



WAZ UP DOC?

1670 Westwood Drive Ste. E
San Jose, CA 95125

Cameron Mashouf, DDS

Marta Baird, DDS

408-266-8820

www.drmasouf.com

Eliminating the need for extraction of teeth in Orthodontics!

Keeping a full set of teeth for life has always been the primary goal of dentistry. Likewise, in orthodontics, a discipline which deals with the problem of inadequate space, avoidance of extraction has always been desirable. From the early days of orthodontics, there has been a fervent debate about the extraction of teeth. Doctor Edward H. Angle, the father of modern orthodontics (1855-1930), was vehemently against the removal of teeth and argued for the preservation of nature's plan. A few of his students, however, disagreed with him and debated in favor of extraction. The rationale for extraction was based on the notion that the modern human, unlike his cave-man predecessor, does not need as many teeth to masticate the processed food of the present-day diet. Therefore, even a modest degree of crowding in a child would justify removal of some teeth.

People with crowded teeth were not the only ones to get their teeth extracted. Those with protruding teeth and lips were also candidates for extraction. In the 20's a new x-ray machine capable of taking radiograph of a patient's head and face, the cephalograph, was introduced. Using accurate radiographic images of the bony features of the skull, the science of cephalometric analysis was born. Thus were developed landmarks, lines, angles and mathematical formulas to measure the facial dimensions and their relationship to one another. Initially, cephalometrics was used to study the growth patterns of the head and face but soon it was adapted to the study of facial attractiveness. Groups of beauty queens, all white, European descent, were cephalometrically x-rayed, their facial measurements were analyzed and ideal norms for facial esthetics were created. Now, every patient's profile was compared to these standards and any deviation from the "ideal" standards called for corrective measures often involving extraction of teeth.

By the year 1970, when I started my residency in orthodontics, extraction of teeth was the accepted norm. We applied the beauty queens' standards to every patient regardless of age, sex or ethnicity. To accomplish desirable results we were taught to routinely sacrifice at least four or more teeth in nearly 60% of our patients' treatment plan. We were also taught that the best time to start orthodontic treatment was at 11 to 13 years of age when all of the permanent teeth, except the wisdom teeth, have erupted into the mouth. As a young graduate student, I was impressed with the idea of helping my patients look like beauty queens; therefore I accepted the idea of extraction of teeth as part of my treatment protocol.

My epiphany came when one of our professors Dr. Robert Gashgarian invited a few of us residents to visit his office in a Chicago suburb. Using photographs, cephalometric x-rays and study models, he presented cases after cases of the patients he had treated successfully without extractions. The treatment results of these patients appeared more natural than those of the extraction cases I had seen before. Instead of following the rigid cephalometric standards of the beauty queens, Dr. Gashgarian had adopted a more individualistic approach to enhance his patients' unique natural beauty.

After finishing my residency, and armed with this new insight about the possibility of non-extraction treatment, I moved to San Francisco in the summer of 1976. I was offered a teaching position at the University of Pacific, Department of Orthodontics. For the next 10 years, working alongside my mentor Dr. Eugene Roberts, I learned all facets of head and face growth and development. I applied this newly learned knowledge in developing the space for the teeth instead of pulling them in the treatment of our young patients in our combined pediatric/orthodontic practice in SF. Since moving to San Jose in 1990, I have treated several thousand patients without resorting to extraction of teeth by using the growth potential of the young patients' jaw bones. Of course, most of these patients started their treatment around eight years of age.

Extraction is still used as a tool in a large percentage of orthodontic patients nationwide. A survey of orthodontists in the U.S. shows the rate of extraction in the range of 25-85 percent for all orthodontic cases*. This means that the most conservative orthodontists who were surveyed recommended extractions of teeth for 25% of their patients. On the more radical side of the spectrum, a few orthodontists subjected 85% of their patients to extraction.

There are many published studies on the merits of extraction as a method to resolve severe crowding or to reduce the protrusion of the incisors. Most of these studies, however, were either done on older children, i.e. 11 to 13 years of age or on adults. There have been few studies on the rate of extraction for patients younger than 10 years of age.

