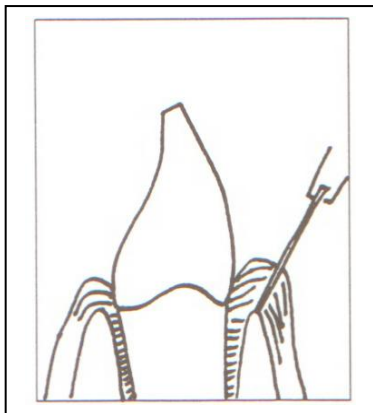
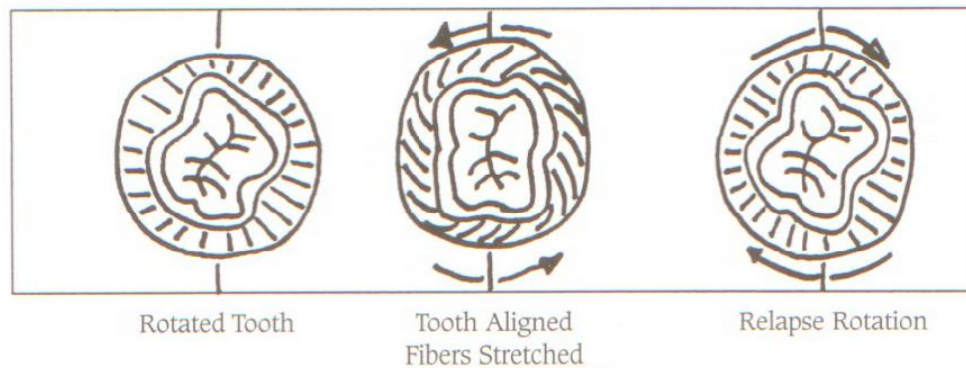


## GINGIVAL SURGERY – AN AID TO RETENTION

Slight changes in tooth position during life are an extension of normal oral physiology. The orthodontic treatment of rotated teeth however, has proved a challenge. Once a rotated tooth is aligned, fibers in the tooth socket, and in the overlying gum tissue are stretched, and under tension. There is a natural process of reorganizing for the tooth socket fibers, where the tension is gradually released. There is no similar process for the gum fibers. Gingival (gum) fibers have been shown to hold this tension for long periods. These fibers have been implicated as the prime reason for the relapse movement on rotated teeth.

### ROTATIONAL TOOTH RELAPSE



Stretched fibers are cut from the surface of the gums to the bone

Studies have shown that a minor gingival surgical procedure called a supracrestal circumferential fibrotomy (CSF) is the most beneficial way to deal with potential relapse in orthodontically derotated teeth. The procedure is performed under local anesthetic. An incision is made in the gums and carried around the tooth. This cuts the gum fibers under tension, and immediately releases this tension. This incision, like a paper cut on a finger, heals uneventfully with only minor if any discomfort. It is important to remember that the tooth socket (periodontal) fibers take time to reorganize and relax. There is no substitute for proper retainer wear.