## **Book Reviews**

European Journal of Orthodontics 29 (2007) 109–110 doi:10.1093/ejo/cjl092

## Orthodontic management of uncrowded Class II division one malocclusion in children (2006)

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Publisher: Elsevier Limited, London, U.K.

Price: £99.00

ISBN: 978-0-7234-3426-9

This book is an excellent clinical guide to the fixed functional treatment of certain carefully selected Class II division 1 malocclusions. It advocates the use of the Andresen 'monobloc' appliance in its original form followed by fixed appliances in a complete treatment beginning towards the end of the mixed dentition phase. Overall there are nine chapters set out rather in the style of a manual.

The first chapter sets the scene and outlines the four factors for success as treatment timing, case selection, patient compliance, and appliance selection. These are then expanded upon in the subsequent chapters taking this well-proven treatment method to suitable selected cases.

Chapter 2 discusses the advantages and disadvantages of the early two-stage separate treatment versus the later onephase run-through treatment, and on the available evidence recommends the latter.

Chapter 3 concisely outlines the five main criteria for successful case selection being:

- 1. An overjet up to 11 mm with a deep overbite,
- 2. A horizontal skeletal pattern that is no more than mild Class II,
- A vertical skeletal pattern that is normal or hypodivergent,
- 4. Well-aligned dental arches with little crowding, and
- 5. A growing and co-operative patient.

Widening case selection further with potential modification of the Andresen is avoided so as to maintain its

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'elegant simplicity' and prevent compromising patient compliance. Pre-functional preparation for dental arch coordination is outlined by use of a quadhelix although the straightforward removable expansion plate with bite plane is not really mentioned.

Chapter 4 covers patient compliance and motivation where treatment is either going well or importantly when progress is only 'so-so'.

Chapter 5 discusses selection of the functional appliance and reinforces the versatility of the Andresen, especially regarding its ability for differential vertical control of the buccal segments and then compares this with several more complex types of functional.

Likewise, chapter 6 outlines the philosophy for the accompanying fixed appliance thereafter and in particular the MBT system.

Chapter 7 describes, in detail, the clinical management of the Andresen appliance from impression taking through to fit and subsequent adjustments with advice on problem solving. Interestingly, it is recommended that the Andresen is worn up to 10–12 hours on an evening and night-time basis rather than full-time.

In a similar manner, chapter 8 deals with managing the fixed appliance stage giving a useful archwire progression and helpful tips on anchorage control involving intermaxillary elastic use.

The final chapter then briefly touches on aspects of posttreatment settling, stability, and retention.

Importantly, there are several stage-by-stage case histories at relevant points in the text. Indeed the whole book is very well produced and illustrated throughout with top-quality photographic reproductions and clear line drawings that make it easy to read and follow. The text is extensively referenced with directions for further reading as required.

It is welcome to see a resurgence of the classic Andresen blended with modern-day fixed appliance mechanics. This would be a valuable guide for postgraduates new to the technique and any clinician wishing to revisit the use of this functional as part of an overall treatment for these carefully selected cases.

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