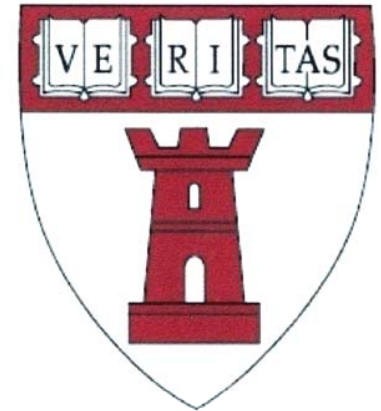




**1st Invitational Workshop Workshop on  
Body Area Network Technology and Applications  
Future Directions, Technologies, Standards and  
Applications  
June 19-20, 2011  
Worcester Polytechnic Institute**



**\* 3D LOCALIZATION OF THE DENTAL  
OCCLUSAL PLANE USING WiFi  
TECHNOLOGY**

**Dr. MOHAMED HANIF BUTT  
Clinical Instructor in Orthodontics  
Department of Developmental Biology  
Harvard school of Dental Medicine  
Boston, MA**





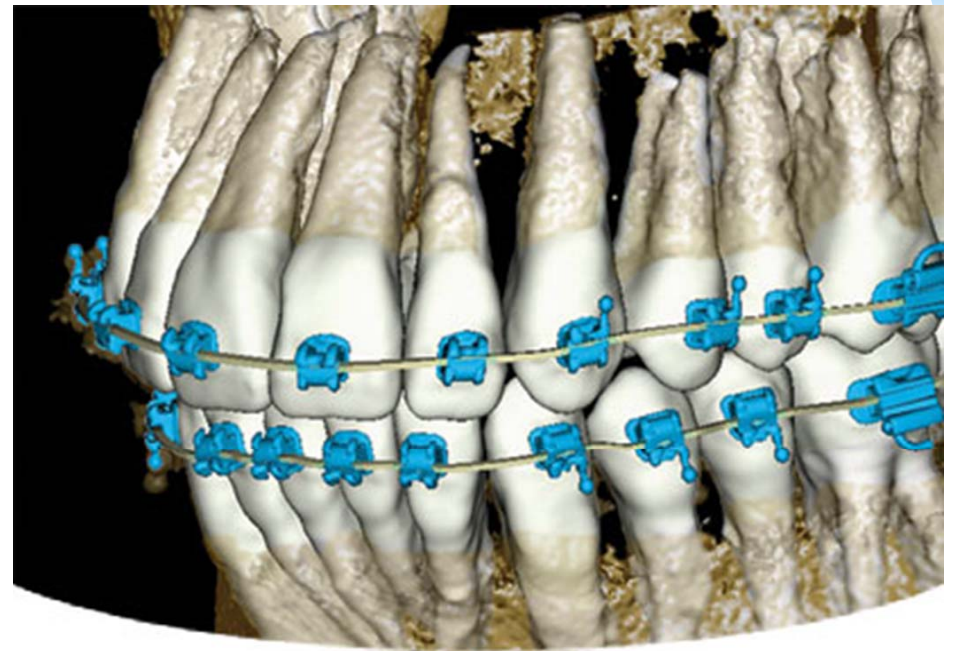
\* PATE, KENYA





\* LAMU, KENYA

\* **3D LOCALIZATION OF THE DENTAL OCCLUSAL PLANE IN NATURAL HEAD POSITION USING WiFi TECHNOLOGY**



\* **INTRODUCTION OF LATERAL HEAD  
RADIOGRAPH IN 1931**



**ADVENT OF CEPHALOMETRICS**



# APPLICATION OF CEPHALOMETRICS

DIAGNOSIS AND TREATMENT  
PLANNING

GROWTH ASSESMENT/PREDICTION

EVALUATE TREATMENT CHANGES

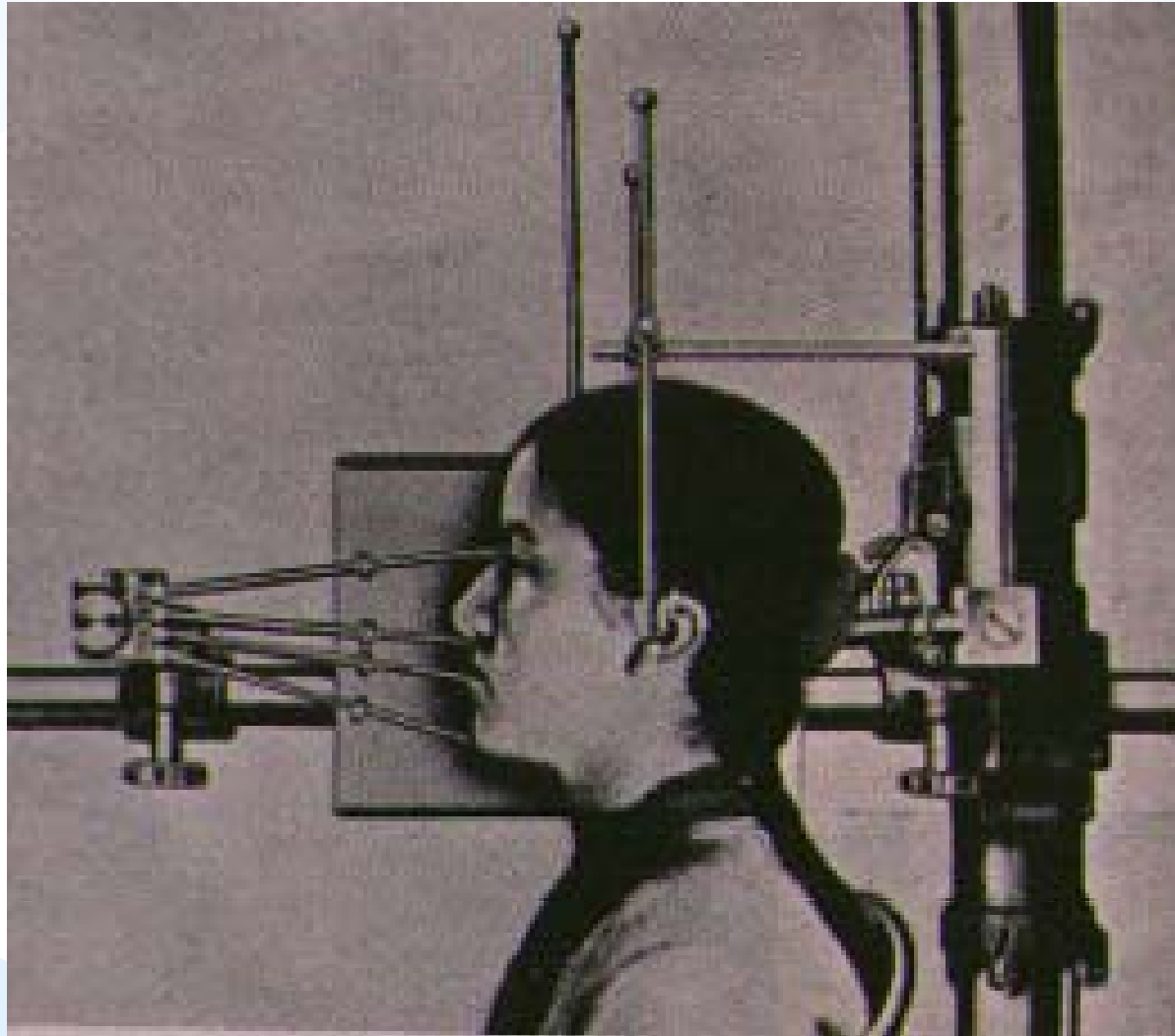
# \* CHALLENGES OF CEPHALOMETRICS

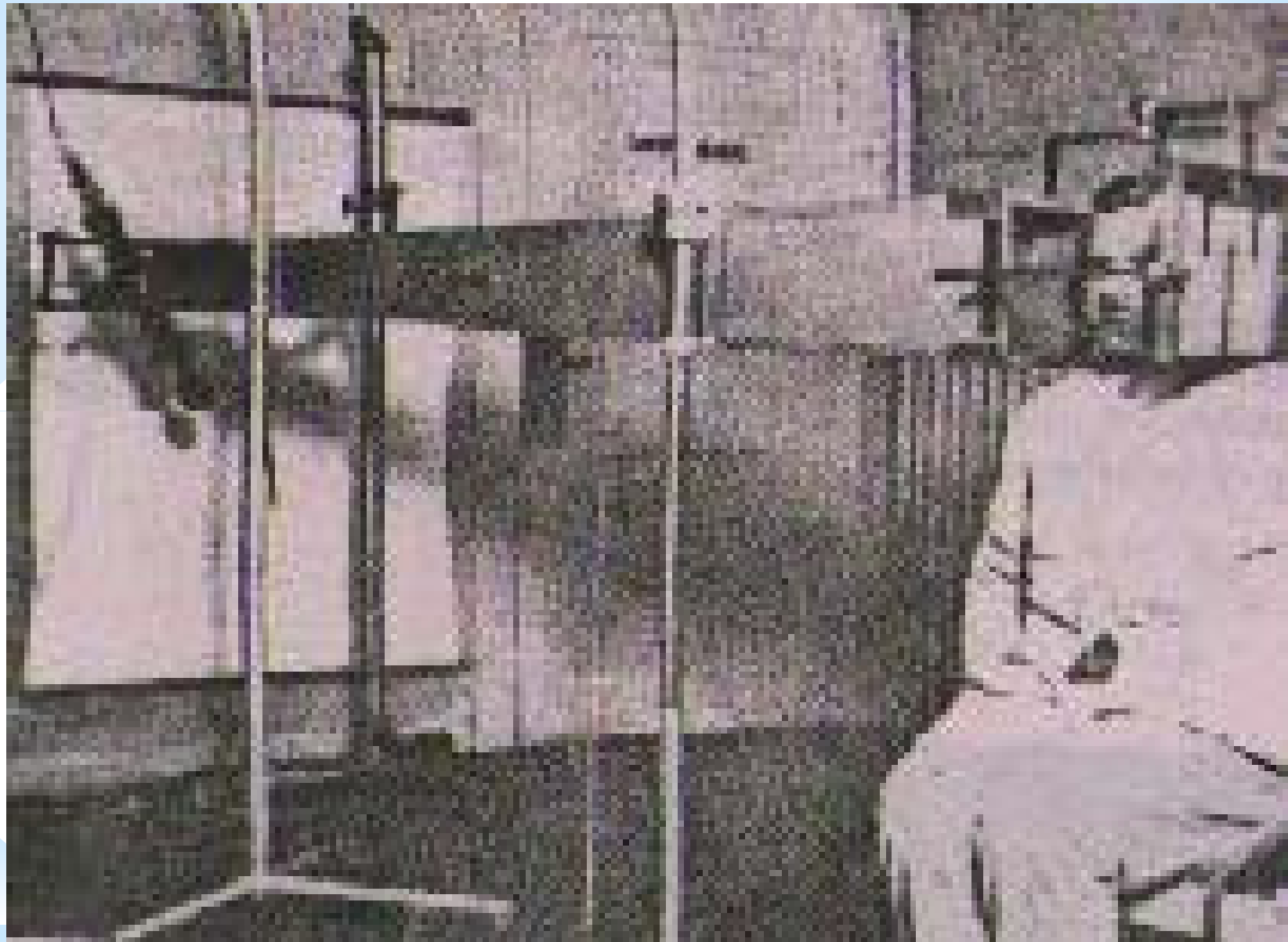
\* STABILITY OF THE  
CEPHALOMETRIC POINTS

