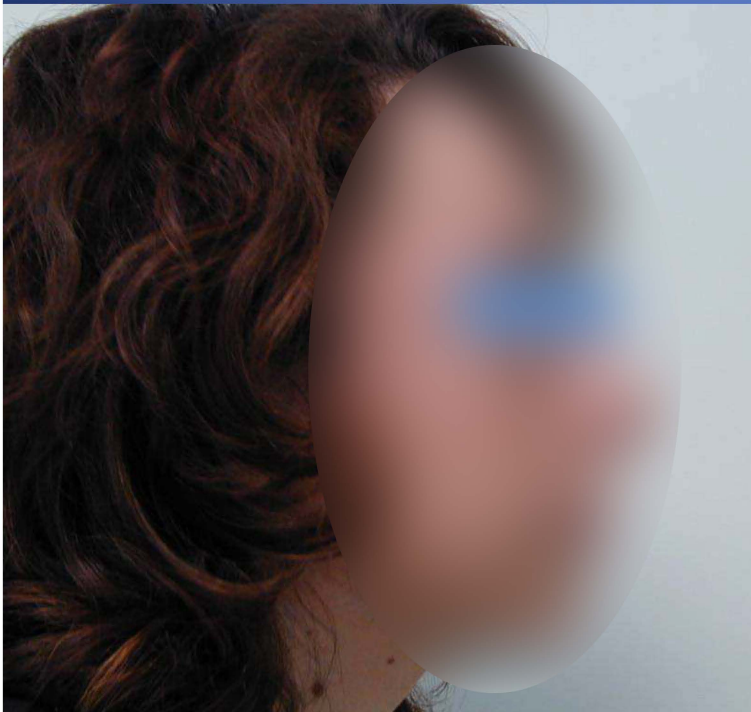


PUL + 6 M

+

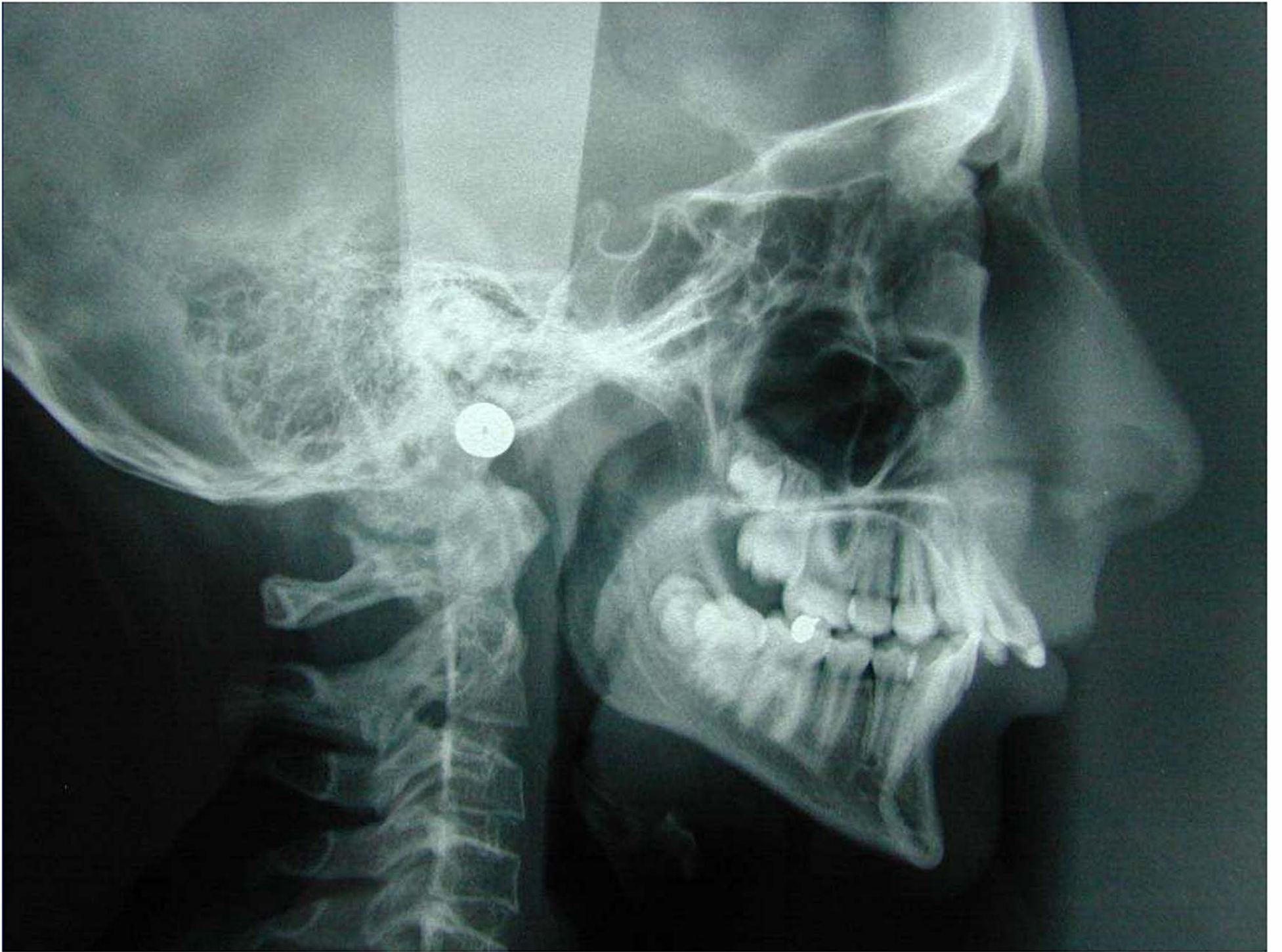
Port en contention



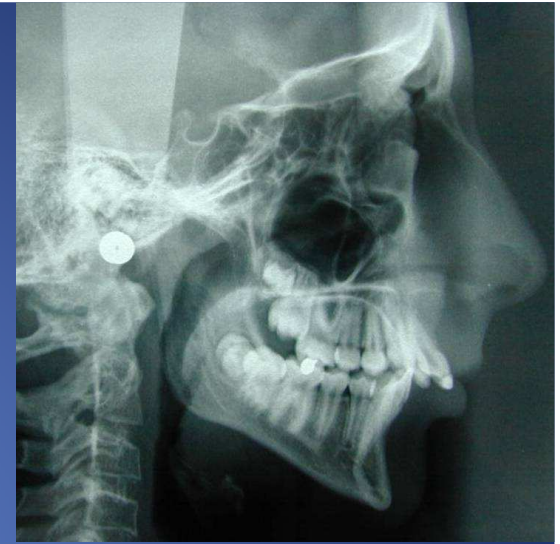


# Classe II pré-ado et ado

L'ancrage mandibulaire







6489 Stéphanie N.

