

SOME ADDITIONAL EXPLANATION FOR YOUR “SMILE DISTRACTOR”

At the end of your operation a small blocking screw is inserted by the surgeon. This makes your distractor passive.

A new consultation is scheduled a week later. Your physician will remove the blocking screw. This makes the distractor ready for the activation.

There are four holes in the mid-body of the distractor, one for every quarter of a turn. **The distractor is activated twice a day, a quarter of a turn, what is the equivalent of 0,5 mm a day.**

Insert the pin of the blue key in the hole in the middle of the distractor. Push the key slightly downwards and backwards.

This makes the key hinging at the end of the white joint. Your surgeon will explain this the first time for you with a mirror.

By turning twice a day, we open the palate $\pm 0,5$ mm. So, After 10 days, we can expect an opening of 5 mm between the two front teeth, equal to a transversal bony distraction of 5 mm.

Usually the distraction period takes 1 to 3 weeks, depending on the amount of widening needed.

The opening between your two central incisions reflects this widening. Once the widening of the palate is achieved, the

fixing screw is placed again by the physician. This makes the distractor passive again.

The distractor should be kept firm and immobile in the mouth for 3 to 5 months. Sometimes the distractor becomes loose during the healing process. Then a visit to your physician is necessary to retighten or remove the distractor.

Clean your distractor daily with a child toothbrush.



Before the widening.



Smile distracter in use.



Six months after the widening.

ACTIVATION



Place the key in the pin-hole and push backwards and downwards to hinge the key on the white joint.



Turn a quarter until the next pin-hole is present. Do so twice a day.

Note: the activation instrument is a key from American Orthodontics-Orthotrends and is named a shilliday key. This key is child-friendly, gives no room for error in use and is familiar to any orthodontist.