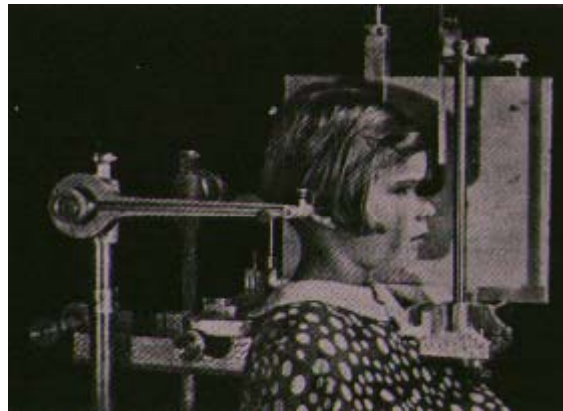
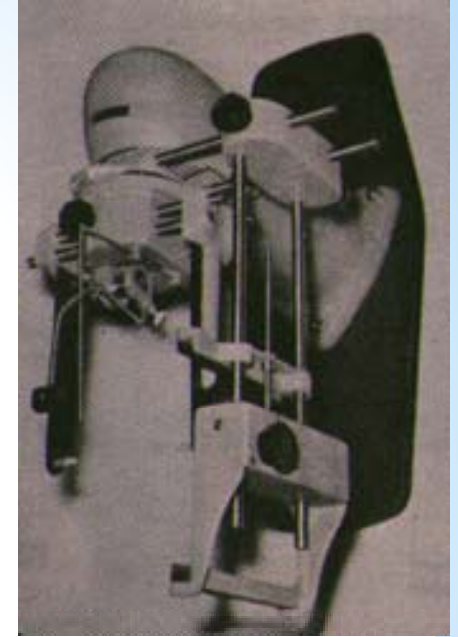
\* REPRODUCEABILITY OVER  
TIME TO ALLOW COMPARISON



**\* CEPHALOSTAT TO ORIENT THE HEAD  
TO THE LATERAL RADIOGRAPH**

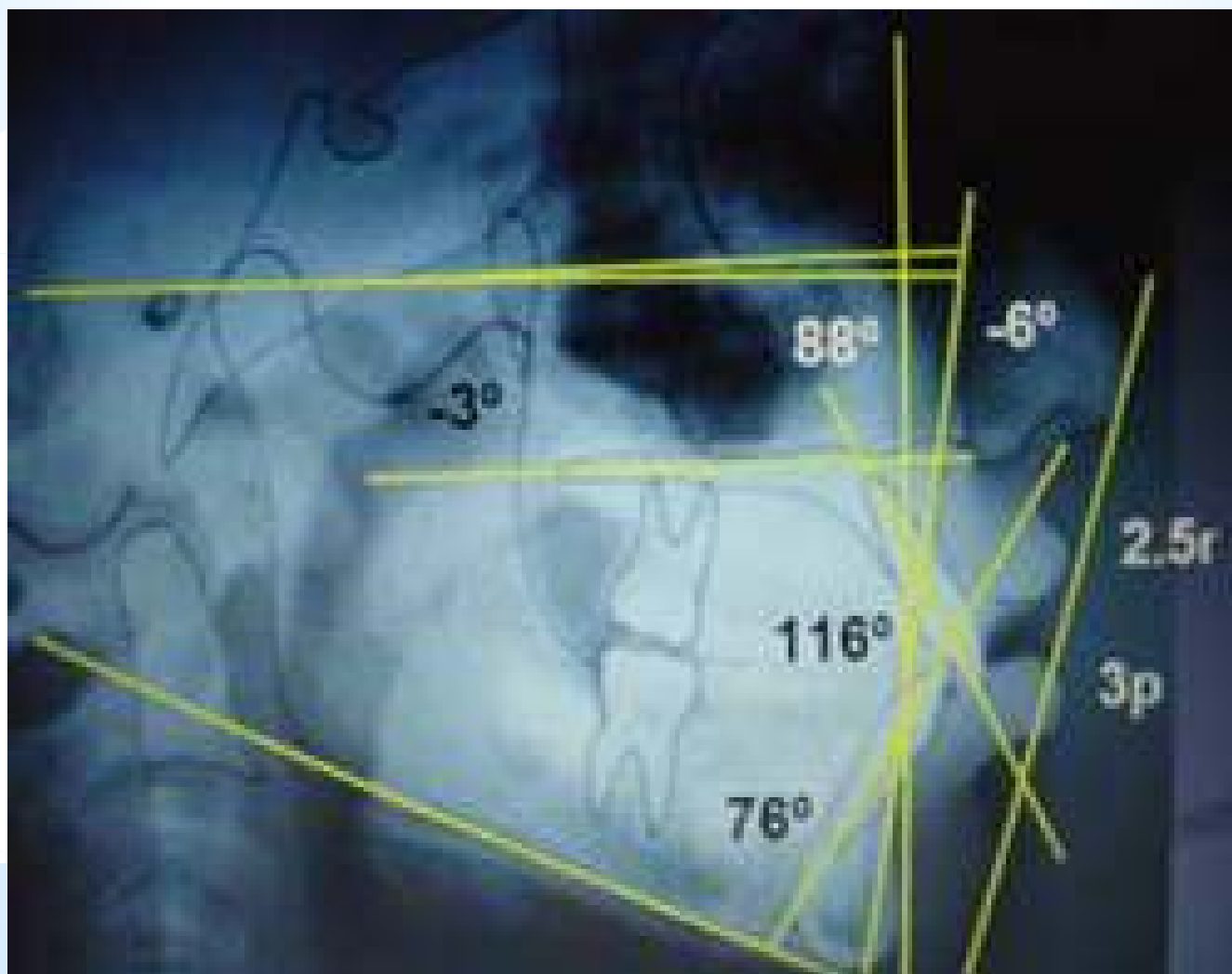




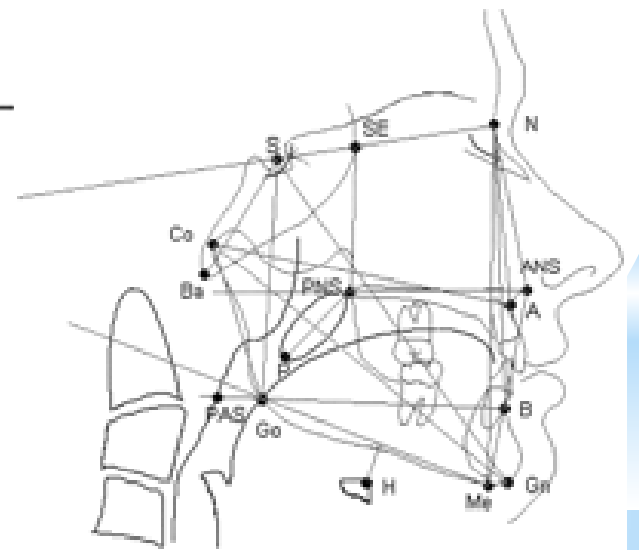
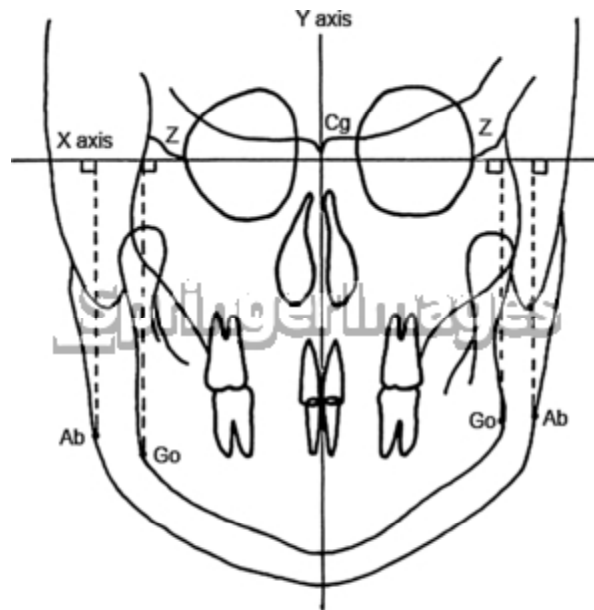
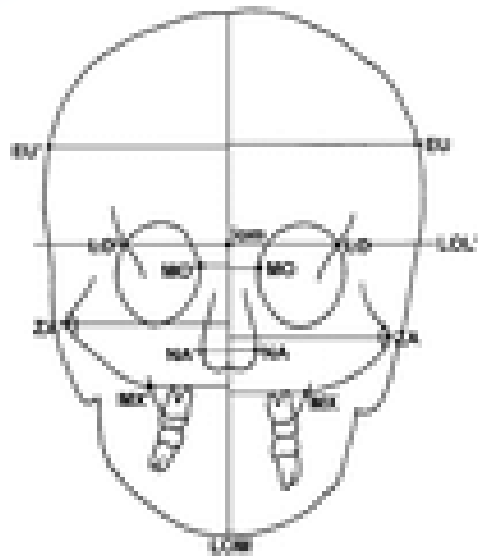
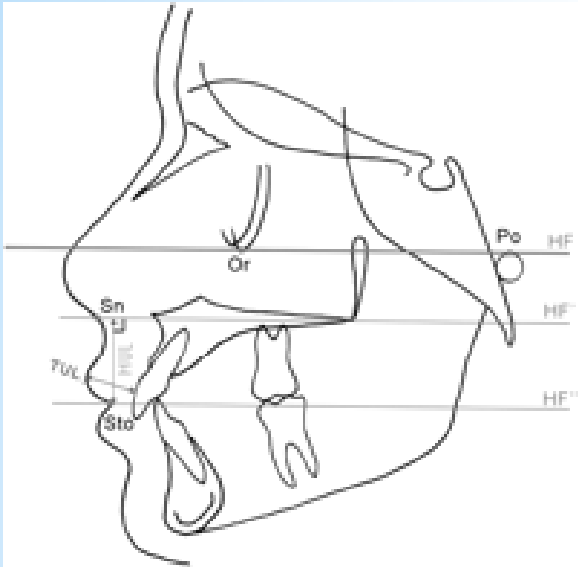


