

***Problem Solver:*****WHEN THE PATIENT'S INCISORS CUT INTO  
OR THROUGH THE PLASTIC OF THE APPLIANCE**

It is very important to inspect the Nite-Guide® and/or Occlus-o-Guide® appliance at each appointment by holding it up to the light and looking through the plastic isthmus between the upper and lower incisal edges. If it is noted that one of the incisors (upper and/or lower) has broken into (Fig. 1a) or through the plastic (Fig. 1b), the overbite correction will usually stop with no further progress in spite of good daytime exercise of 2 to 4 hours each day. The reason for this problem is due to nighttime bruxism (grinding) and not to daytime exercise. Regardless of the amount and force of the exercise during daytime wear, the appliance will not be damaged in this way. It is only caused by abnormal nighttime bruxism.

**Repairing the Plastic Cut into By Incisal Edges:**

This problem can easily be repaired by placing a little acrylic monomer (methylmethacrylate) in the affected area of the four incisors or six anterior teeth initially to enable the self-cure acrylic to stick to the appliance. You next mix some self-cure acrylic powder and liquid until it is almost at its sticky stage. Place the mixed acrylic into the area by filling up the entire incisal sockets. Wet it with water and place the half of the appliance without the mixture on the teeth. If the lower half has the mixture, have the patient move the mandible slightly forward into protrusion and ask the patient to slowly close the teeth, but not to bite down completely. If the plastic has been only placed in the upper arch, place the lower section on the teeth and in a similar way, have the patient slowly close by bringing the mandible forward into slight protrusion or at least end-to-end incisally. Stop when the teeth have closed to within about 3 mm. of full closure. There will then be about 3 mm. of mixed acrylic still intact between the upper and lower jaws. Don't have the patient close completely since the hardened acrylic won't be thick enough or strong enough to resist breaking out of the appliance at a later time. Remove the appliance after about one minute and trim the excess from around the margins (Fig. 2). Instruct the patient not to wear the appliance for one day so that it can completely harden.

**Instructions:**

Inform the patient to wear this appliance only at night. If there are more rotations and crowding corrections to be accomplished, a second unaltered appliance is given to the patient only for daytime exercise. If there are no further rotations or crowding corrections to be made, then the patient can also wear the altered appliance during the day (with or without exercise) if that is desired. One must be careful not to create an open-bite with this appliance with prolonged, unobserved daytime or nighttime wear (which will not occur with an unaltered appliance).

**Plastic Cut Completely Through By Incisors:**

Any appliance where the teeth have completely cut through the plastic, must be replaced (Fig 1b). The new appliance should be altered by adding acrylic to the offending arch. If it cannot be determined which arch broke through into the plastic or if both arches have cut into the plastic, then both upper and lower will require self-cure acrylic to be added as described above.

**Alternative Procedures:**

Probably the most successful way to cope with an active bruxing patient is to place a Hawley appliance with a significant anterior bite shelf which is worn at night while sleeping and the Occlus-o-Guide<sup>®</sup> or Nite-Guide<sup>®</sup> is then worn only during the day (either passively for an hour or two with Nite-Guide<sup>®</sup> use, or with active daytime exercise with the Occlus-o-Guide<sup>®</sup> appliance). It is better to make the Hawley after a few months of Occlus-o-Guide<sup>®</sup> or Nite-Guide<sup>®</sup> wear so that the Hawley's fit is coordinated with the Nite-Guide<sup>®</sup> or Occlus-o-Guide<sup>®</sup> appliance's partial correction of the dentition.

Another procedure that can be helpful is to use an extra-hard type Occlus-o-Guide<sup>®</sup> only at night, which resists breakthrough from bruxism. This appliance should not be used for active daytime wear because the appliance cannot stretch and is harder on the teeth during tooth movement.

Some patients with severe bruxing habits can correct substantial amounts of overbite and overjet during only sleeping hours while wearing the Occlus-o-Guide<sup>®</sup> appliance. In these cases, it might be recommended that the patient wear a repaired (with self-cure acrylic) appliance at night rather than either the Hawley or harder Occlus-o-Guide<sup>®</sup> alternative. Obviously none of the corrective measures above will actually correct bruxism, but simply eliminate the effects of it on the appliance and teeth.

**SEE PAGE 3 (BELOW) FOR DIAGRAMS**

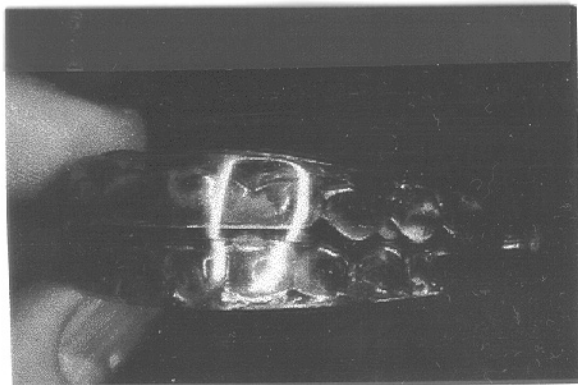


Fig 1a. The lower lateral incisor has partially broken into the plastic from nighttime bruxism, and requires repair.

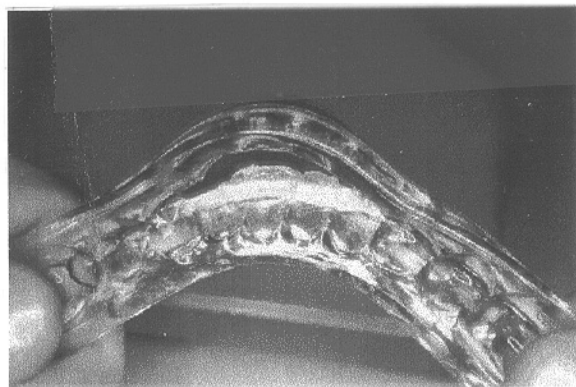


Fig. 1b. The entire outer incisal segment has been broken through and requires the replacement of the appliance,

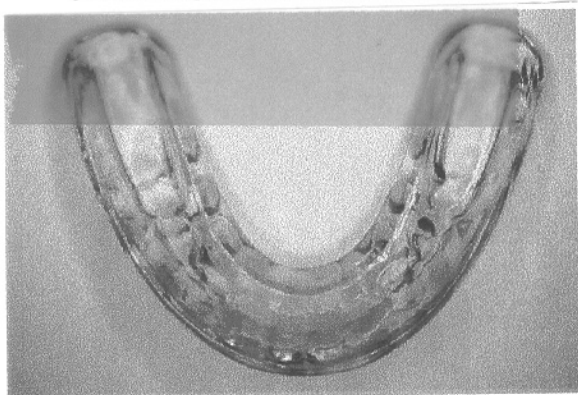


Fig. 2. An appliance with self-cure acrylic added to prevent further break-through due to bruxism.

PROBSVE3, revised 11-4-96