12 Y







PUL +6 M





Braces 12 M





PUL

Braces 12 M



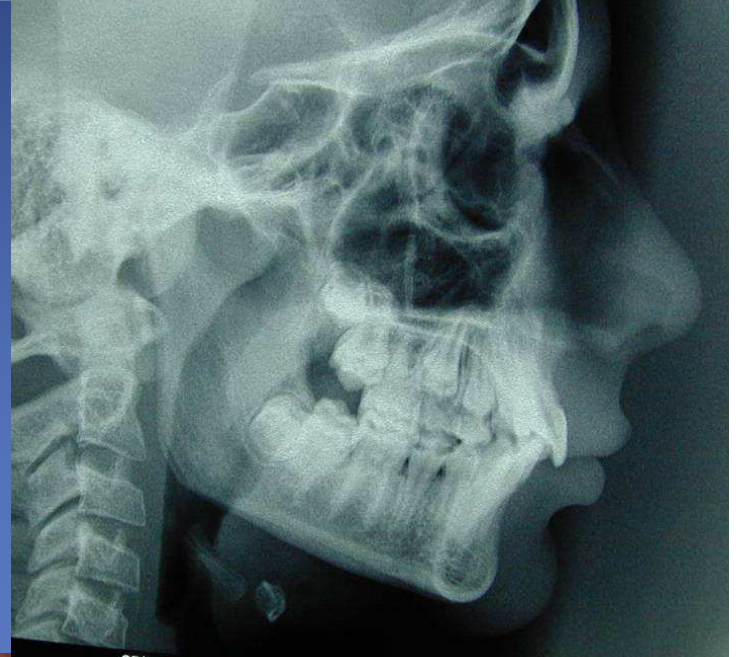
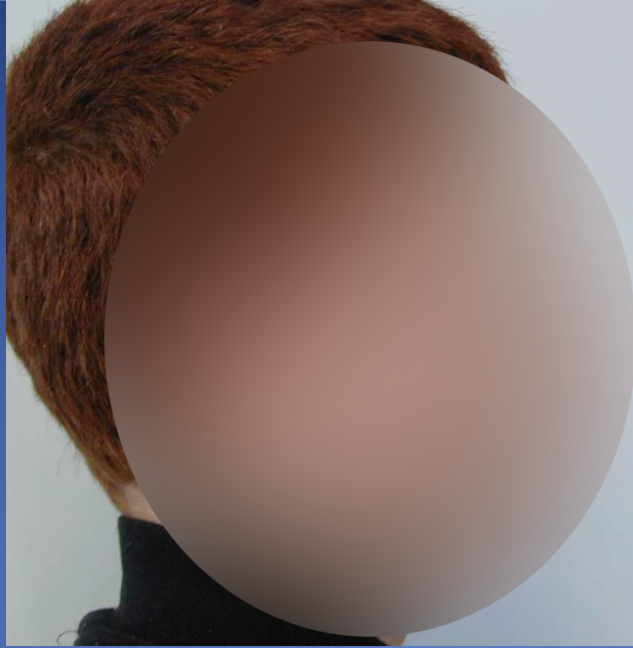
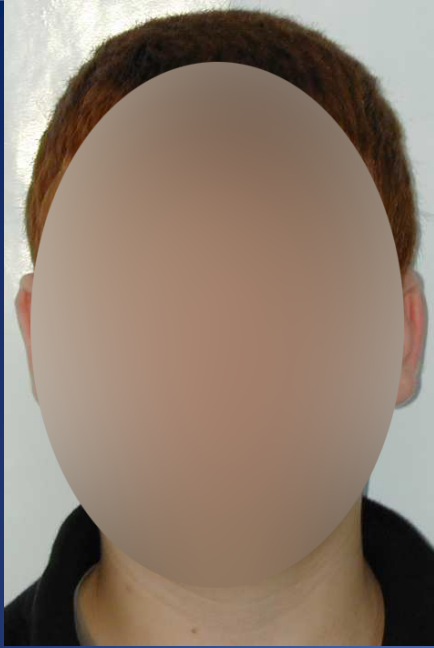




PUL TMA Ado/Teen

PUL + autoligaturants





Sebastien Lev.