# 2D CEPHALOMETRIC ANALYSIS WITH TRACING PAPER ON RADIOGRAPHIC FILM

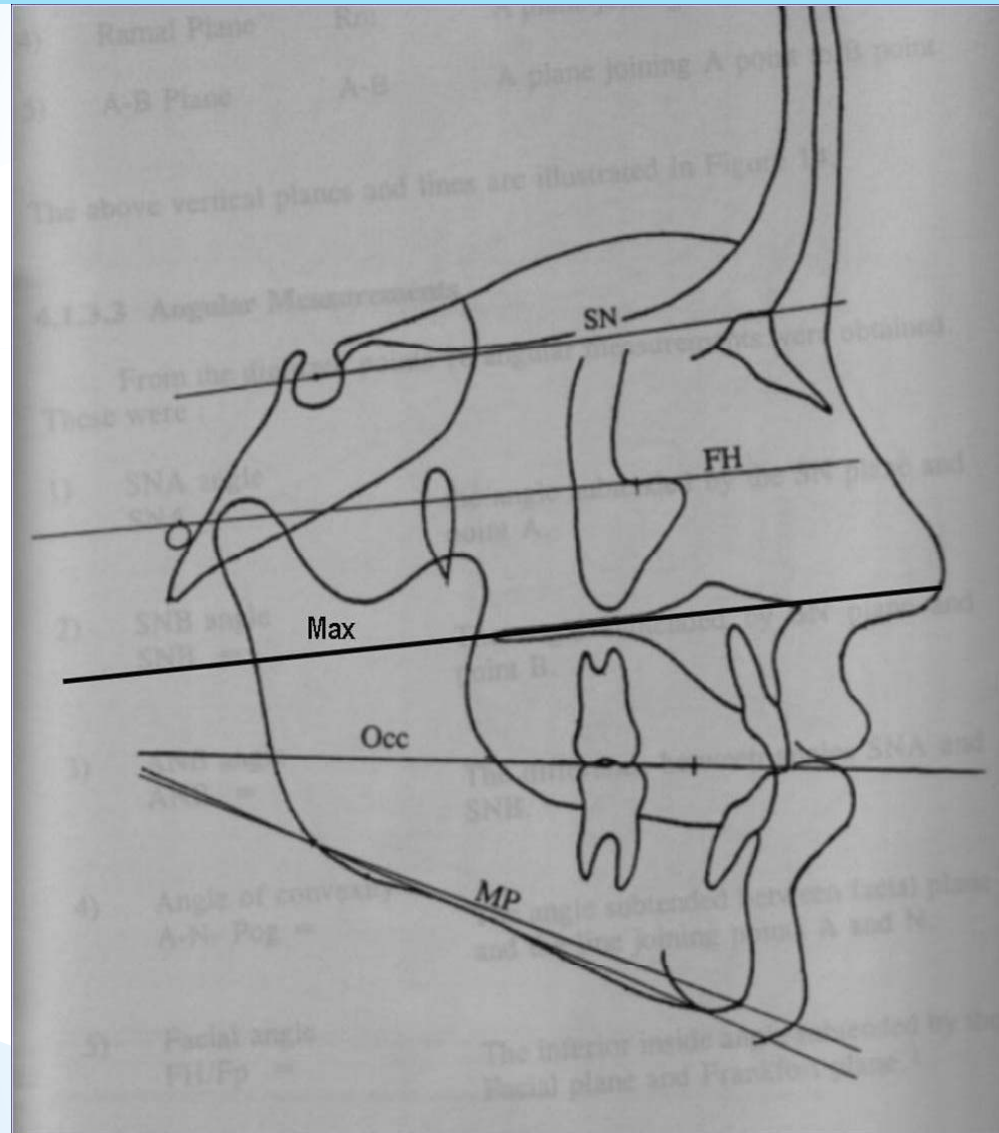
R







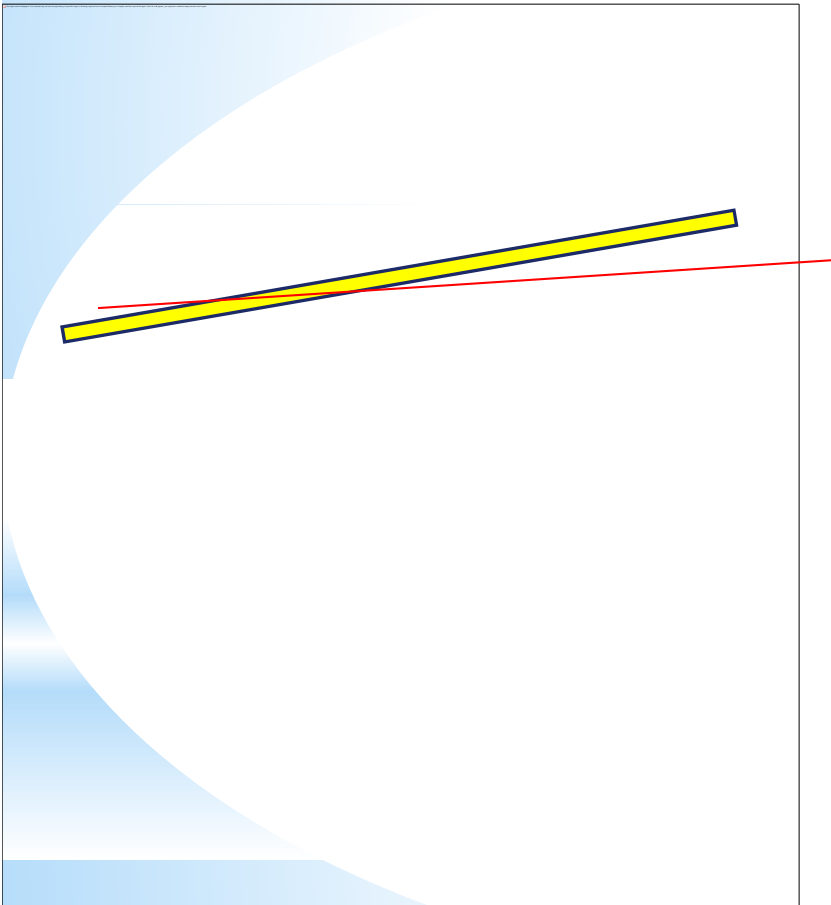
# \* STANDARDIZATION TECHNIQUES



# \* STANDARDIZATION TECHNIQUES

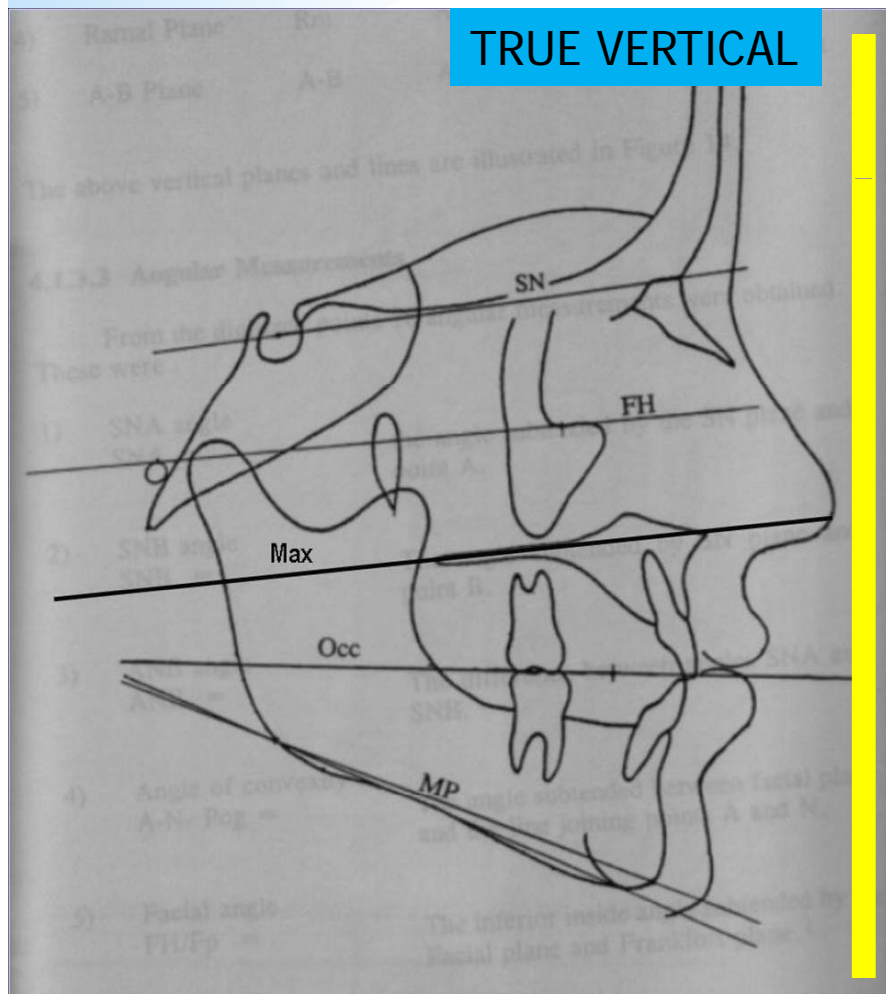
## SELLA-NASION PLANE

- \* VERY STABLE POSITION OF CRANIAL BASE
- \* GROWTH COMPLET AT AGE 7 YEARS
- \* SN 9 DEGREES TO THE HORIZONTAL



# \* STANDARDIZATION TECHNIQUES

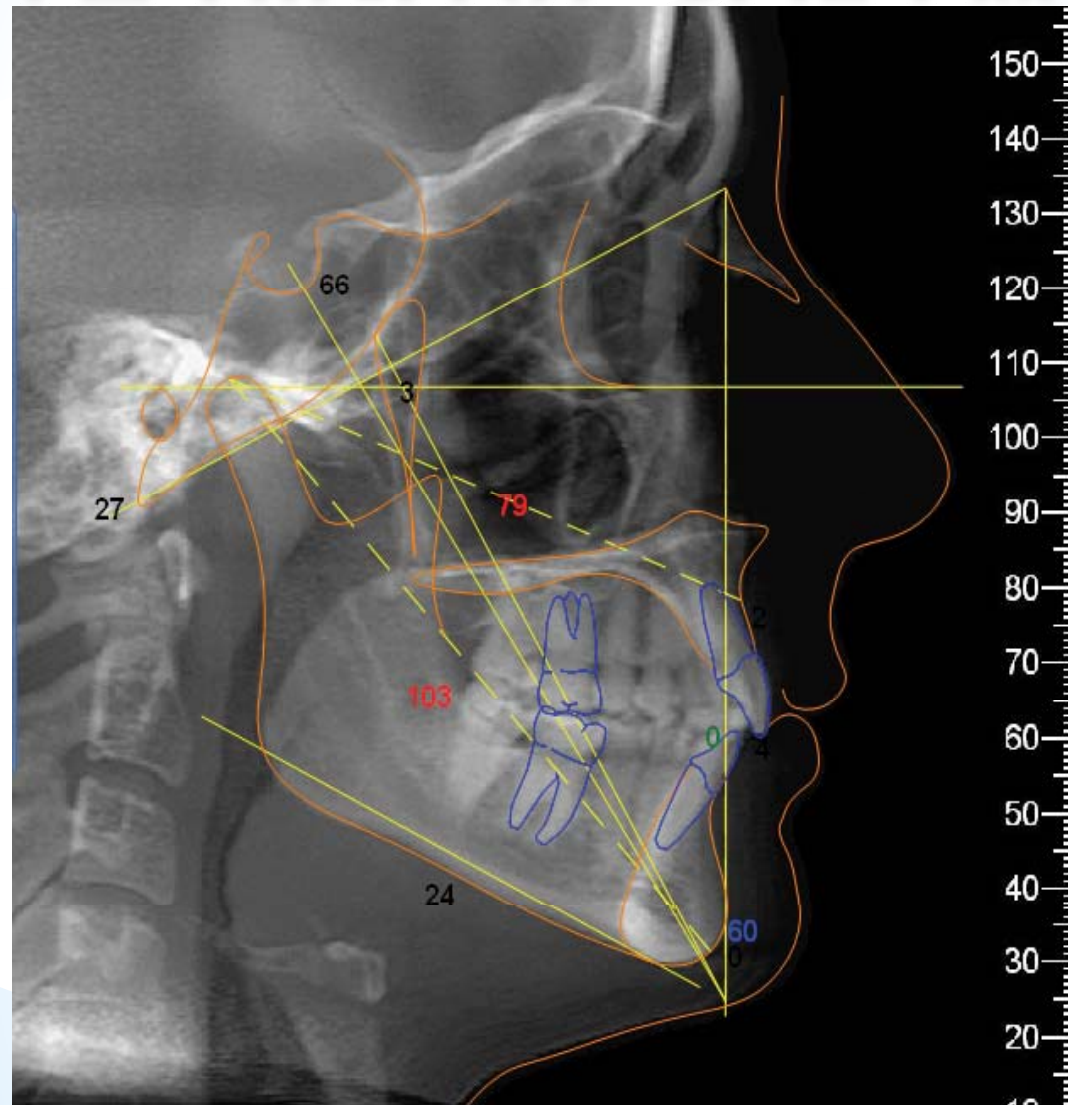
## NATURAL HEAD POSITION



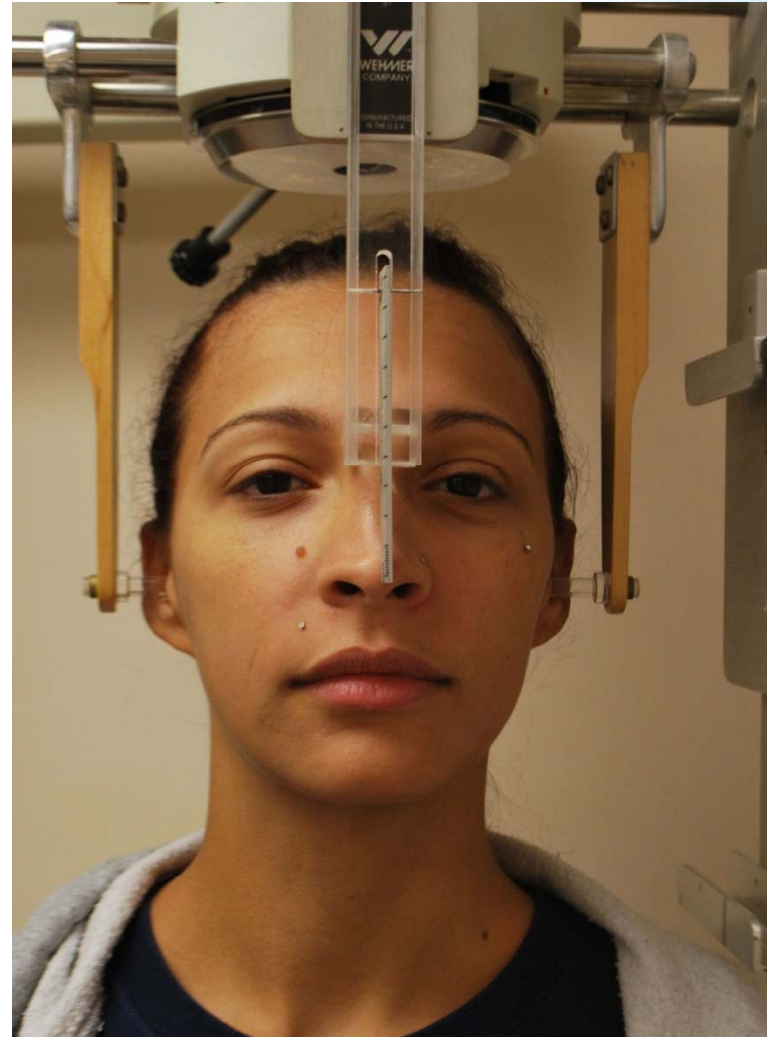
