



McNamara Orthodontics
Specialists in Orthodontics and Dentofacial Orthopedics
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FACIAL MASK

You (or your child) have been given an orthopedic facial mask. As was discussed at the time of the initial examination, you have a malocclusion that is characterized by a tendency toward an "underbite", in that the lower teeth tend to be forward of their normal position relative to the upper teeth.

At a previous appointment, a rapid maxillary expander was bonded into position. Usually the facial mask is delivered during one of the next two appointments following expander bonding, although the delivery of the appliance may be delayed in some instances to evaluate the response to the expander.

We will give you three different types of elastics (rubber bands) to wear with the facial mask. The elastics extend from the hooks on the expander to the crossbar on the facial mask. The elastics create the force that will tend to move the upper jaw forward and the lower jaw downward and backward with treatment.

The following sequence of elastics is used:

I. TIGER ELASTIC (3/8" 8 oz.) This type of elastic usually is worn during the first few weeks during the initial break-in period. This elastic creates about 200 grams of force.

II. WHALE ELASTIC (1/2" 14 oz.) This elastic increases the force of the appliance on the dental arches. Usually, this type of elastic is worn for one or two weeks following tiger elastic wear. This elastic has approximately 350 grams of force.

III. WALRUS ELASTIC (5/16" 14 oz.) The heaviest of the three (600 grams), this elastic generates the appropriate amount of force and usually is well tolerated by the patient.

If your child complains of any discomfort in the jaw joint (temporomandibular joint) region, the mask should be discontinued immediately. Although the occurrence of problems is extremely rare in this area, especially in young patients, they have occurred in the past.

As was stressed at the time of the initial examination, the treatment of patients who have a tendency toward a Class III malocclusion (underbite) is one of the most complex and unpredictable types of treatment in orthodontics. Even following facial mask therapy, there may be the need for either further expansion and/or further facial mask wear.

In certain instances, particularly in young children who have a severe malocclusion, the patient is asked to wear the appliance at least 20 hours per day. This includes school hours. In other patients with less severe problems, the patient may be asked to wear the facial mask after school, in the evening, and during sleeping hours. *The more that the facial mask is worn each day, the faster the treatment result is achieved.*



Please bring the facial mask with you to all appointments. There is a replacement charge for all lost appliances.

The patient should NEVER wear the appliance during *rough play* time. Siblings and friends should be instructed never to grab the facial mask while it is being worn.

In a patient who wears the appliance as instructed, some chin irritation may develop, particularly in the winter months. The force of the elastic can be reduced or the chin cup can be discontinued for 1 to 2 days to allow for healing. Either cream or a non-prescription cortisone product (e.g. Cortaid) can be used to treat the irritation for a few days. In addition, here are several other suggestions you may try for the inner lining of the chin cup:

- “Dr. Scholl’s” absorbent shoe pads
- Foot powder
- Old, well worn T-shirt or the inside of a sweat shirt
- Puffs tissue with lotion
- Mole skin (CVS, Walgreen’s etc.)
- Sporting goods stores have a soft material for lining helmets that have a chin strap

If you have any questions regarding the wearing of the appliance, please do not hesitate to discuss this matter with us.