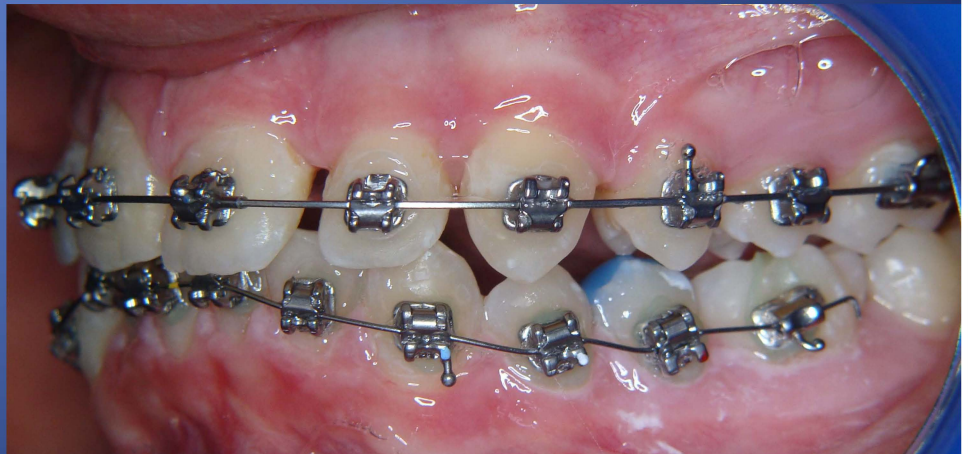
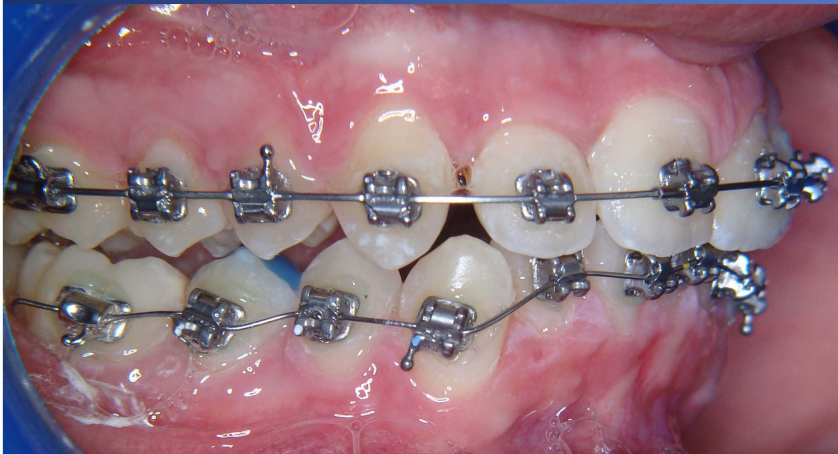
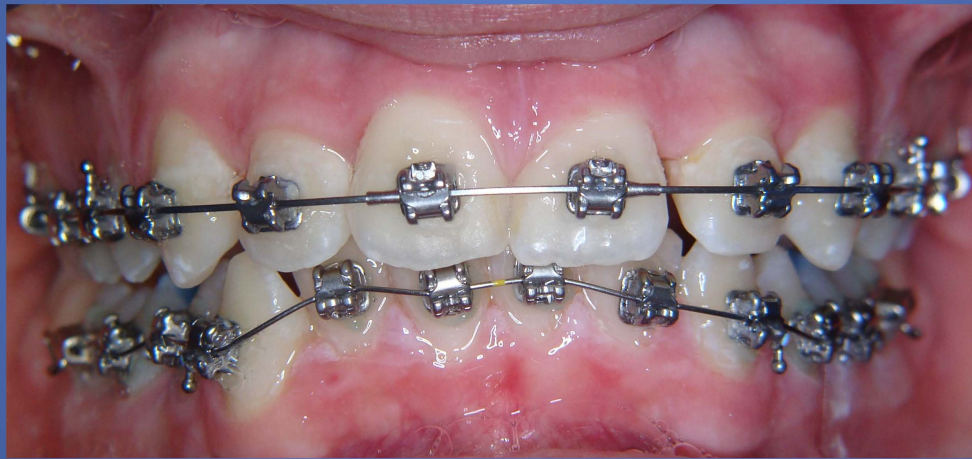
13 ans