- \* TRUE VERTICAL
- \* RESTED POSITION
- \* PARALLEL TO FLOOR
- \* EYE LEVEL TO FLOOR
- \* SELF BALANCED BODY POSITION
- \* GUIDED BY MIRROR
- \* GUIDED BY PROFESSIONAL
- \* REPRODUCEABLE



# \* 2D CEPHALOMETRIC ANALYSIS WITH DIGITAL SOFTWARE



# \* CONCEPT OF NATURAL HEAD POSITION

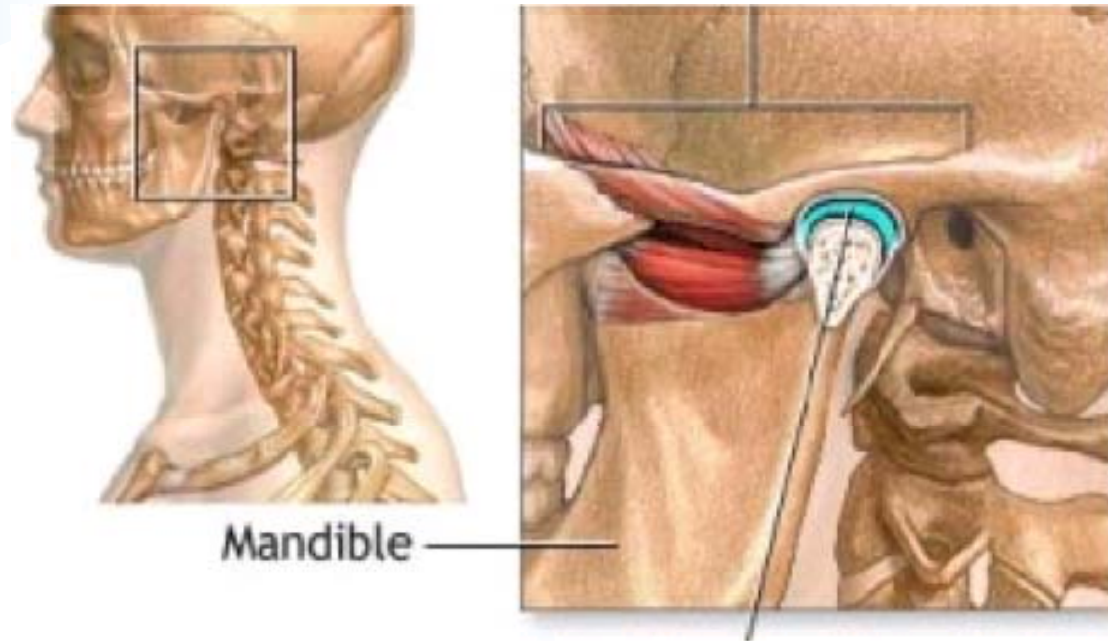


# \* NATURAL HEAD POSITION: SPATIAL RELATIONSHIP OF THE HEAD TO TRUE VERTICAL

- \* NO WELL DEFINED STANDARDIZATION EXIST
- \* ELUSIVE POSITION, VARIES FROM POSTURE TO POSTURE
- \* DIFFICULTY IN REPRODUCING THE POSITION



