

“You can’t do that. That’s not possible”



Werner Schupp

In March 2003, a little over 20 years ago, I treated the first child using aligner orthodontics, in this case the Invisalign technique. At that time, orthodontists were not licensed to treat children; we were not allowed to do it. Only after the eruption of all permanent teeth except the third molars were we able to treat patients using Invisalign. That didn't make sense to me, so after several meetings with Align Technology staff, I treated the child in question, who was then aged just 7 years. I can still hear the critics who at the time were unanimous in saying “You can't do that, that's not possible”. We published the treatment in the literature, in an article in *Kieferorthopädie* and in the book “Aligner Orthodontics”. Following the child's successful treatment, our practice received special authorisation from the US Food and Drug Administration (FDA) to treat 16 children, and the treatment records went to the FDA. As a result, the Invisalign Teen product was created, and with it came official authorisation to treat children using the Invisalign technique.

All those who started out in aligner orthodontics in Germany in 2001 still remember the voices that preachily repeated “That's not possible!” And indeed, after more than 20 years, these voices still exist.

What experience, dear colleagues, dear readers, do you have with aligner orthodontics? We have prepared questions on this subject and would like to ask our colleagues and you to share your opinion with us. We begin in this issue.

Today, much to everyone's delight, there are many systems available on the market. In addition to outsourced aligner systems, where documents are sent to a company, we are now able to carry out the virtual treatment and production of aligners independently in our practice using the in-office aligner procedure. In our practice, we now treat almost all patients with aligner therapy, and most of them using the in-office aligner technique.

Many colleagues have been able to demonstrate in the literature that almost all tooth movements are performed successfully with aligners, including bodily tooth movements. Aligner orthodontics can be combined with functional orthodontic appliances to excellent effect, with skeletal anchorage (temporary anchorage devices), orthognathic surgery or occlusal splints. We have managed to integrate the missing link, the virtual articulator, into the aligner system, the virtual treatment simulation (VTS) (Dental Motion Decoder system [Ignident, Ludwigshafen am Rhein, Germany]/OnyxCeph Aligner 3D [Image Instruments, Chemnitz, Germany] and the FAS aligner system [Forestadent, Pforzheim, Germany]). This has simplified aligner orthodontics and improved its range significantly in the functional treatment process.

There are still many unanswered questions that we need to continue to work on, relating to staging, attachments, combinations of movements, accuracy of tooth volume in the VTS, aligner material and much more. This is



what we are working on as the board of the JAO, and we are asking for publications on these topics.

In his previous editorial written for our journal, Prof Krey correctly pointed out the importance of the in-office procedure, especially with regard to the training and continuing education of our young colleagues. Only in this way can the less experienced learn to handle aligner orthodontics safely by performing the virtual treatment completely on their own. From my own experience, I would like to emphasise that even experienced colleagues can still learn a great deal. We don't have to print, we don't have to cut out and polish aligners; our dental technicians can do that. But the

important intellectual part, the VTS, should be done by us as orthodontists. It's a lot of fun, and it's an essential enrichment for our development as aligner orthodontists.

Orthodontics can become arbitrary, only being used to sell aligners, with the mantra "Buy it!" As orthodontists, we can refuse to follow the arbitrary route, following our own independent thought instead, with the mantra "Do it!"

A handwritten signature in black ink, appearing to read "Dr. Krey".