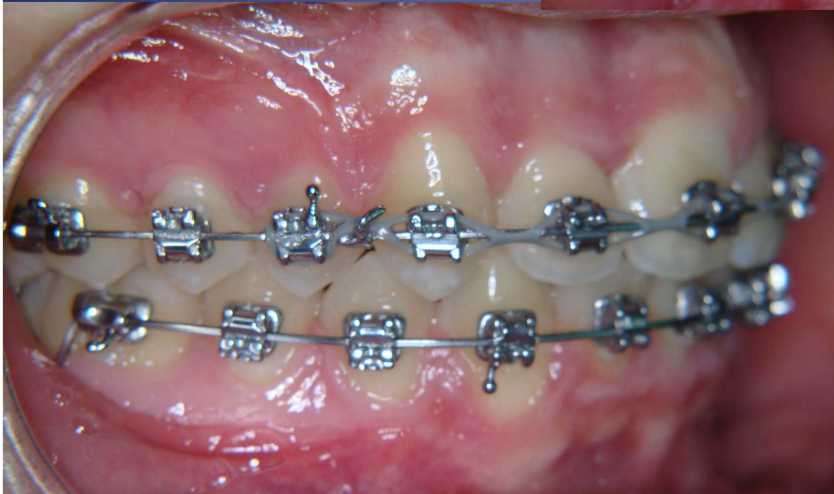
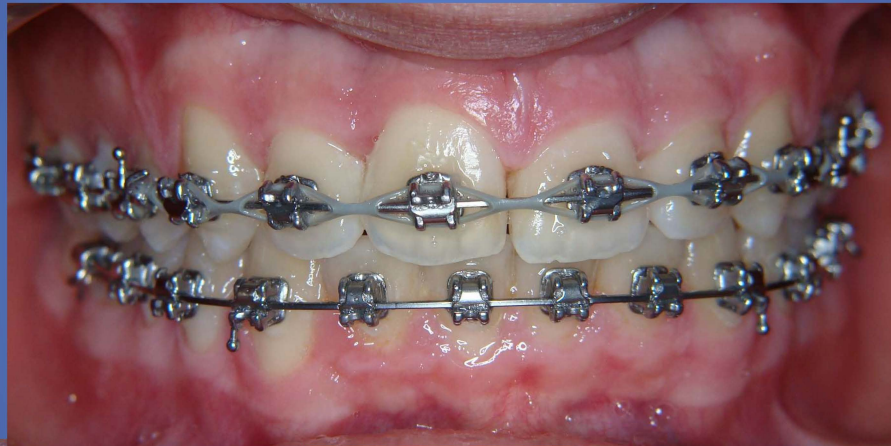


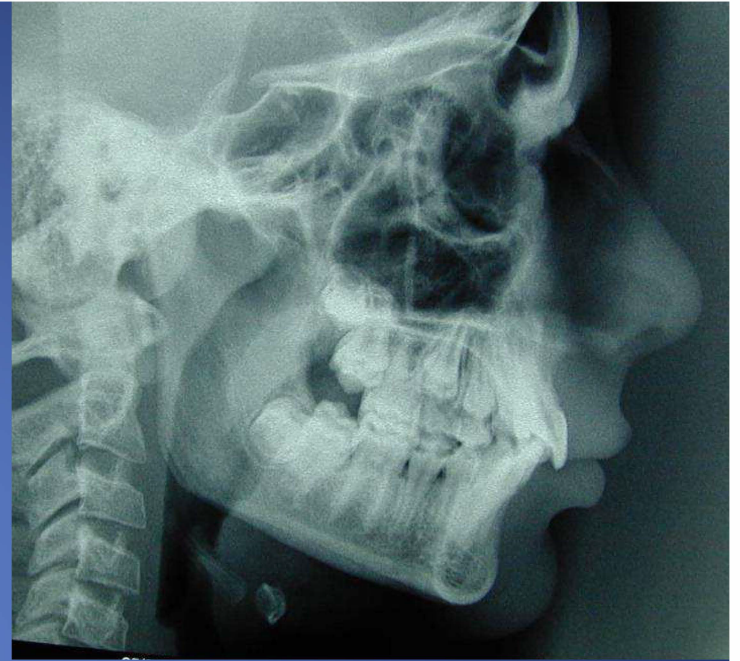
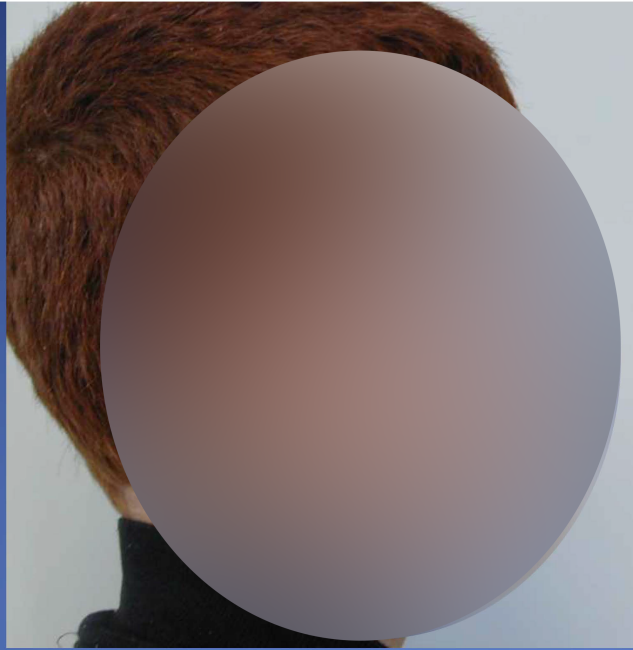