# BODY POSTURE AND ALIGNMENT



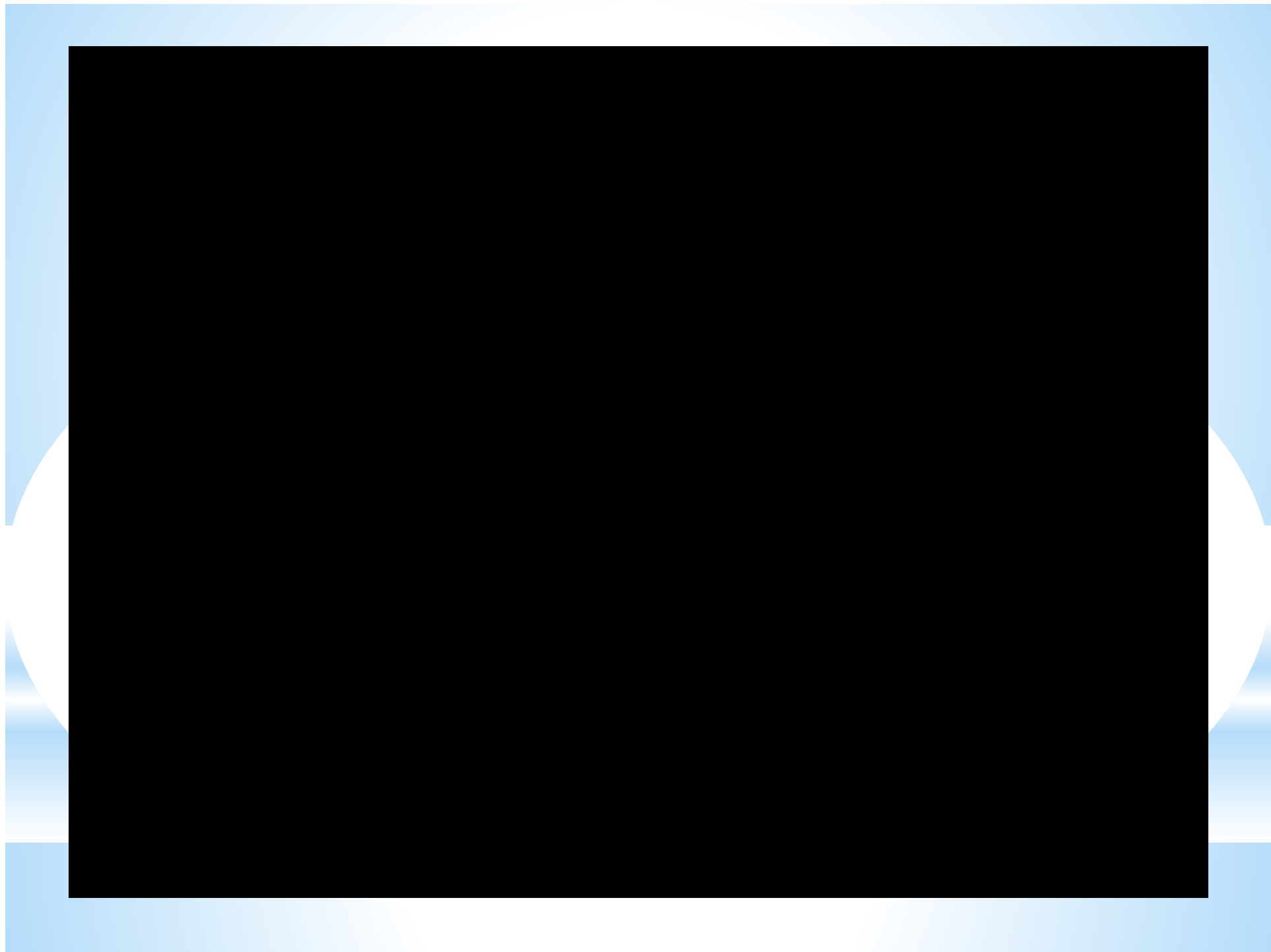
## MYOCENTRIC STATE

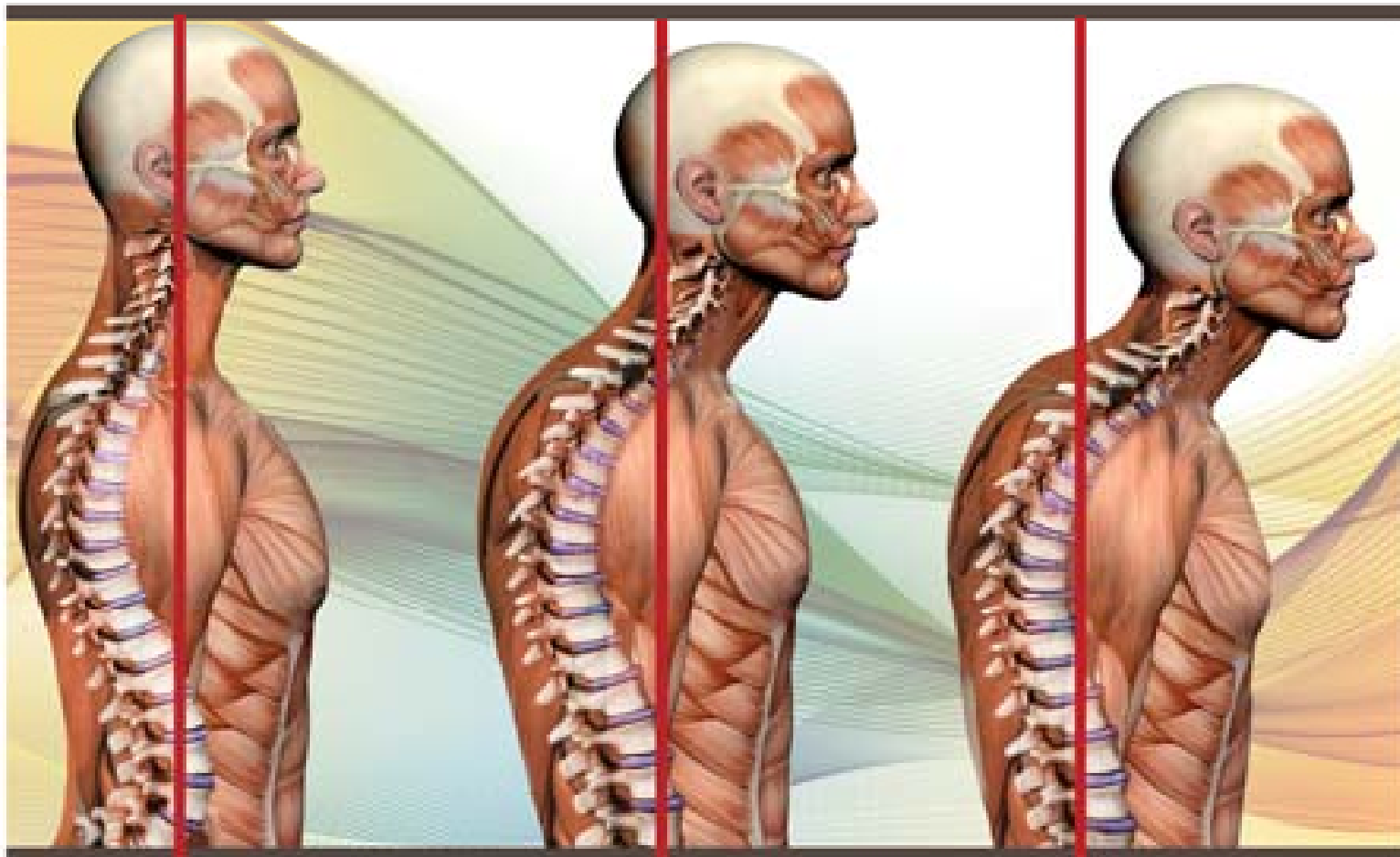
DELICATE BALANCE OF ALL THE SKELETON AND  
THE NEUROMUSCULAR SYSTEMS



# \* POSTURAL DISORDERS

- \* GROWTH DISORDERS
- \* CRANIOFACIAL DYSMORPHOGENESIS
- \* CRANIOFACIAL PAIN
- \* SPINAL CORD DISORDERS
- \* OBSTRUCTIVE SLEEP APNEA
- \* TEMPEROMANDIBULAR JOINT DYSFUNCTION
- \* OCCLUSAL DISHARMONY
- \* PERIODONTIUM BREAKDOWN



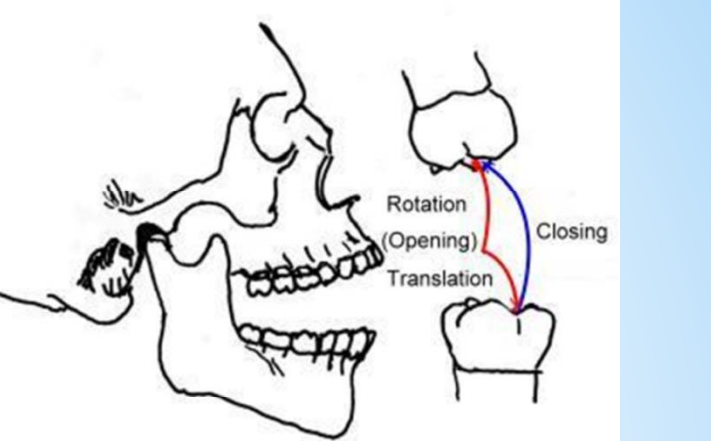


12 lb.

32 lb.

42 lb.

Figure 1







During snoring, air flow is partially blocked.



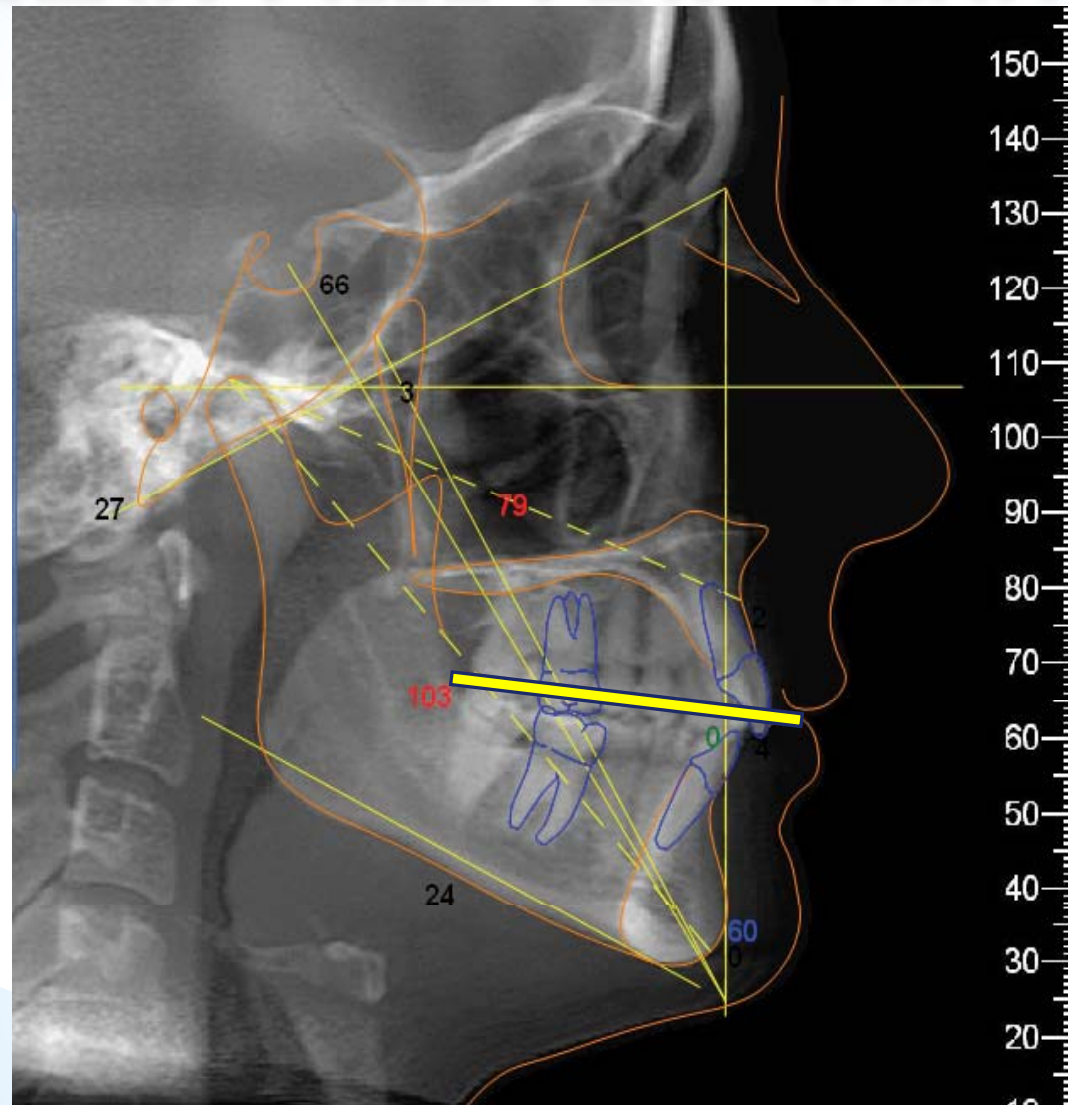
# WHAT IS THE OCCLUSAL PLANE?

\* POSITION OF MAXIMUM INTERCUSPATION (MIP)  
OR CONTACT OF POSTERIOR TEETH

1. THE STATIC POSITION IS USED AS A  
REFERENCE GUIDE OF THE OCCLUSION
2. THE DYNAMIC POSITION HAS 3 DIMENSIONS  
THAT CAN RANGE UPTO 7mm;

