

Having braces fitted to correct your teeth

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Information for Patients

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What is orthodontic treatment

Orthodontic treatment involves the movement of teeth using a variety of braces and is a partnership between you (and your parents) and the orthodontist. Orthodontic treatment usually has 2 phases, an active phase and a holding (retention) phase. The success of treatment depends very much on you following the instructions given to you by the orthodontic team.

The consultation

Before treatment starts the teeth and jaws need to be examined and some records taken. These may include plaster models of the teeth, x-rays (radiographs) of the teeth and jaws, photographs and a medical/dental history. With this information the orthodontist can talk about the treatment plan with you (and your parents). In some cases it may be necessary to recommend taking teeth out to achieve good results but this varies from case to case and where possible will be avoided.

1. The active phase

An average course of orthodontic treatment lasts 1 to 4 years but it can take longer if:

- you not look after the brace properly.
- you fail to come to appointments.
- the case is more complex.
- growth is slow.

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Some cases need more than one type of brace to work either at the same time or one followed by the other. Most of the tooth straightening process take place between appointments, not at the adjustment appointments.

When your brace is first fitted it may feel a bit uncomfortable. It usually takes a few days to get used to it. If the teeth feel a bit uncomfortable then a painkiller should help.

Appointments will vary but tend to be arranged at 8 week intervals. At these appointments the brace will be checked to make sure it is making the correct tooth movements, nothing is broken and you are keeping the teeth and brace very clean.

2. The holding (retention) phase

Phase 2 of orthodontic treatment starts after the active phase is completed and is called the retention phase. This is a very important phase and involves wearing a retainer to hold the teeth in their new position to allow them to settle. If the retainers are not worn the teeth will tend to move. You will usually be advised to wear the retainers for as long as possible, usually for life for 2 to 3 nights a week. The first set of retainers are provided with the treatment about any replacements would need to be sought on a self-funded basis by your dentist.

Your co-operation

Your co-operation is essential if treatment is to be successful.

This means:

- Keeping the teeth and brace very clean
- Avoiding foods that could damage, break or dislodge the brace. This includes hard, chewy, sticky foods such as sweets, toffees, raw carrots, apples and chocolates.
- Regularly checking your brace and teeth to make sure nothing is broken
- Wearing the braces, elastics, and retainers as explained to you by the orthodontic team
- Keeping all appointments and phoning early when you have to make a change to your appointment
- Keeping regular appointments with your own dentist to ensure oral health remains good during brace treatment.

Potential risks and limitations of treatment

It is important to realise that the length of time treatment takes is only an estimate as there are many factors that will affect the final result which are not within the control of the orthodontist. As with any medical or dental procedure orthodontics is not entirely risk free.

- **Poor oral hygiene**

Before orthodontic treatment can start and during the orthodontic treatment, your oral hygiene **must** be good. Poor cleaning can lead to the development of unsightly marks or holes on the fronts of

the teeth around the brackets. These marks are permanent brown and white spots (decalcification). In some cases it may also result in gum disease where the gums become red, puffy and bleed. This may include permanent loss of the bone around the teeth and shrinkage of the gums (recession of the gums). Orthodontic treatment can cause recession of gums. If this is severe, then you can consider stopping treatment and accepting the recession or have a gum graft which you may need to pay for.

- **Tooth roots**

There is a tendency for tooth roots to shorten during orthodontic treatment in all patients. This usually affects only a couple/few millimetres of the tips of the roots. This does not tend to affect the long term health of the teeth. In a few cases they may shorten quite a lot. These cases can be very difficult to predict, but if this is suspected, then X-rays (radiographs) will be taken during treatment to check the root. If it proves to be a major problem then it may be suggested that treatment be stopped. In extreme cases severe root loss could result in the loss of the tooth. Teeth that have previously had trauma (been hit or knocked) before the orthodontic treatment can have more root shortening.

- **Loss of vitality of the inside of the tooth**

Sometimes a tooth or teeth may lose the nerve and blood supply to the inside of the tooth (devitalised teeth). They may need to have root filling carried out by your dentist. These teeth may also look discoloured which may benefit from whitening after age 18 on a self funded basis. If any tooth changes colour, or causes undue pain it should be brought to the attention of the orthodontist. Teeth that have previously had trauma (been hit or knocked) before the orthodontic treatment can lose their vitality during the orthodontic treatment.

- **Pain and discomfort**

After the braces are first fitted, and after each adjustment, the teeth will tend to ache and be uncomfortable for a few days. This discomfort tends to reduce during the course of the treatment. A pain killer such as paracetamol either just before or after the fitting or adjustment appointment will help to reduce this discomfort.

- **Crowns**

Teeth that have crowns and veneers may occasionally break when the brace is removed. Great care is taken to try and avoid this happening but if it does occur they would need to be replaced by your dentist after the orthodontic treatment. You would most likely need to pay for this.

- **Black triangles**

In adults when crowded teeth that have been worn unevenly in the crowded position are straightened, there is a tendency in some patients for small triangular gaps to appear between the teeth. To remove or reduce these gaps it is often suggested that a thin layer of enamel is removed between the teeth before the brace is removed. Or you can accept the gap or have a white filling added to reduce the size.

- **Small and missing teeth**

Some patients naturally have some teeth that are slightly smaller than average. To give these teeth a better appearance it is often suggested they are built up or enlarged with porcelain or white filling material by their dentist after orthodontic treatment. In those patients with missing teeth it may be suggested that the gaps are filled by implants or bridges by their dentist after orthodontic treatment.

- **Fractures of the teeth enamel**

The hard outer coat of your teeth is called enamel and the small metal squares of the brace called the brackets are glued to the enamel to allow the teeth to be moved. When these brackets are removed, either during treatment or at the end of treatment very rarely a small fragment of the enamel can break away from the tooth surface. In the unlikely event that this should happen, the small defect will need to be repaired by your dentist.

- **Movement of teeth after the brace is removed**

At the end of the active phase of orthodontic treatment teeth need to be held for a while to allow them to settle. This is done by wearing a retainer brace and is called the holding (retention) phase. Teeth are a living structure and after orthodontic treatment in most people there is a tendency for the teeth to move a little throughout life, especially the lower front teeth. If you want your teeth to stay straight throughout your life, you may need to consider wearing retainers a few nights a week for life.

- **Jaw joint pain (temporomandibular dysfunction TMD)**

It is common for patients to have pain from their jaw joints during or after treatment. The pain can be related to many factors such as grinding, clenching during times of stress such as exams as well as brace treatment. If this occurs, you would need to let the dentist or the orthodontist know so that it can be managed. Normally it is managed with a soft diet and painkillers such as paracetamol.

Abandoned and discontinued treatment

If you do not co-operate with the orthodontic treatment or your oral hygiene is not good enough, the orthodontic treatment will have to be stopped. The braces will be removed and it will not be possible to leave the teeth in their best position. You will have to pay for re-treatment.

Any dental treatment mentioned above will have to be carried out by your own dentist and the cost of the dental treatment will not be covered by the department.

Contact details

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