News, comments, and service announcements

Professor Bjørn Zachrisson receives the Paul Herren Award 2009

The Department of Orthodontics and Dentofacial Orthopedics, University of Bern, Switzerland, established the Paul Herren Award in memory of its former director, Professor Paul Herren. The award will be given annually to persons from the orthodontic specialty in recognition of outstanding achievements in teaching, clinical excellence, and orthodontic research.

The first Paul Herren Award was presented to Professor Bjørn Zachrisson, University of Oslo, Norway, on December 3, 2009, in Bern, in a ceremony attended by 220 Swiss colleagues.

The award committee wrote in its laudation: “Professor Zachrisson belongs, without doubt, to the most prominent orthodontists of our time. With his clinical and research work on prevention of iatrogenic damage, bracket bonding and debonding, bonded retainers, aesthetics and interdisciplinary treatment, as well as orthodontic finishing and excellence, he has inspired, influenced, and motivated generations of orthodontists and other dental specialists.”

B. F. and Helen E. Dewel Award for best clinical research article

The editorial board of the American Journal of Orthodontics & Dentofacial Orthopedics (AJO-DO) has announced that it will award the 2010 B. F. and Helen E. Dewel Award to Dr Kevin O’Brien, University of Manchester, United Kingdom. This award is sponsored by the AJO-DO and named in memory of long-time editor Dr B. F. “Tod” Dewel; it recognizes the best clinical research article published in the AJO-DO each year. This honor will be shared with 23 coauthors who participated in this multi-center, randomized, controlled trial using a contemporary functional appliance. The trial was funded by the United Kingdom Medical Research Council. The article, entitled “Early treatment for Class II Division 1 malocclusion with the Twin-block appliance: A multi-center, randomized, controlled trial,” was published in the May issue (O’Brien K, Wright J, Conboy F, Appelbe P, Davies L, Connolly I, et al. Am J Orthod Dentofacial Orthop 2009;135:573-9).

This large prospective clinical trial was designed to evaluate the effectiveness of early orthodontic treatment with the Twin-block appliance for the correction of Class II Division 1 malocclusions. At the start of this 10-year study, children were randomized to an early treatment group or an observation group. In an earlier article, the authors reported interim results from the first phase of the study. They showed that early treatment was effective, leading to a reduction in overjet, a small skeletal change, and an improvement in children’s self-esteem. In this new article, final results, including phase 2 treatment during adolescence, were reported.

One hundred forty-one patients completed treatment or accepted their occlusion. Those who had early treatment had more appointments, experienced...
longer overall treatment times, and incurred more costs than did the adolescent treatment group. Noted O'Brien, “Early treatment with the Twin-block appliance, followed by a further course of treatment in adolescence at the appropriate time, does not result in any meaningful long-term differences when compared with 1 course of treatment that starts in the late mixed or early permanent dentition. There are definite disadvantages to the 2-phase approach, including an increased burden for the patient in terms of appointments, costs, length of treatment, and an inferior final occlusal result.” This study reinforces the findings of other similar randomized controlled trials previously published in the AJO-DO. Early treatment for Class II skeletal problems is not routinely justified.

The award will be presented on Sunday, May 2, 2010, during the AJO-DO Editorial Board Breakfast at the 110th AAO Annual Session in Washington, DC.

CDABO Case Report of the year

The winners of the CDABO Case Report of the Year Award are Drs Jorge Faber and Flávia Velasque of Brasília, Brazil, for their case report entitled, “Titanium miniplate as anchorage to close a premolar space by means of mesial movement of the maxillary molars.” This article was published in last year’s October issue (Am J Orthod Dentofacial Orthop 2009;136:587-95).

The patient’s main problems included asymmetrically missing teeth, a tooth-size Bolton discrepancy because of microdontia, generalized anterior diastemas, and a concave facial profile. Treatment objectives included closure of the maxillary and mandibular diastemas to obtain adequate posterior occlusion on the right side without severely affecting the facial profile or changing the dental midlines. Accomplishing these objectives required comprehensive orthodontic treatment combined with a titanium miniplate to provide anchorage for mesial movement of all teeth posterior to the space of missing tooth 15. The primary disadvantage of this approach was the need for 2 surgeries: to implant the miniplate and extract tooth 55, and to remove the miniplate. However, that option avoided the use of osseointegrated implants and implant-supported prostheses. The space of missing tooth 15 was closed with the 7.4-mm mesial movement of the maxillary right molars. A Class II relationship was achieved, and tooth 17 established occlusal contact with the mandibular first molar. The original treatment objectives were achieved, and this approach required only 1 temporary implant—the miniplate—instead of 2 single-tooth implants. The miniplate was successfully used as anchorage for the significant mesial movement of the maxillary molars, resulting in an excellent treatment outcome.