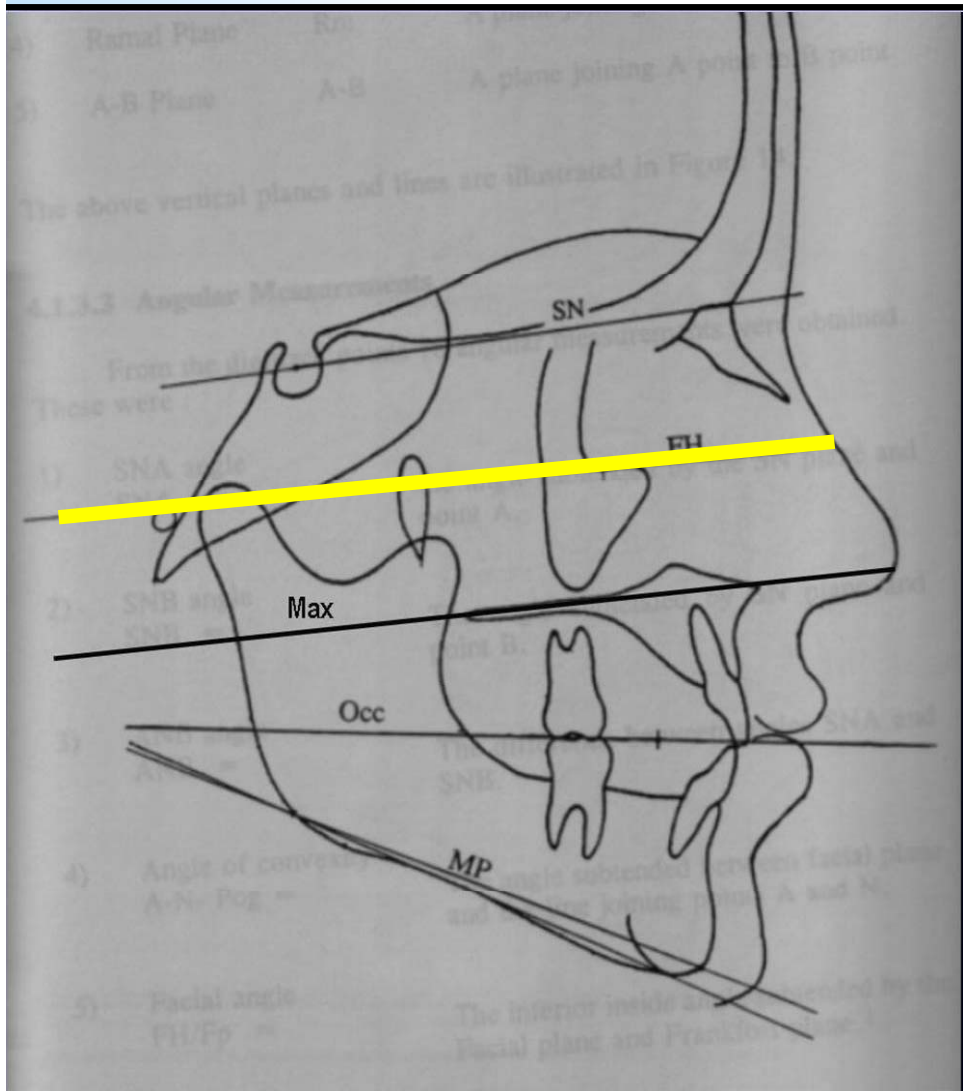


# \* OCCLUSAL PLANE IN 2D CEPHALOMETRIC ANALYSIS



OCCLUSAL PLANE

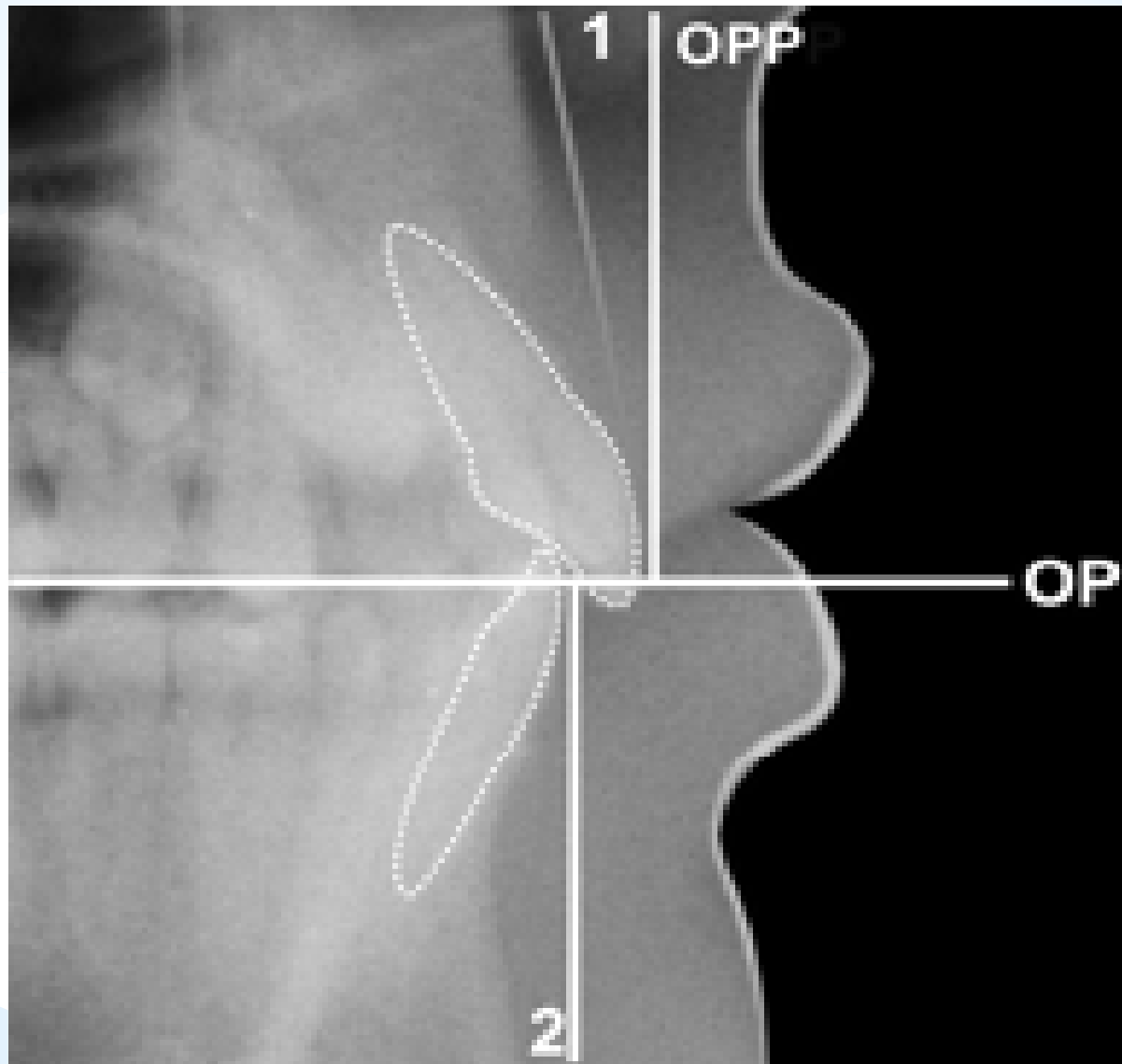
# \* STANDARDIZATION TECHNIQUES

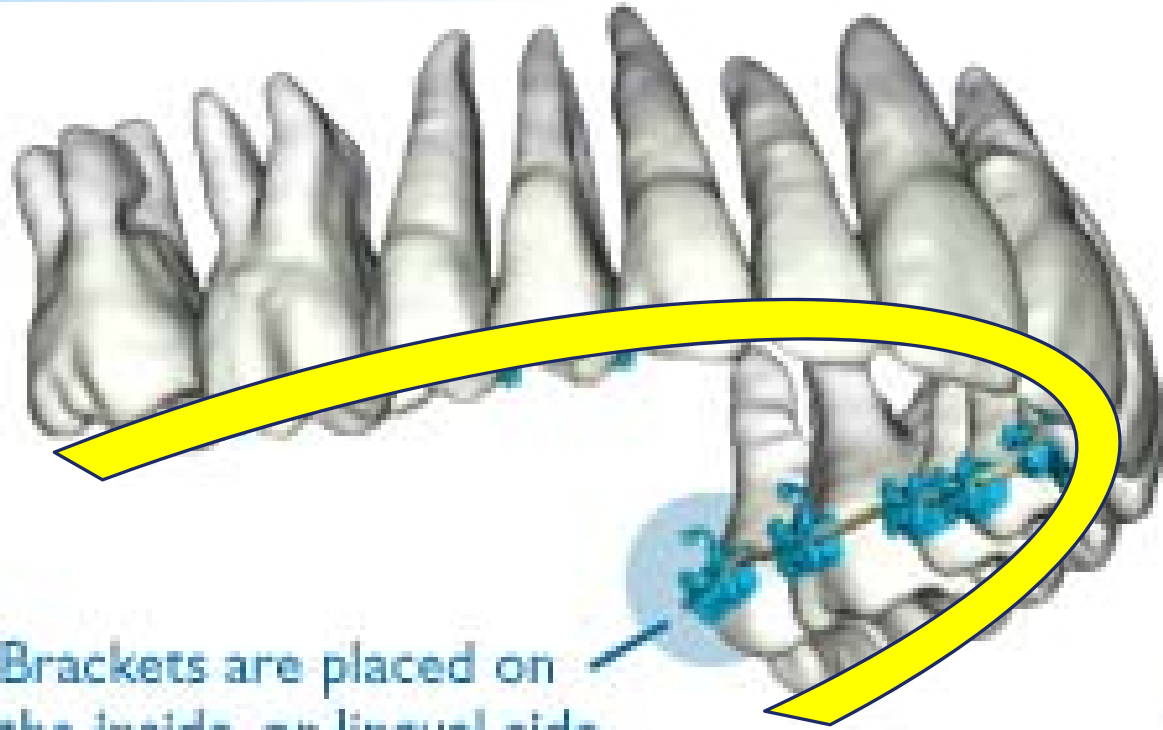


## \* FRANKFURT PLANE

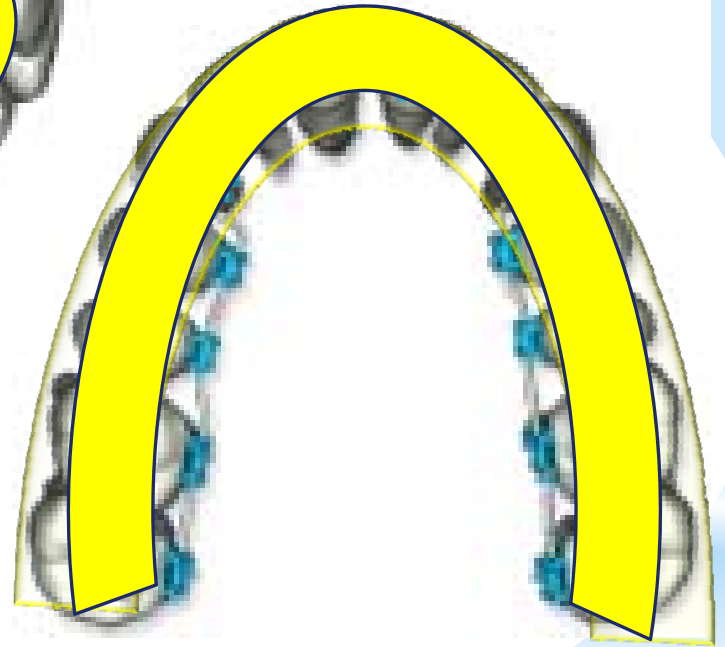


# \* OCCLUSAL PLANE



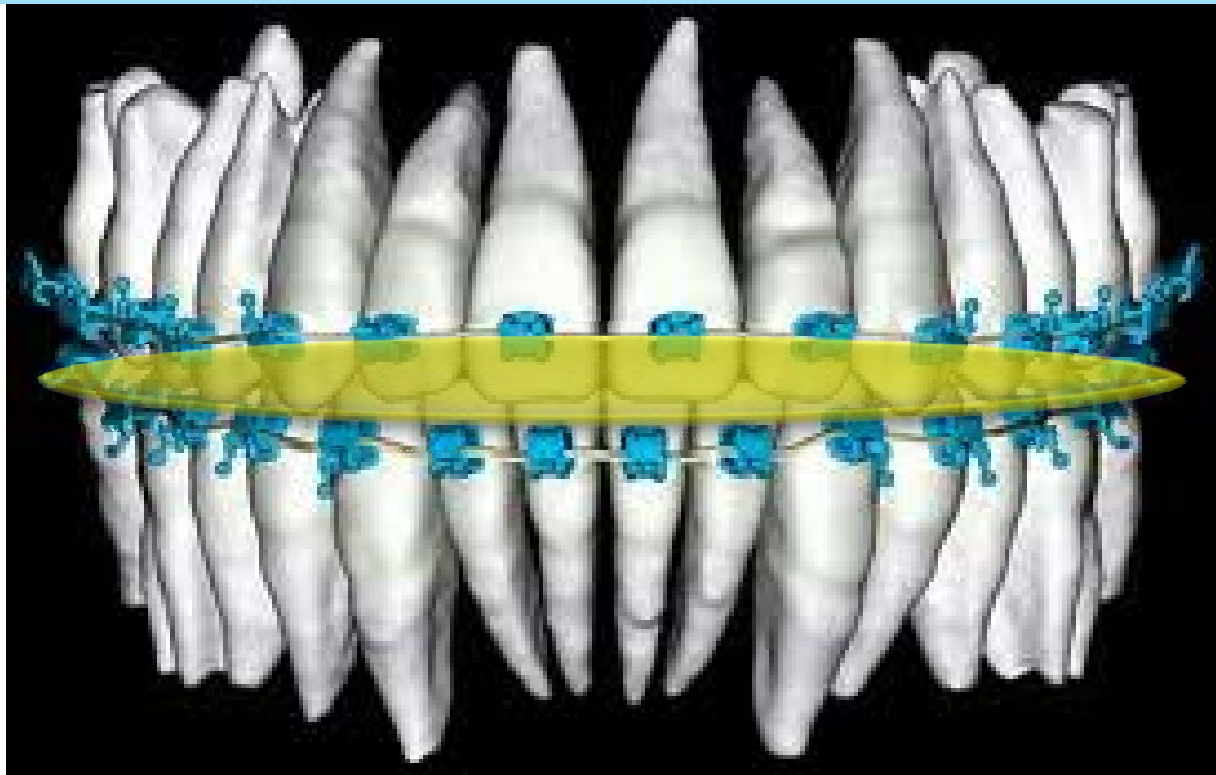


Brackets are placed on the inside, or lingual side, of the teeth.

