



Clear Advantage  
ORTHODONTICS

Emergency Care for your Orthodontics



Dr. Suzanne Cziraki

## Emergency Care

We realize that your orthodontic appliances are new to you, so we have prepared this brochure to familiarize you with the components of your braces and to teach you how to solve minor emergencies without having to make a special trip to our office.

True orthodontic emergencies, those in which an immediate appointment is necessary, are rare. Examples of these include the jaw locking open or closed; a fall or blow to the face that knocks teeth loose, or an infection around teeth with braces in place. Problems that arise more often, but are still fairly rare are addressed below. In any event, if you are uncertain as to what constitutes an emergency, it is better to call the office.

After normal business hours, any message left on our phone is not checked until the following business day, unless it is a weekend or holiday. However, only emergency calls will be returned after hours, all others will be returned the next business day. Also, when our doctors are out of town, our office is covered by another local orthodontist. If you have a true emergency please email Dr. Cziraki at [scziraki@shaw.ca](mailto:scziraki@shaw.ca).

### Soreness

Usually, the teeth and gums are a little sore for the first few days after placing braces, and after major adjustments. Two techniques have been shown to minimize this soreness. The first is taking over the counter ibuprofen (Advil). Clinical trials indicate that taking 400mg 1 hour before treatment and 400mg 4-6 hours later substantially reduces soreness. We will let you know which visits will be "major adjustments".

The second is chewing on a rubber "bite wafer", which serves much the same purpose as massaging muscles after a hard workout. By chewing on a wafer or sugar free gum for 5 - 10 minute intervals will stimulate blood flow in and around the teeth. This increased blood flow carries away the metabolic byproducts that cause soreness. Together, these two techniques significantly reduce the soreness associated with braces.

### Appliance Components

#### Archwire

A large wire that fits in the bracket slots around the entire dental arch.

#### Bracket

An attachment that is bonded or glued directly to the tooth; it has a slot thru its center for the archwire.

#### Wire ligature

A small wire that is used to secure the archwire into the bracket slot; it is tighter than the elastic

<b>Elastic ligature</b>	ligature. A small rubber module that is used to secure the archwire into the bracket slot; it is not quite as tight as the wire ligature.
<b>Rocky Mountain Lock</b>	A small tube that locks onto the archwire to prevent it from sliding.
<b>Coil spring</b>	A metal coil that slides on the archwire to move teeth.
<b>Headgear tube</b>	A tube attached to the outside of an upper band; it allows the placement of a headgear, if needed.
<b>Band</b>	A metal ring that is glued around the entire tooth; it has a bracket welded to it.
<b>Lip bumper tube</b>	A tube attached to the outside of a lower band; it allows the placement of a lip bumper, if needed.
<b>Power chain</b>	Several elastic ligatures connected together to help move or derotate teeth, or close space.
<b>Hook</b>	A small attachment on a band or bracket that is used to attach a rubber band.
<b>Lingual cleat</b>	A small attachment on the inside of bands; it is used to help seat the bands as well as for placement of rubber bands in some cases.
<b>Palatal arch tube</b>	A tube attached to the inside of an upper band to allow the placement of a transpalatal arch, when needed.

### Things You Can And Can't Put In Your Mouth

Under normal circumstances, braces do not break. Most breakage problems that arise during treatment are a direct result of eating foods or chewing items that bend wires or break bands and brackets. Therefore, there will be a charge for broken bands or brackets and bent wires. However, we understand that every incidence of breakage is not the patient's fault. In order to take this into account, the first 3 incidences of breakage will be repaired at no cost. Thereafter, a charge will be assessed. Most people make it thru treatment with nothing broken. What follows is a list of things that can and can't be put in your mouth. Although the list is not exhaustive, it is fairly complete. In general, anything hard, chewy, sticky, or sugary is out.

## Good Things

Some items are alright as long as they are cut into small pieces and chewed with the back teeth. This includes pizza, firm fruits and vegetables, meats and other similar items. Sugarless gum is also acceptable. Popped popcorn is all right, but not the unpopped kernels. In general, don't try to tear food with your front teeth - tearing, ripping, or biting forces on the front brackets will almost always break the front brackets loose.

