

Bölüm 6

SABİT ORTODONTİK TEDAVİLERDE ANKRAJ KONTROLÜ

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GİRİŞ

Ortodontik diş hareketi, kontrollü mekanik kuvvetin dişlere ve periyodonsiyuma uygulanması sonucu ortaya çıkması ile karakterizedir. Ortodontik apareylerce uygulanan mekanik kuvvetler biyolojik aktiviteyi tetikleyerek diş hareketine neden olur. Mekanik kuvvetlere cevap, kemik remodelingi ve dişlerin repozisyonudur. Bu açıdan ortodontik tedavi, bir uyaran kuvvet sistemi ve kuvvete cevap modeli olarak değerlendirilebilir. Ortodonti pratiğinde, ankraj planlaması, tedavi planlaması içerisinde önemli bir yer tutmaktadır. Ortodontistler ankraj planlamasının öneminden dolayı, ankraj korunması adına; ağız içi ve/veya ağız dışı destek apareylerin kullanılması, bükümlerinin yapılması, ankraj kaybını azaltacak şekilde mekaniklerin hazırlanması, dişlerin tek tek hareket ettirilmesi gibi birçok yöntem denemiştir.

Ankraj kontrolü, istenilen tedavi etkilerini/cevabını sağlayan uygun kuvvet sistemlerini oluşturma yetisidir. Bunun için ortodontistler ankrajı korumak için çeşitli teknikler geliştirmişlerdir. Angle, Case, Tweed, Begg ve birçok klinisyen bu şekilde ortodontik mekanoterapinin gelişmesine katkıda bulunmuşlardır (1).

1. ANKRAJIN TANIMI

Literatürde ankraj için farklı tanımlamalar yapılmaktadır. 1923 yılında “ortodontik kuvvete karşı reaksiyon” tanımının, ileri yıllarda “istenmeyen diş hareketine karşı direnç” veya “diş hareketine karşı ankraj alınan ünitelerin istenilen miktarda hareketi” şeklinde gelişim gösterdiği görülmektedir (2). Ankraj, ortodontistin

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mekaniklerinin dikkatli uygulanması tedavinin süresi, tedavinin sonucu ve tedavi sonuçlarının stabilitesi için önemlidir.

Güncel teknikler değerlendirilmeli, ihtiyaç duyulan dişsel ve iskeletsel ilişki için gerekli önlemler dikkatle alınmalıdır.

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