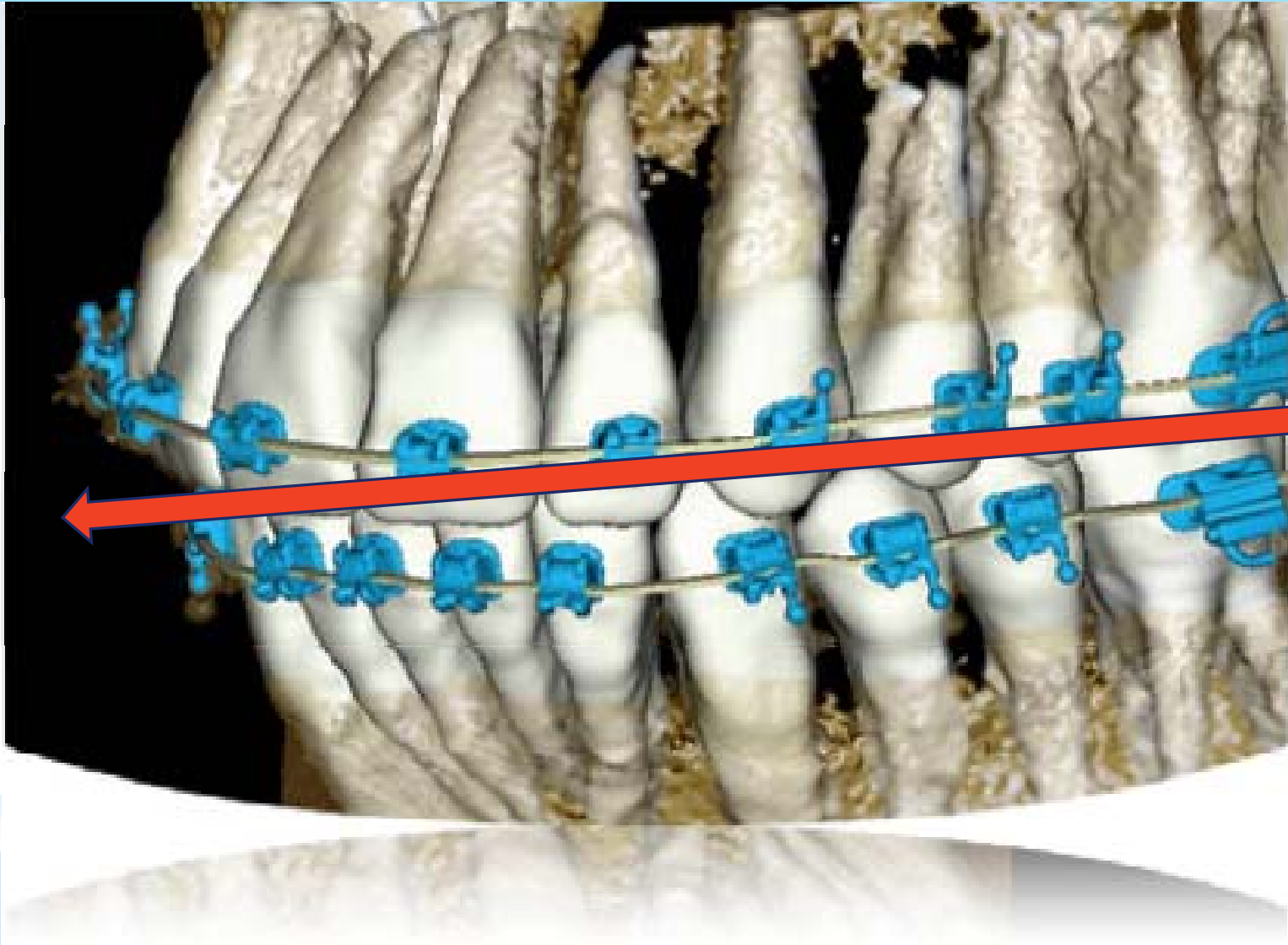


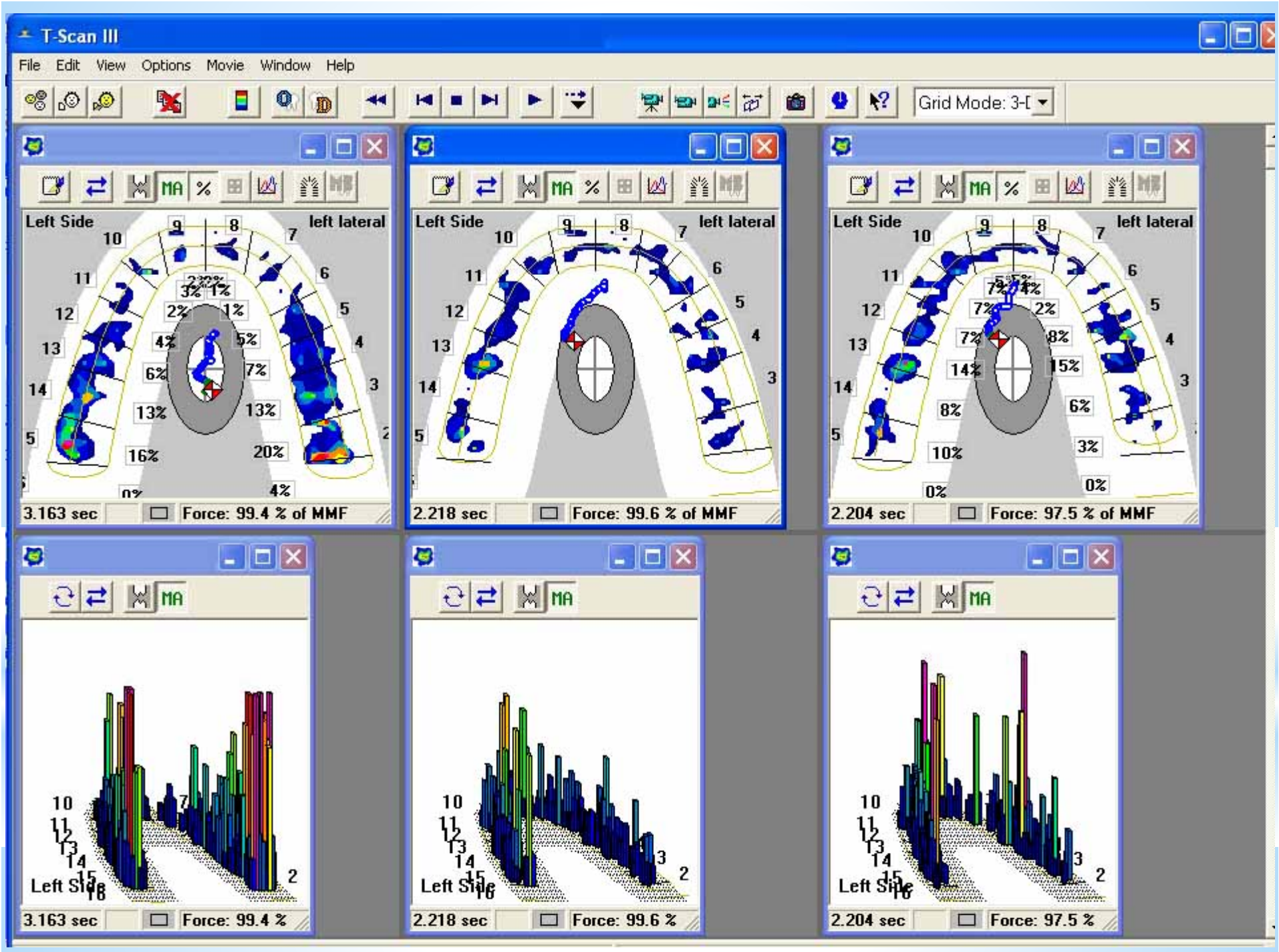
**OCCLUSAL PLANE HAS A LINE, RANGE**

**\* 3D OCCLUSAL CLOUD:  
RANGE OF OCCLUSAL CONTACT FROM  
MIP TO DISOCCLUSION**



## 3D OCCLUSAL PLANE: STATIC POINT OF MAXIMUM INTERCUSPATION







# \* WHY IS THE OCCLUSAL PLANE IMPORTANT?

- \* FAILURE TO ACCURATELY ESTABLISH THE POSITION OF THE OCCLUSAL PLANE IN DIAGNOSIS AND TREATMENT PLANNING CAN HAVE A DAMAGING EFFECT ON THE DENTITION.

