

PREVALENCE, CAUSES AND INFLUENCES OF IRREGULAR ALIGNMENT OF TEETH.

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As civilization advances, and we get farther away from the simple lives of our ancestors, we find man developing many ailments which are the outcome of his modern habits of life.

Probably no part of the body has suffered so much as the teeth; and we see in modern children an array of irregular teeth, ranging from slight over-lapping to gross displacements of the jaws, which affect the whole organism.

It is estimated that about seventy-five per cent of all children are afflicted to some degree and many authorities place the number even higher. I had occasion to examine between fifty and seventy-five children recently and I did not see six with perfect arrangement of the teeth.

There are many theories advanced as to the reasons for the foregoing; but not a great deal is definitely known. It is my purpose here, merely, to sketch briefly a few of the out-standing principles.

The position of the individual teeth is only an indication of the retarded growth of the jaws which have not enlarged sufficiently to contain the full complement of teeth.

This condition is rarely found among primitive people. Most of the skulls of the early races show well developed jaws with teeth in perfect alignment.

These people ate hard, coarse foods requiring vigorous mastication which stimulated the jaws to growth. The modern child eats only soft foods during the time that the teeth are forming and coming into place in the mouth, therefore, the jaws do not receive the stimulation necessary to their complete development.

Diet is an important factor. Dr. Howe of Boston, who has made notable experiments in this field, emphasizes a faulty diet as primary causation. Infants and young children should have their diet carefully planned. As soon as they are able to chew, give them plenty of vegetables, particularly leafy vegetables, and raw fruits. The mother should also have a diet which contains a liberal supply of milk and leafy vegetables.

I have no statistics at hand in regard to rickets in relationship to the jaws; but it is only logical to assume that if rickets can cause such deformities as the bow-legs, knock-knees, and pigeon breasts with which we are all familiar—why can it not cause some of the misshaped jaws which are occurring with such frequency in the present generation.

In patients where there has been enlarged adenoid vegetation or nasal obstruction of any nature, producing a continued period of mouth breathing, there is generally produced the common and unsightly condition of the upper teeth protruding from between the lips.

Habits are responsible for much of the trouble. Youngsters should be closely watched for all kinds of habits such as biting the lips, cheeks, tongue and finger nails; sucking the thumbs, tongue, fingers and pacifiers; or pillowing the face upon the hands or arms while sleeping. All these habits produce a constant pressure on the teeth and their supporting tissues, and if indulged in for any length of time, will cause a displacement.

Often through neglect, the baby teeth become so decayed that it is necessary to extract them long before the time when they would be lost naturally. The space left will then close, so that when the second tooth follows, it is crowded outside the dental arch.

Frequently, the baby teeth do not fall out at the proper time. Especially is this true when abscesses are present. The following tooth must then push its way to one side or the other.

Just how much influence crowded arrangements of the teeth have upon the general health, would be difficult to say. However, we do know that it predisposes to decay and diseases of the gums. In extreme cases the children are utterly unable to masticate their food; with the result that they suffer from indigestion, anaemia, malnutrition and accompanying underweight.

The constricted upper arches do not allow adequate breathing space even when obstructing nasal growths have been removed. Usually, these children have short upper lips and find it impossible to close their mouths. This makes them more susceptible to colds, asthma, sore throats and pulmonary diseases.

The cosmetic side of the question is important as related to mental health. Quite young children are often extremely sensitive where the abnormality is conspicuous. There are many cases on record of young adults bordering on melancholia because of the unsightly deformities of their jaws.

The great mass of children are not receiving any treatment for these conditions. Many parents do not know that correction is possible; others think it unimportant.

There is great need for education of parents and teachers and all those in charge of children. Children must be taken to the dentist's office as soon as their teeth are in position, so that small cavities may be filled. Where extractions are necessary appliances should be made to hold the space until the new teeth come in.

The economic problem is a large one. The clinics are taking care of only a limited number. It remains a question as to how the countless hundreds of children are to receive the care which is so essential during the years when their bones are plastic and a most nearly perfect result can be obtained.

We can only hope that sometime in the near future society will realize its indebtedness to children and see to it that every child in every walk of life comes to fullest development, mentally and physically, of which it is capable.