

·T4·CII

FOR CLASS II CORRECTION

All these malocclusions have a soft tissue component which needs treatment. The mechanical approach alone to Class II and open bite correction can often be difficult, prolonged and unstable.

H. Brown Otopalik DDS American Journal of Orthodontics – Dentofacial Orthopedics Vol. 113 No. 6 June 1998.

"My observation over the years has been that change is the only constant factor and that to expect complete long term stability is not possible.

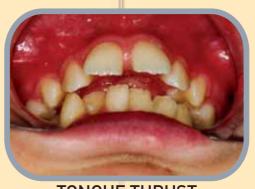
Muscle factors, tongue position, and function all play a great part and can lead to eventual change or recurrence of the original problems."

The **MRC System** can help you with the **NEW T4CII TRAINER** for Class II correction.





OVERACTIVE MENTALIS



TONGUE THRUST



MOUTH BREATHING

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The T4CII has been produced to fill the need for simultaneous class II correction and fixed upper brackets. Lower brackets can be used with the T4CII, however their necessity is reduced due to the function of the appliance.

The use of functional appliances is well known for class II correction. There are a number of other alternatives including class II elastics and fixed telescopic and other mechanical devices. None address an important factor in the cause of the malocclusion – SOFT TISSUE DYSFUNCTION.

Design features of the T4CIITM US Patent 5,624,257 other patents worldwide 3 2 4

The T4CII™ has Myofunctional Training and Jaw Positioning features:

- 1 Tooth Channels are premoulded to the correct dental arch form, and feature appliance channels over the upper brackets.
- 2 Tongue Tag corrects position of the tongue tip as in myofunctional and speech therapies.
- 3 Tongue Guard stops tongue thrusting when in place and encourages you to breathe through the nose.
- 4 Lip Bumper discourages overactive lip muscle activity.
- 5 Class I Jaw Position is produced when in place.
- 6 Aerofoil-shaped Splint reduces TMJ symptoms by decompression of the temporo-mandibular joints.

What is the T4CII?

A phase I appliance which can be used before and during fixed appliance treatment. The treatment plan can be simplified by the elimination of the incorrect myofunctional habits that often perpetuate the malocclusion and cause relapse of the corrected result with time.

The Myofunctional Effect

Although many techniques exist for class II correction, virtually none really address the causes, which are the **soft tissue problems**. These myofunctional problems, such as tongue thrust, lip habits, open mouth posture and mouth breathing are present in these cases. Previously, complex and impractical myofunctional therapy was applied with limited success. The TRAINER system is designed to treat these habits with specific appliances used before, during, after and instead of fixed orthodontic treatment. The T4CII, as part of **the TRAINER system** of appliances, has the myofunctional effect – a tongue tag to actively retrain tongue position and function, a tongue guard to stop tongue thrusting, a lip bumper to interrupt the overactive mentalis and lip habits and an activator effect to move the mandible to class I and to prevent mouth breathing.

Applications

The T4CII is more robust, being higher and thicker than previous TRAINERS, and the upper bracket channel gives superior retention to the upper arch. The retention is also good without brackets due to the high, undercut sides. This means the T4CII can also be used successfully before brackets are placed to treat soft tissue dystrestia. This makes it a seamless phase I and II treatment integrating with your current orthodontic techniques. No need to change the appliance.



For best results, start with the T4CII 3-6 months prior to the eruption of the permanent dentition, then when the upper permanents are present, apply upper fixed, but delay the lower fixed for 6 months. This will allow the lower anteriors to align due to soft tissue improvements and may save the need for lower brackets. The T4CII can still be used during the lower fixed phase as required or can be substituted with other preferred class II adjunctive treatment.

Other uses of the T4CII include open bite and severe crowding, and all cases where poor myofunctional habits are present. This is in the majority of malocclusions. Assistance in dental and jaw alignment and stabilising the treated results are the benefit from both the T4CII and the T4B-TRAINER for Braces.

The following chart assists in choosing the best appliance for your case.

	T4CIITM Specific for CII, open bite, and severe crowding	T4BTM General treatment for u/c fixed and soft tissue protection
Class II Correction	Best	Good
Retention of Appliance	Best	Good
Performance in severe cases	Best	Good
Soft tissue protection	Best	Best
TMJ Treatment	Excellent	Excellent
Compliance	Excellent	Excellent
Use with upped fixed appliance	Best	Good
Used with Class II elastics	No	Yes
Myofunctional effect	Yes	Yes

Available from: MYOFUNCTIONAL RESEARCH CO.

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