

What Can I do?

- Use social stories, YouTube videos and library material to prepare your child.
- Make sure your child's teeth are clean with no decay.
- Be prepared to have several visits before any treatment is carried out.
- Brace treatment can be uncomfortable. Be prepared to help manage it.
- Communicate with the orthodontist to best help your child.
- Understand that the treatment offered will be the best suited to your child's needs and teeth.

Our team is committed to excellence in our orthodontic results, utilising up-to-date techniques and technology. Equally as important, we are committed to the creation of an environment that is open and friendly. We aim to provide consistent quality orthodontic care for all patients and have systems which define our responsibilities when looking after you. In proposing treatment, we will:

- Take account of your wishes
- Do all we can to look after your general health
- Ensure practice working methods are reviewed regularly
- Ask patients for their view on our services

we look forward to assisting you and welcome any questions you may have

Further Information

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NHS England

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mon -thu 8:00 - 5:15

fri 8:00 - 4:00

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Harpenden & St Albans Orthodontics



Orthodontics and Children with Additional Needs



Our Aim

Children with additional needs can certainly have orthodontic treatment. The treatment offered can vary based on your child's individual treatment needs and requirements. The level of orthodontic care that the patient may receive can depend on:

- The level of understanding of the patient.
- The level of cooperation from the parent and patient.
- The amount of time and effort the parent or carer is able to give.

A Few Points to Consider

1. Cooperation

Orthodontic treatment with braces requires no active decay, a good standard of tooth brushing and very good cooperation. If your child is able to tolerate sitting in the dental chair and have work such as cleaning, filling or extractions done then treatment can be considered. A barometer of cooperation can be assessed at the initial visit. Having photos of the face is reasonably easy but having photos of the inside of the mouth harder. Having an examination is relatively easy but having impressions (moulds of the teeth) or an xray of the whole mouth can be difficult. We recommend that you have your teeth checked before your orthodontic treatment begins and at regular intervals specified by your dentist.

Routine orthodontic treatment involves a long-term commitment consisting of multiple visits to your orthodontist. A general anesthetic or sedation is not usually given for routine orthodontic treatment in the UK.

Further consideration may also need to be given if your child requires:

- Extra time.
- Several short acclimatising visits.
- Times when cooperation is best.
- Low level lighting or low noise.

Make sure you discuss this with your dentist before the referral is made and ask before attending the orthodontic appointment.

2. Medical

Most medical conditions, as long as they are controlled, will not preclude patients from accessing orthodontic care. The treatment plan will have to take into account the condition and the stage e.g acute or chronic, ongoing or limiting. Because the brace will be in the mouth for 18-24 months the patient will need to attend regularly for that length of time. Extractions as part of the plan may require referral for sedation or GA.

3. Access

If your child can physically access the dentist then they should be able to attend the orthodontist. If you require parking close to the surgery remember to enquire when the referral is made.

Unfortunately we have no disabled access at our Harpenden practice. Treatment may be available at our St. Albans practice for anyone who has this requirement.

4. Oral Risk

Cleaning will become harder once a brace is in the mouth. Remember more time will be needed as well as use of a high fluoride dose toothpaste and mouth rinse. The use of an electric toothbrush or adaptations to a manual toothbrush may help. Advice can be sought from the hygienist. Patients who require a third party or multiple members of the team to care for their oral health may not be suitable for orthodontic treatment.

5. Legal and Ethical

Assess the risk versus the benefit of orthodontic treatment before commencing treatment. A patient would need to have a level of understanding. Use of social stories, translators and advocates may help but it may be difficult for a child with additional needs. A second clinical opinion may be required.

6. Treatment complexity

Fitting a removable brace in a patient is simple but it may be hard for the patient to tolerate. Placing a fixed brace is moderately difficult as is cleaning the brace and having the brace removed. Remember retainers have to be worn at the end of treatment to keep the teeth straight.