

## Common 'emergency' brace problems and solutions:

If you are an orthodontic patient following the advice contained here PLEASE where possible contact the orthodontic department at the hospital first to ensure that you are carrying out procedures safely

### Wires digging in

- If a thin wire, it may be possible for the patient or family member to use tweezers to replace wire in the tube/band or tweezers and a nail clipper/scissors to shorten the long end
- It may be that a thin wire is the correct size but may have rotated round the teeth so that it is short on one side and long on the other. Using tweezers a pencil with a rubber on the end or a teaspoon, it may be possible to push the wire back round to prevent the long end digging in.
- If the wire is very thick and stiff (discuss with the hospital) it may not be possible to cut the wire with home instruments. If this is the case it may be necessary to cover the wire to prevent it being sharp.
- Relief wax/silicone may be sent to you or you can buy it online ([Orthodontic Wax](#)) Failing that using a wax covering from hard cheese (baby-bell, cheddar), Blue tack or even chewing gum may help

### Broken bonded retainers

- Push wire back down towards the tooth as much as possible. (Fingers or tweezers)
- Cover with best medium available (Ortho wax, Cheese wax, Blu-tack, chewing gum)
- Cut the exposed un-bonded wire using tweezers and nail clippers/scissors
- Gently pull the wire to remove the whole retainer
- Advise greater use of removable retainers if present

## Lost Retainers

- Contact the department– it may be that your unit has access to your final moulds and can make a new retainer remotely which can be posted out to you
- If it is not possible to get a replacement retainer you could consider ordering online a ‘boil in the bag’ (heat mouldable) gumshield to use and wear at night to reduce the risk of relapse (unwanted tooth movement). It should be noted that these appliances aren’t specifically designed to hold teeth in position so the manufacturer cannot be held responsible for any relapse.
- Please contact the department before investing in this strategy to ensure all aspects of this compromise for retention are understood

## Gold Chains

- If the gold chain was recently placed and is now dangling down, it may be possible to cut it short. Gold is quite a soft metal and it may be possible to cut the chain using some nail scissors or nail clippers. Always hold the loose end with tweezers or similar item. If possible leave at least 5 links between the gum and the end of the chain so it can be used later by your orthodontic team
- If you have a non-dissolvable coloured stitch discuss with the department about the feasibility of removing it at home using nail scissors to prevent a minor infection in the gum.

## Orthognathic Post-Op

- Discuss with the department your specific concern/problems for the best advice
- Consult [yourjawrurgery.com](http://yourjawrurgery.com) for general post op advice on the British Orthodontic Website
- Stop or reduce post-surgery elastic wear as advised by us

## Bracket off

This is not urgent unless it is causing trauma to the soft tissues.

- It may be possible for us to guide you on how to remove the bracket from the wire via video if it is causing trauma.
- It may be possible to leave the bracket if it is not causing any problems at present. Consider contacting the department for advice.

### Elastic Bands

- At this time if you run low or out of elastics contact the department as we may either send you some more out via the post or advise cessation of wear.

### Band off

- If the band is very loose we may be able to talk you through removal of the band and trimming of the wire depending upon your stage of treatment.
- It may also be the case that we will advise you to leave the band in place. If this occurs please ensure you adhere to good oral hygiene and a low sugar diet to prevent decay under the band and around your tooth.

### Band off, Quadhelixes, RME, TPA +/- Nance

- Discuss with the department about the nature of the looseness and take advice accordingly.
- **Push band back onto tooth if it will locate and** ensure you adhere to good oral hygiene and a low sugar diet to prevent decay under the band and around your tooth.

### Removable/Functional appliances

- Check for comfort and retention
- If unsure about how much to continue to wear the appliance discuss with the department
- If fractured or ill-fitting do not wear the appliance

### Separators

These should be removed at the earliest opportunity - Attempt removal with end of safety pin, small paper clip or wooden toothpick

## Lost module(s)

No action required – try and make wire where the module has been lost secure with dental wax, cheese wax or blu-tack and chewing gum

## Temporary anchorage Devices TADS

The department may assist you in removing and springs or elastic chain moving the teeth

## Headgear

Stop wear

## Lost spring

No treatment required

## Fractured/Frayed power chain

- Accept situation– most powerchain (elastic chain) will denature in 4-6 weeks and become passive
- Remove powerchain (elastic chain) with tweezers if necessary
- Cut frayed end as short as possible to improve comfort

## Exposed end of wire tie – long ligature or short ligature.

- Re-tuck sharp end under wire/bracket using tea spoon or tweezers
- Remove wire if broken with tweezers if possible
- Cut frayed end as short as possible to improve comfort with nail cutters or scissors
- Cover for comfort using Ortho wax, Cheese wax, Blu-tack, chewing gum