

See Through Success with *Invisalign*

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In a world where an attractive appearance is at the forefront of everyone's mind, dentistry has a role in making this possible. The first thing that we notice when we meet someone is the feel of their hand and the look of their face. After this initial encounter, we begin to break down the facial features: the eyes, the skin, and, most importantly, the smile. As dentists, we zone in on the teeth and smile. Many times we make that first diagnosis and say, "I can fix his/her teeth and make them straighter and whiter." We believe that every person has a secret wish to have straight pearly white teeth. But, how can we, as new dentists, make that happen?

In dental school, we spend countless hours preparing crowns and placing fillings; however, we are only given a few months of orthodontic training. Luckily for new dentists, with the introduction of Invisalign there is now the option and opportunity to straighten patients' teeth without spending extra years in school. Invisalign, branded the "clear braces," is a set of clear trays (aligners) that the patient changes every 2 to 3 weeks, enabling their teeth to rotate and eventually achieve straight alignment.

After my graduation, I was desperately trying to keep up with the rigors of seeing patients in a private practice. Diagnosis, restoration, patient management, and time constraints were thrown at me all at once. Now that I have gotten into the groove of being in private practice, I have had the chance to sit back, scratch my head, and begin to help the patients I was referring. With all the pressures of looking good and having that straight smile, I wanted to do something to help my patients. Catering to a population with orthodontic relapse and adults who did not like the idea of having "railroad tracks," Invisalign provides me with the opportunity to address and solve my patients' needs.

Back to School

So, to give myself another tool in my dental belt and to offer another service to my patients, I started to look into how to become an Invisalign dentist. Invisalign offers 2 courses for the general dentist. The first 2-day course is Certification I, which jump starts your Invisalign career. In this course, I learned about the fundamentals of performing Invisalign cases. The staff also learned billing procedures, impression-taking methods, photography techniques, and the most successful method of selling the case. Also, I learned how

to diagnose and treat cases that would be successful. I learned how to present the case to the patients and to understand the mechanics behind the procedure.

As I sat in class learning the fundamentals of straightening teeth, I began to feel a new excitement for the world of orthodontics. I thought to myself, I can rotate a few teeth, close a few millimeters of a diastema, and change someone's profile. After a full day of information and a newfound way of treating patients, I returned the next day to learn the computer program. In a world of constantly changing technology, Invisalign presents itself at the forefront of the "latest and greatest." The second day of the course taught me how to rotate images to visualize patients' occlusion and alignment in a 3-dimensional fashion.

Visualization Tools

The most exciting tool that Invisalign offers is seeing the anticipated final outcome of the patient's teeth. The program is set up so that the dentist has complete control over the diagnosis, the rotation of the teeth, the change in profile, and the occlusal preference. The dentist can also see the exact movement of the patient's teeth every 2 weeks until the final outcome.

If the dentist is not satisfied with the final outcome, he can keep changing the way the patient's teeth look until he is satisfied. Invisalign incorporates attachments, which are composite buttons that fasten to the teeth to help with the rotation. Invisalign will also suggest some interproximal reduction if the



Figure 1—Before Mandibular



Figure 2—After Mandibular



Figure 3—Before Mandibular



Figure 4—After Mandibular



Figure 5—Before Mandibular



Figure 6—After Mandibular

patient needs more space to move the teeth around. Thus, all these factors achieve the orthodontic treatment that we desire. We all love to be in control and know the final outcome before it happens. Invisalign can provide this to a certain extent. I left the seminar knowing that the way I had been treating patients would begin to change.

Incorporating Invisalign into

my diagnosis was very simple. I began treating patients with rotated teeth who normally would have been referred to the orthodontist (Figures 1-6). Patients with orthodontic relapse were very grateful that they did not have to go through the torture of brackets and gingival overgrowth for the second or even third time.

In my practice, if a patient is



Figure 7—Before anterior



Figure 8—After anterior



Figure 9—Smile after

interested in Invisalign, their visit is generally a 15-minute consultation. At this visit, I determine the patient's reason for wanting Invisalign, the expectation of the patient, and a feel for the patient's adherence. A large portion of successful treatment is patient adherence, so choose your patients wisely.

Candidate for Success

Once I have determined a patient is an Invisalign candidate, I then set up another appointment to begin treatment. I typically take study model impressions so I can begin to formulate a treatment before their next appointment. Also, before Invisalign, all restorative treatment needs to be completed.

The first Invisalign visit typically takes about an hour. At this appointment, I take a maxillary and mandibular impression; a bite registration; and 8 photos, which include full face, profile, smile face, occlusal views, side view of teeth, and an anterior view. The patient will also need to have a full set of x-rays taken or a Panorex. There are special trays for the impressions, but these are all provided by Invisalign. There are a few impression materials that are suggested by Invisalign that will give you a better impression outcome.

After this visit, I fill out the treatment sheet with all my recommendations and send it to Invisalign. Approximately 2 weeks later, I get a computerized model off of the Invisalign Web site. The Web site is very easy to maneuver and understand; especially because we are a generation that lives on the Internet. I then make changes until I am satisfied with the final outcome. I typically have my patients come in to view the computerized model with me. This computerized model is called the ClinCheck. Once I am satisfied, and the patient is satisfied as well, I can accept the case

from Invisalign, and at this point they begin to make the aligners. Three weeks after the acceptance, I get all of the patient's aligners and a treatment sheet that states where I may need to place the attachments or possibly do some interproximal reduction to create space for the teeth to move.

This third appointment takes about an hour to place the attachments, perform some interproximal reduction, and to review the treatment instructions with the patient.

I typically see my patients every 2 weeks or once per month to check on their progress, provide them with their next set of aligners, and determine their motivational level at that time.

Conclusion

The final outcome of all my Invisalign cases has been success. The patients are excited, beautified, and have a new self-confidence. Invisalign has been one of the most enjoyable procedures that I have incorporated into my dental career. Patients love the simplicity of changing their teeth and their look. I love the way Invisalign is a fun and relatively straightforward procedure. I can now cater to another area of concern for my patients.

Patients finish their treatment with a new outlook on the world of dentistry. They no longer hate going to the dentist, but now say, "Look how my dentist changed my look and my life." (Figures 7-9).

Invisalign advertisements are now found everywhere. When you flip open *InStyle* and *Glamour* magazines, there are numerous ads promoting straighter teeth with invisible braces. As dentists, we can provide this esthetic result for our patients and enjoy performing the procedure. Then we can ask ourselves, "How much better can this concept get?" ■