## BAD THINGS HARD CHEWY / STICKY PHOSPHORIC ACID HARD CHEWY / STICKY PHOSPHORIC ACID

Ice	<b>CHEW TOYS</b>	Sweet Tarts
Bubble gum	Whole carrots	Airheads
Coke	Tootsie Rolls	
Pizza crust	Pens	<b>STAINING</b>
Bubble Yum	Whole apples	M & Ms
Dr. Pepper	Milk Duds	Rolos
Hard bagels	Pencils	Red Wine
Laffy Taffy	Cough drops	Gobstoppers
Sprite	Sugar Daddies	Beef Jerky
Nuts	Erasers	Coffee
Starburst	Corn Nuts	Skittles Chewy
Pepsi	Bit 'O Honey	Sweet Tarts
Hard corn chips	Straws	Tea
Gummy Bears	Butterfinger	
Mountain Dew	Marathon bar	
Hard taco shells	Finger nails	
Now & Laters	Tootsie pops	
Hard pretzels	Snickers	
Jelly Beans	Life savers	
Popcorn seeds	Millionaire	
Kraft caramels	Peppermints	
Sunflower seeds	Licorice	
Caramel apples		

## Minor Problems And Solutions

There are some simple techniques that you can use at home to handle a variety of situations (and perhaps save you some driving time) since most problems do not require an immediate office visit. The following list will help to resolve discomfort and reestablish patient comfort until an appointment can be scheduled, or until your next scheduled visit. It is important, however, to notify the receptionist that a problem exists, so additional time can be allotted, if necessary. In order to insure that someone is available to see you, please do not come to the office without calling to schedule an emergency appointment. This will only result in a

long wait time or rescheduling you for an available appointment.

**LOOSE BAND**

If an archwire goes through the band, use nail clippers to clip the archwire just behind the tooth in front of the loose band, then remove the loose band - if it is bothering you. It is best to leave the band in place if there is no discomfort. Call and we will schedule an appointment as soon as possible. Remember to bring the band with you to the next appointment. If the band has either a headgear, lip bumper, or rubber band (appliance) attached to it, stop wearing the appliance until the band can be recemented in our office. Be sure to bring the appliance to the appointment.

**LOOSE BRACKET**

If there is discomfort due to the bracket sticking, first place wax over the sharp area. If the bracket has an elastic ligature, you can use a toothpick to remove the small elastic ligature holding the wire in place, then remove the bracket - if it is bothering you. It is best to leave the bracket in place if there is no discomfort. If the bracket has a wire ligature, you can use nail clippers to cut the wire and remove the bracket. We will schedule an appointment to replace this as soon as possible (if you are in the final phase of treatment) or within several weeks (if you are in the early phase of treatment). Be sure to bring the bracket to the appointment.

**POORLY FITTING HEADGEAR OR OTHER APPLIANCE**

Stop wearing the appliance and call our office immediately. We will determine how soon to schedule an appointment. Be sure to bring the appliance to your appointment.

**WIRE OR ELASTIC LIGATURE LOOSE/OFF**

If any of these ligatures off, call immediately to schedule an appointment to have it replaced. If you notice that the tooth is moving away from the wire, the ligature should be replaced as soon as possible. Stop rubber band wear if the rubber bands are connected to the bracket with the missing ligature.

**WIRE STICKING**

Sometimes the wire ligatures unravel, or the larger archwires break or slide out the back of the bands. This will not hinder treatment, but you can place dental wax over the wire to prevent it from irritating your gums or cheeks. We will schedule an appointment to replace or clip the wire.

**DENTAL WAX**

From adjusting to the initial shock of having tiny little bands and brackets in your mouth, to the little sticks that arise from normal wear and tear of having braces, a small amount of soft dental wax can eliminate most problems. If you have a little stick and can't be immediately seen in our office, pinch off a small piece of wax and roll it into a ball. Then, dry the area as best you can and apply the ball of wax onto the rough area. Don't be surprised if you need to reapply the wax several times a day, for normal talking and chewing activities will tend to dislodge the wax from some areas of the mouth.

**Major Problems**

There are, however, some situations in which an immediate office visit may be necessary. These situations rarely occur, but should be addressed quickly.

**JAW LOCKING OPENED OR CLOSED**

If the lower jaw locks open or closed, this signifies a temporomandibular joint dysfunction. Call immediately to schedule an appointment.

**BLOW TO THE FACE OR JAWS**

Many times, a hard blow, such as being hit in the mouth with a ball or falling off of a bike can embed the braces into the cheeks, loosen or knock out teeth, or in rare cases, break the jaws. It is important to be seen as soon as possible to alleviate any discomfort and rule out any broken teeth or bones.

If you have a true emergency please email Dr. Cziraki at [scziraki@shaw.ca](mailto:scziraki@shaw.ca).