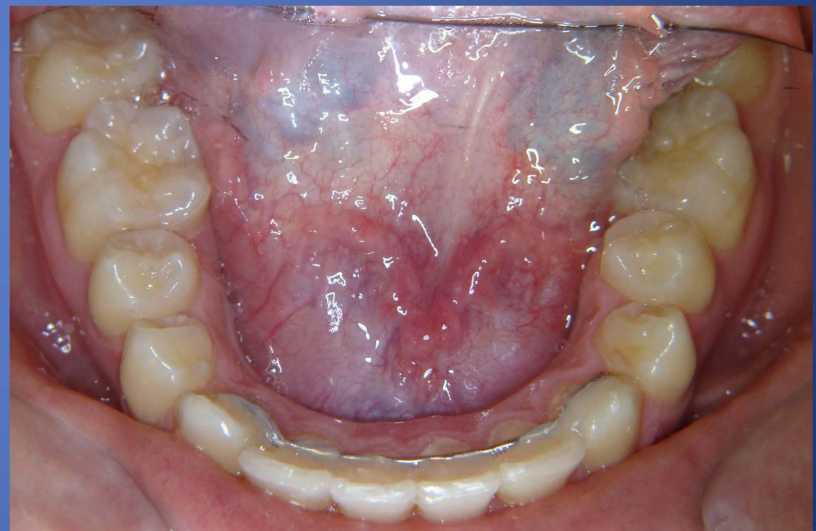


Harmonisation 4D : Sagittale – Transversale- Verticale-Fonctionnelle







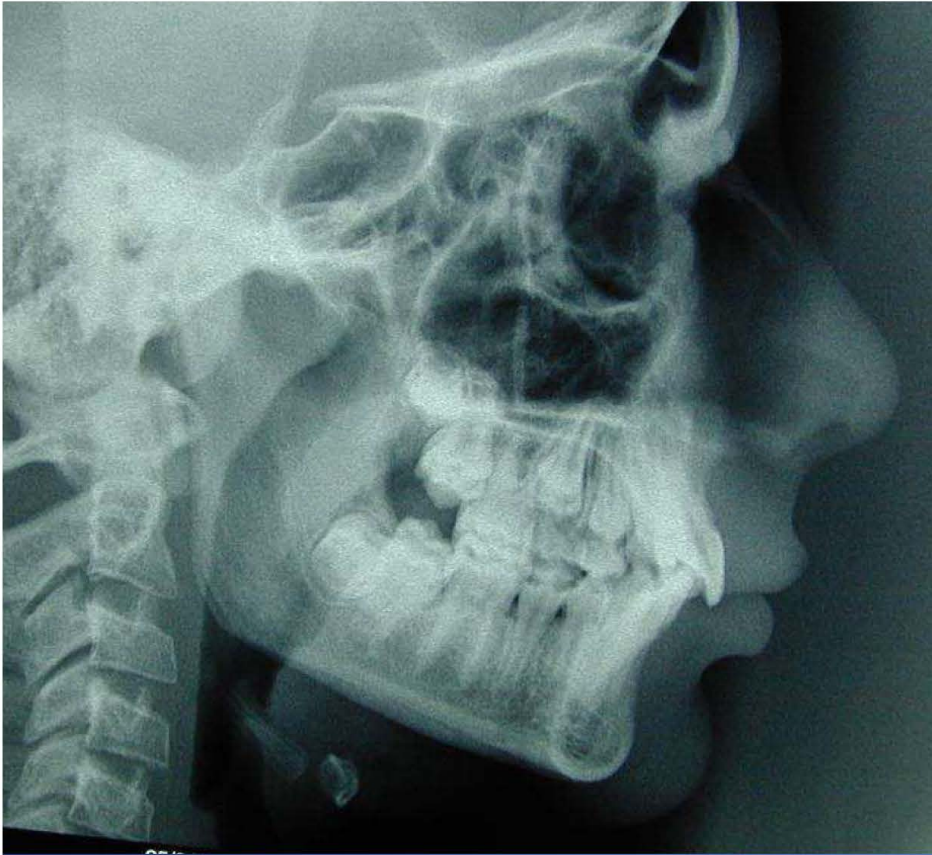


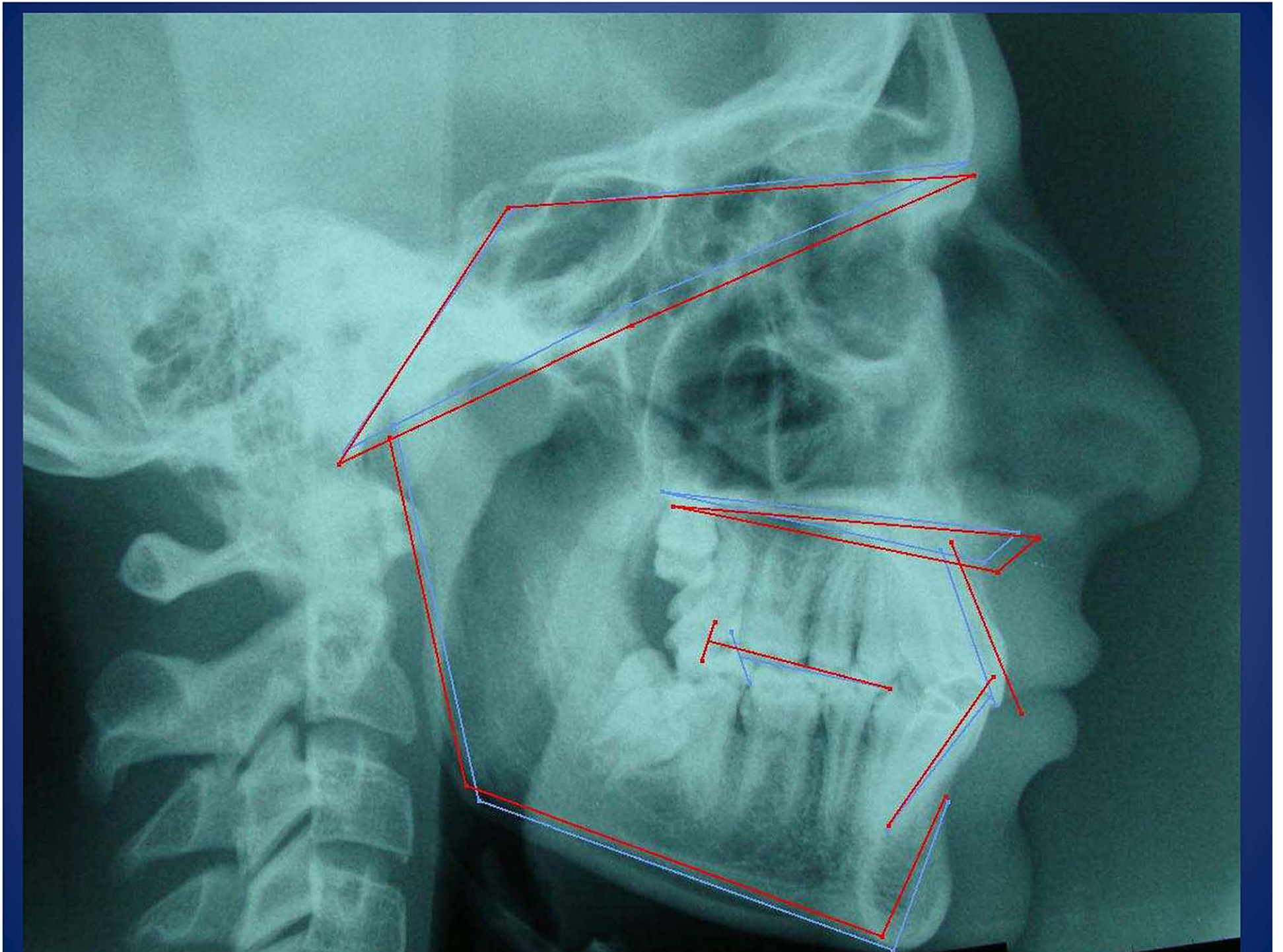


PUL : 8 M  
Innov R: 14 M



