

Improved tie backs for the preadjusted appliance

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Abstract

The paper describes modified tiebacks for space closure with the MBT prescription preadjusted appliance. This modification solves the problems associated with the original design.

Key words: Preadjusted appliance, tie backs, elastomeric module

INTRODUCTION

The use of elastomeric module tiebacks by McLaughlin and Bennett in the Preadjusted appliance ushered in the era of light force techniques for sliding en masse retraction. The technique being simple, effective has stood the test of time. However, the way the elastomeric module is tied to the archwire using a ligature wire as originally described by the authors can introduce certain problems such as:

- Hygiene maintenance difficulty
- Gingival/soft tissue lacerations from the ligature wire
- Hindrance with the premolar brackets having premolded hooks [Figure 1].

As a solution to these problems, we describe an improvised method of making the tie backs. Using an artery forceps insert a piece of 0.009” stainless steel ligature wire (3M

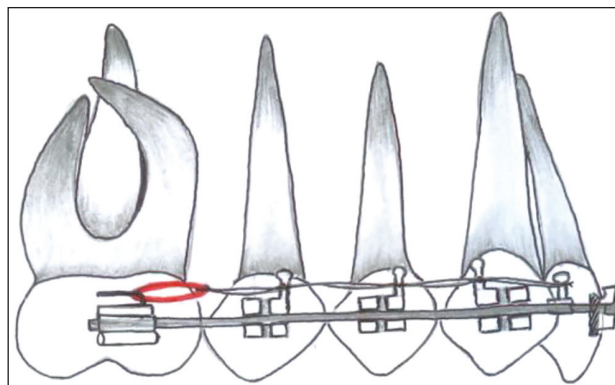


Figure 1: Tie back as originally described by McLaughlin and Bennett

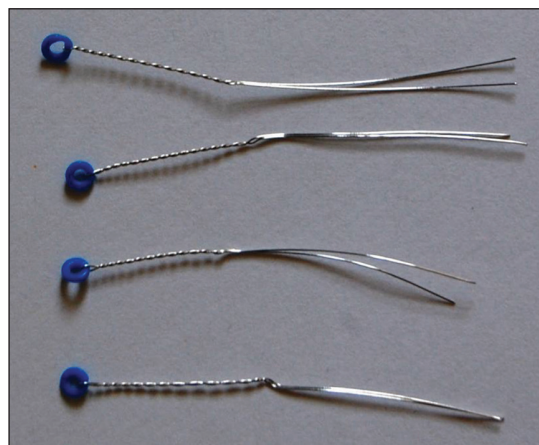


Figure 2: Modified tie back winding

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Figure 3: Intraoral picture with modified tiebacks

Unitek, Monrovia, CA 91016) through an elastomeric module (3M Unitek, Monrovia, CA 91016) and wind it onto itself to form a smooth coil extending from the elastomeric module to a distance 1.5-2 mm short of the archwire hook [Figure 2] and hence that when the elastomeric module is

stretched the wound portion of the ligature wire extends up to the archwire hook [Figure 3].

This article describes improvisation of the Type 1 tie back (distal module).^[1] Similar improvisation can be used for the Type B^[1] (mesial module) tie back as well. This improvisation overcomes the problems with the traditional method as previously listed.

REFERENCE

1. McLaughlin RP, Bennett JC, Trevisi HJ. In: Systemized Orthodontic Treatment Mechanics. Edinburgh: Mosby; 2001.

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