Recently, our office conducted a study of our own on 200 of our completed cases who started their orthodontic treatment between the ages of 7 to 9. Many of the patients in this sample had started with severe crowding or protrusion. The result of our study shows an astonishing 1% extraction in this entire patient sample. Only two patients in the sample of 200 needed to have some of their teeth removed. The youngest patient in the sample has now reached 13 years of age; there is every indication the treatment results will remain stable for the long-haul.

We may be getting close to that day in orthodontics when we can treat patients comfortably and successfully without the need for extraction. Treatment starting at an earlier age is the key to success.



Before treatment, 9 yrs 0 mos.



An example of a patient treated without extraction

After treatment, 10 yrs 10 mos.

* Weintraub JA et al. The prevalence of orthodontic extractions. Am. J. Orthod. Dentofac. Orthop. 1989;96:462-6.

Office News

Meet our new Orthodontist

Dr. Marta Baird was born in Boise, Idaho and grew up in Tracy, California with two older brothers and a younger sister. After high school she stayed local and pursued her undergraduate at the University of the Pacific in Stockton. She then attended the University of the Pacific, Arthur A. Dugoni School of Dentistry, in San Francisco, where she received her dental degree. After spending time in her mother's practice as a general dentist, she decided to specialize in orthodontics. She completed her Residency in Orthodontics, also at UOP, where she received a Masters of Science in Dentistry and a Certificate in Orthodontics.

In October of 2011, Dr. Baird got married in San Francisco to her husband Simon whom she met while in dental school. Together they have raised a 3 year old Maltipoo named Bailey and a cat named Basil. During her spare time, Dr. Baird enjoys spending time with her husband, running with their dog, hiking, road biking, and cooking.



Dr. Marta Baird, her husband Simon and Bailey

Happy New Year to all



Back row: Kara, Emelia, Nayeli, Tammy
Front row: Dr. Kouvaris, Dr. Baird, Dr. Mashouf



Kara our new Treatment Coordinator joined our practice in October 2011. She has a long track-record of working in dentistry since 1985. Kara is married and has a wonderful seven year old son. In her spare time, she enjoys working out at the gym and spending time with her family.

Kids Korner



Football Trivia– In recognition of our 49ers great season which landed them in the playoffs, we have designed this issue’s trivia about football. Connect the quarterbacks with their teams to qualify for \$25 cash prize. You must be 17 years or younger and e-mail your answer to info@drmashouf.com or drop it off at our reception desk by Wednesday Feb. 29th, 2012

Q	Aaron Rodgers	Pittsburgh Steelers	
U B	Tarvaris Jackson	New Orleans Saints	T
A A	Alex Smith	NY Giants	E
R C	Drew Brees	Dallas Cowboys	A
T K	Eli Manning	New England Patriots	M
E S	Tom Brady	SF 49ers	S
R	Tony Romo	Seattle Sea Hawks	
	Ben Roethlisberger	Green Bay Packers	

On Children—From “The Prophet” by Khalil Gibran

*Your children are not your children.
They are the sons and daughters of Life's longing for itself.
They come through you but not from you,
And though they are with you yet they belong not to you.*

*You may give them your love but not your thoughts,
For they have their own thoughts.
You may house their bodies but not their souls,
For their souls dwell in the house of tomorrow,
which you cannot visit, not even in your dreams.
You may strive to be like them,
but seek not to make them like you.
For life goes not backward nor tarries with yesterday.*

*You are the bows from which your children
as living arrows are sent forth.
The archer sees the mark upon the path of the infinite,
and He bends you with His might
that His arrows may go swift and far.
Let your bending in the archer's hand be for gladness;
For even as He loves the arrow that flies,
so He loves also the bow that is stable.*

Poetry Cove

Khalil Gibran (1883-1931), was a Lebanese-American poet and artist. At the age of 12, he and his family emigrated from Lebanon to the United State and settled in Boston. He is chiefly known in the English speaking world for his 1923 book, *The Prophet*, a series of inspirational and philosophical essays written in poetic English prose. Gibran is the third best-selling poet of all time, behind Shakespeare and Lao-Tzu.

To our dental colleagues and patients: It has been a privilege to be trusted by you. Please keep us on track by expecting the highest standards of dental care.

Please email your comments and suggestions to cameron@drmashouf.com

To unsubscribe emails type “unsubscribe” to info@drmashouf.com