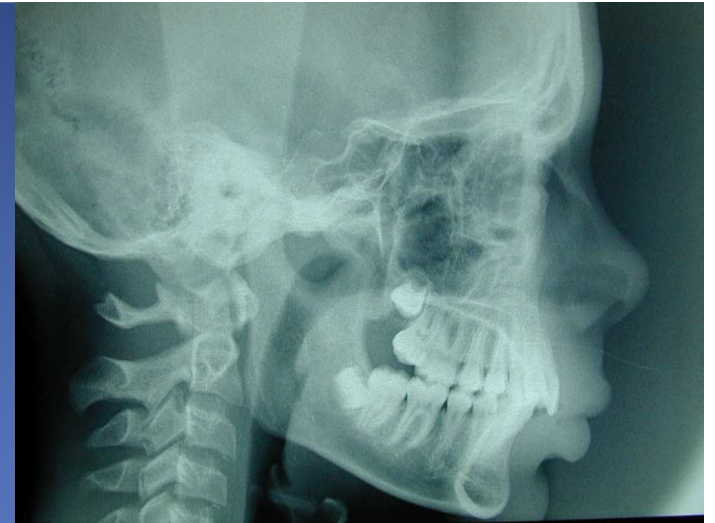








Afop WFO 2010



9083 Nicolas B. 14 ans





PUL TMA : Juillet





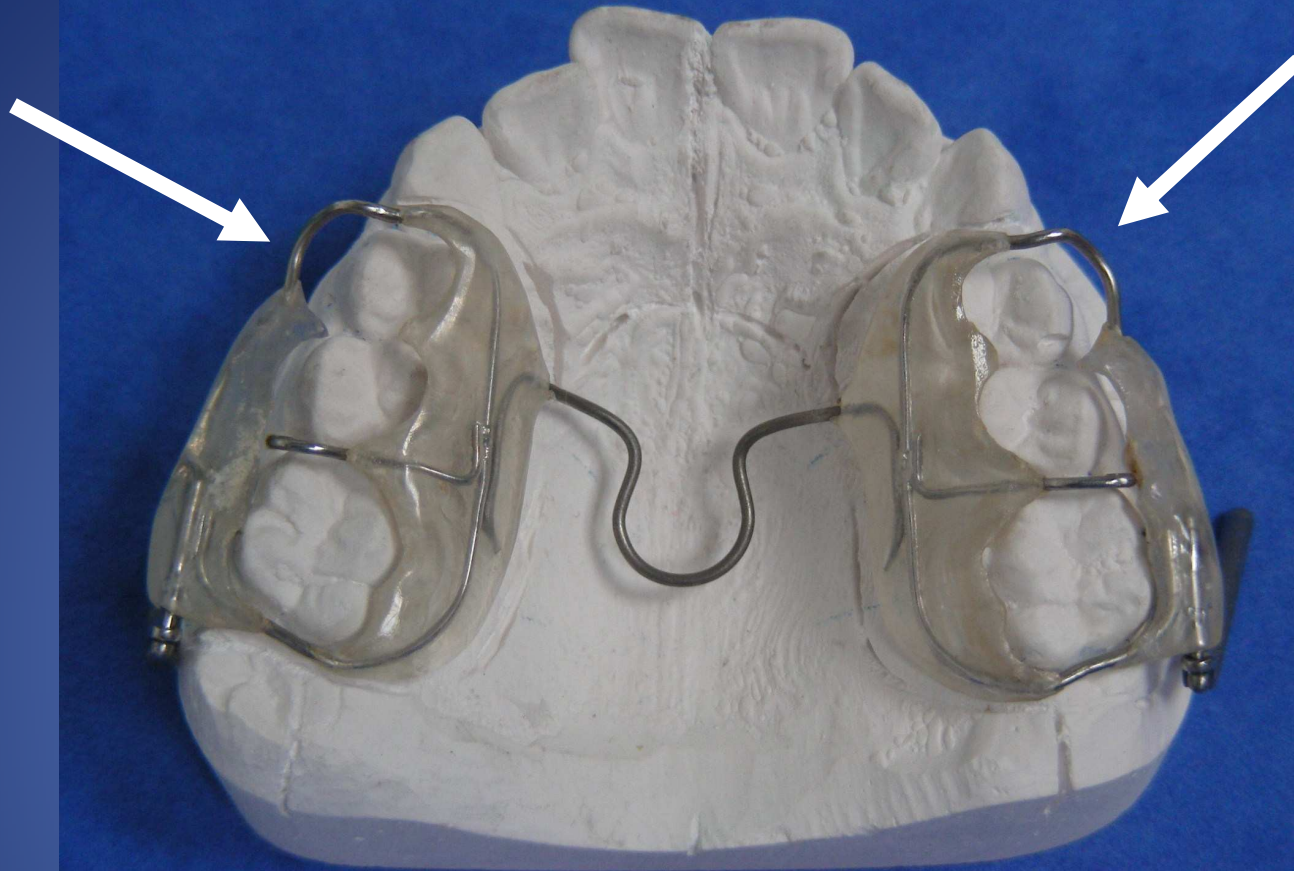
Septembre

PUL+ 10 semaines



Décembre: pose fixe

PUL + 5 Mois



Auto expansion du TMA : PUL + 5 mois de port en continu sur moulages de départ





Juillet



Septembre



Décembre





PUL: 5 M

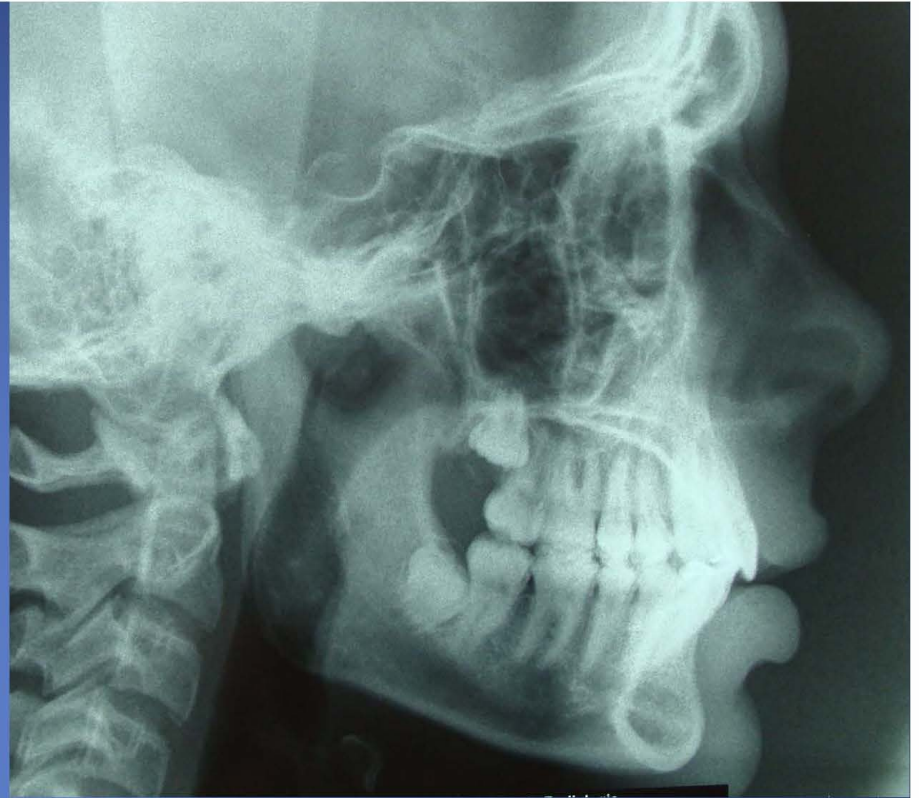
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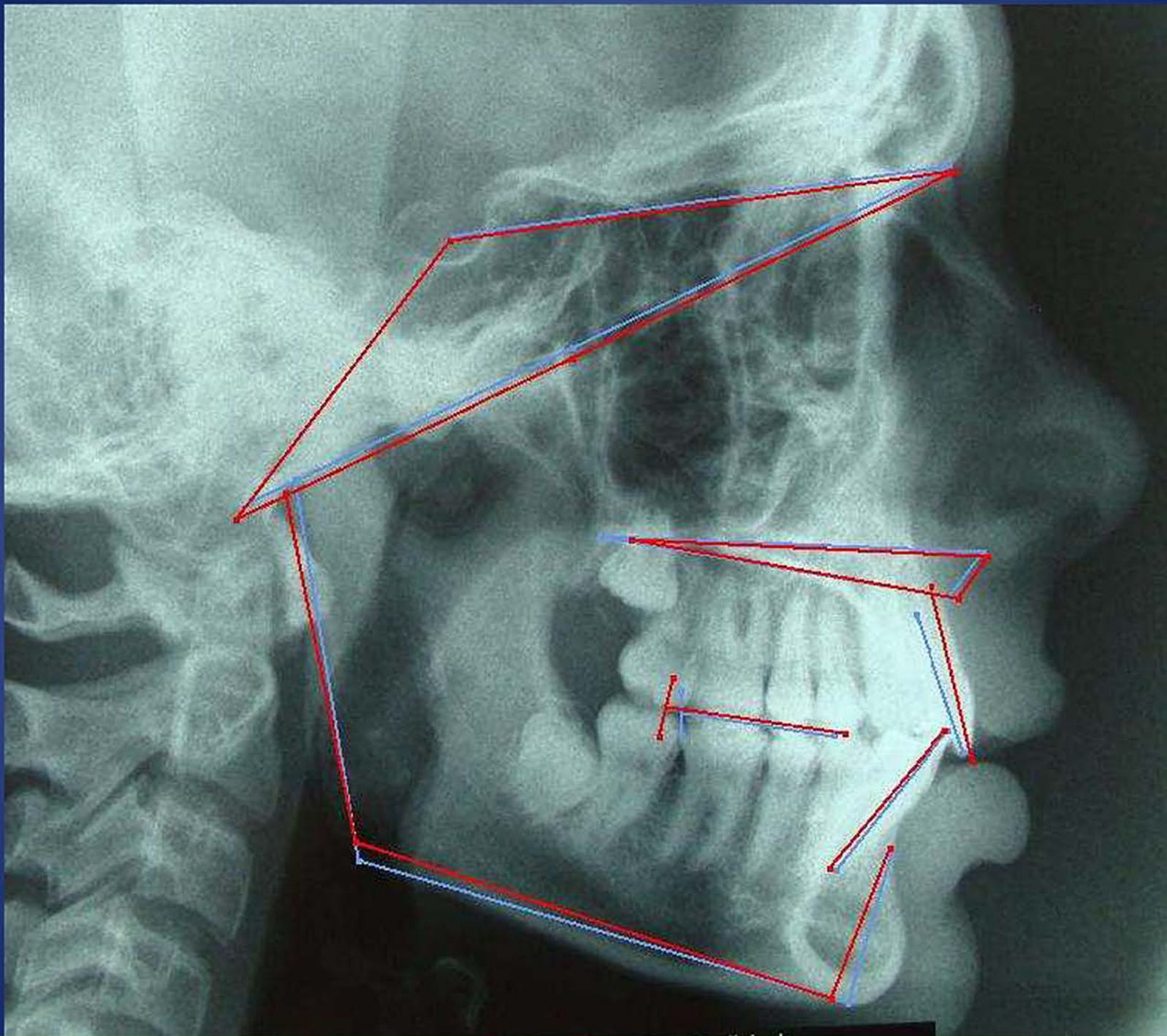
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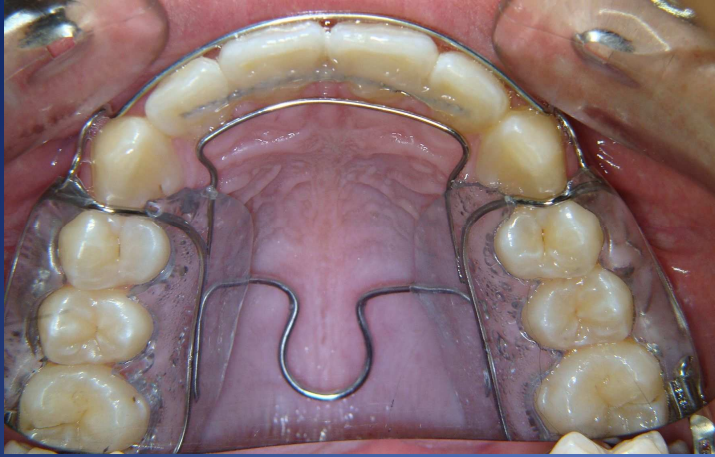
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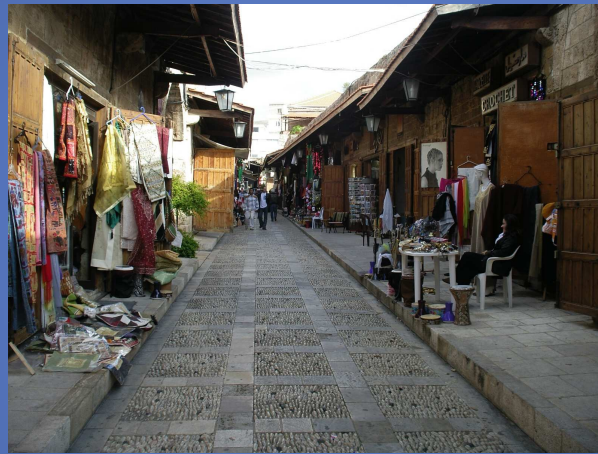


Contention 4D





Contention 4D anti-récidive



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