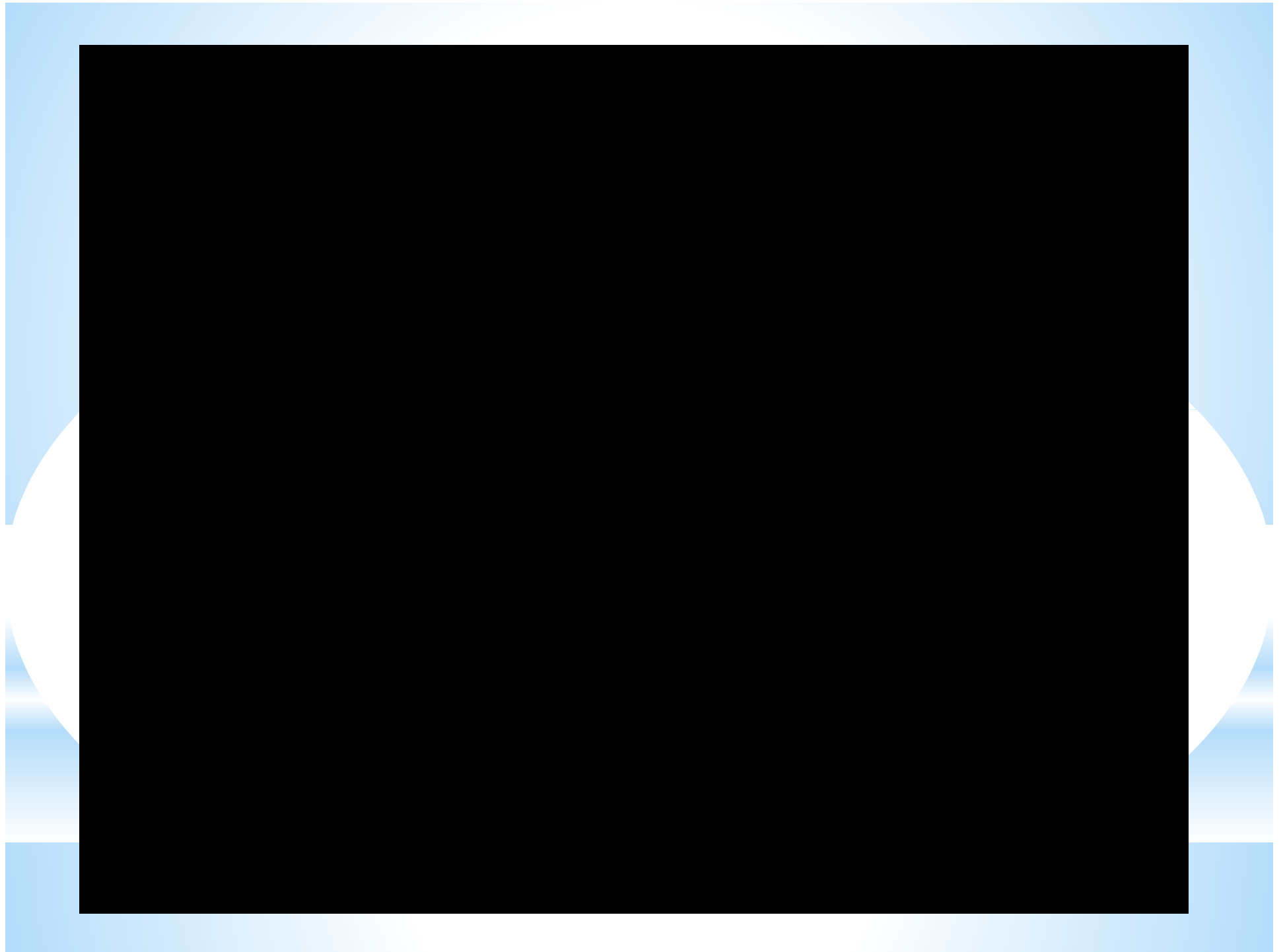
## **FACIAL BALANCE (ESTHETICS)**

ESTABLISHED AROUND THE ORIENTATION OF THE OCCLUSION

## **FUNCTIONAL OCCLUSION DISORDERS**

ESTABLISHED AROUND THE POSTURE

**\* MOVEMENTS OF  
THE LOWER JAW  
(MANDIBLE)**





# \* WHAT FACTORS EFFECT OCCLUSAL PLANE?

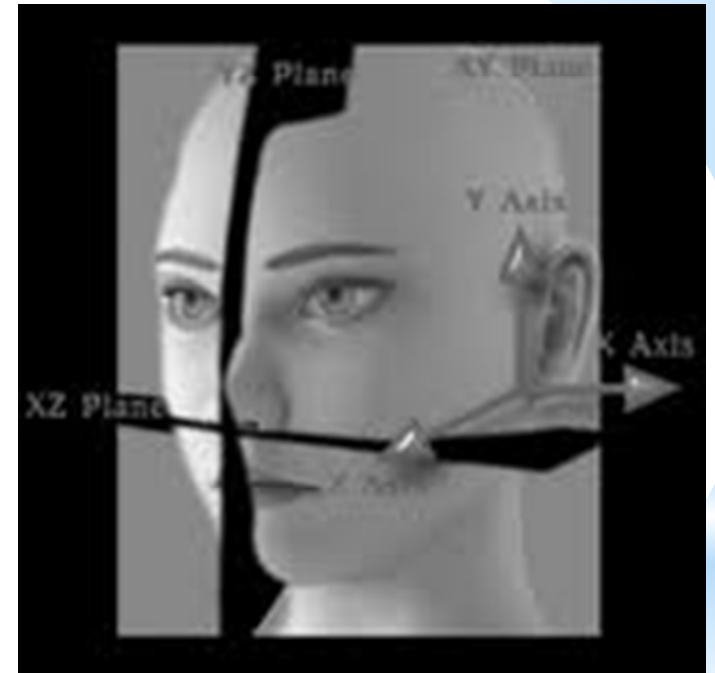
\* GENETIC DISORDERS

\* CRANIOFACIAL MORPHOGENESIS

\* ENVIRONMENTAL FACTORS

\* IATROGENIC: DENTAL INTERVENTION

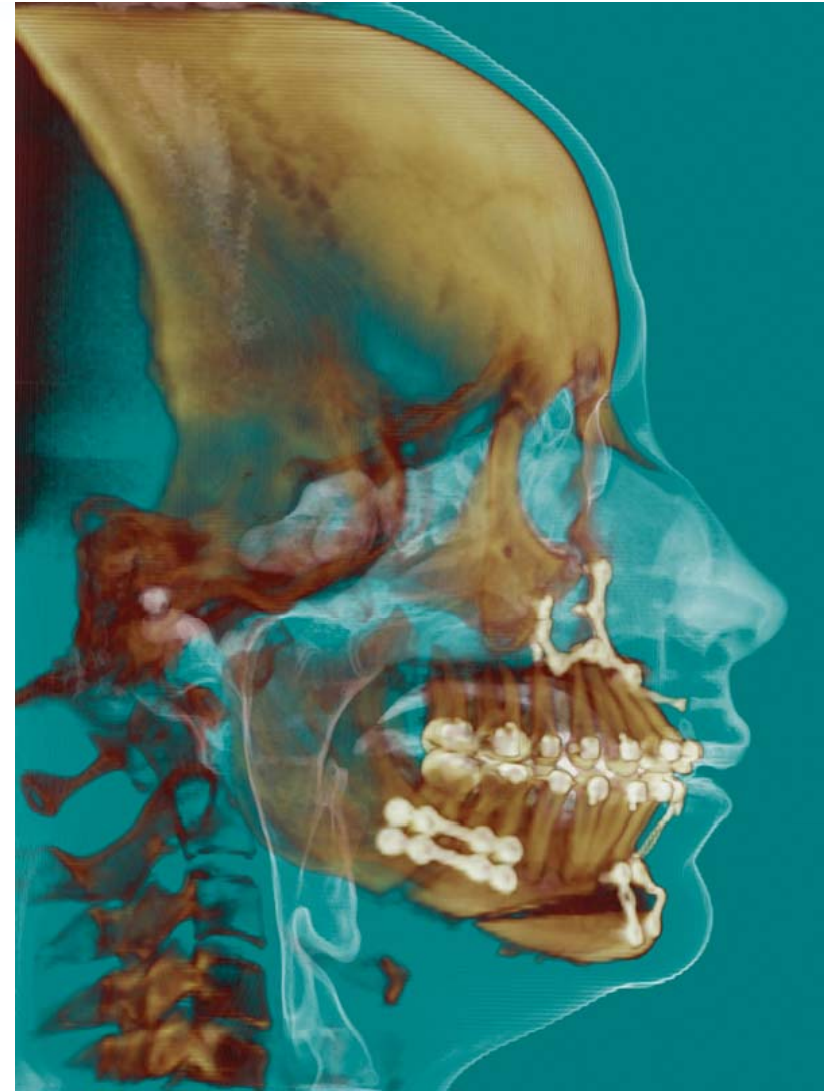
# \* ADVANCES IN 3D DIAGNOSTICS AND TREATMENT PLANNING



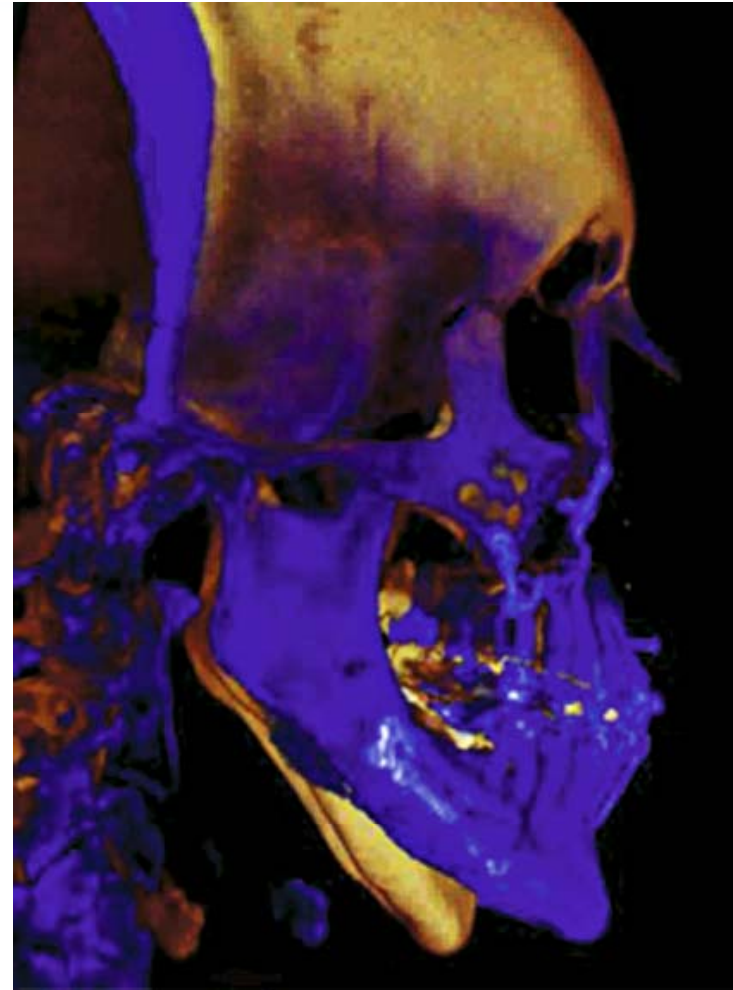
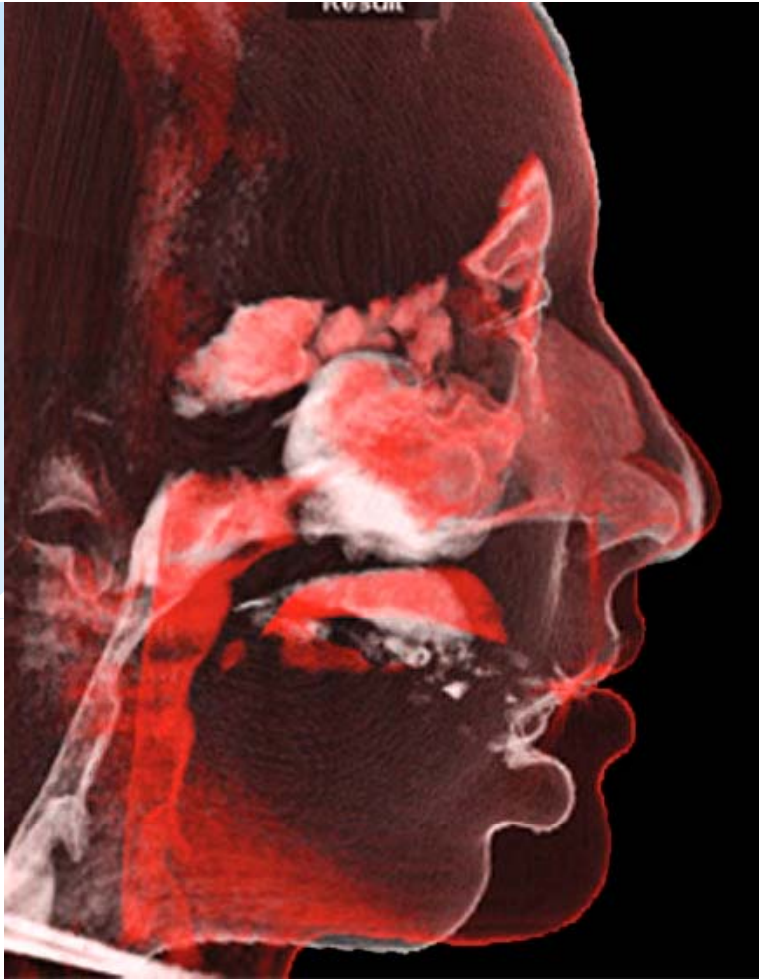


# \* VIRTUAL 3D MODEL OF HEAD AND NECK





**\* Translucent soft-and hard-tissue images of pre- & post-surgery case**



**\* PROGRESS SUPERIMPOSITION IN  
3D**

**\* DISCONNECT WITH  
3D PHOTOS, 3D CBCT...  
.....and NATURAL HEAD  
POSITION**



**\* NEW METHOD OF  
RECORDING NHP**

**JOURNANL OF ORAL MAXILLOFACIAL SURGERY,  
JANUARY 2011**



# \* JOURNAL OF ORAL MAXILLOFACIAL SURGERY, 2011

A PARADIGM SHIFT IN ORTHOGNATHIC SURGERY: A SPECIAL SERIES PART II

## A New Method to Orient 3-Dimensional Computed Tomography Models to the Natural Head Position: A Clinical Feasibility Study

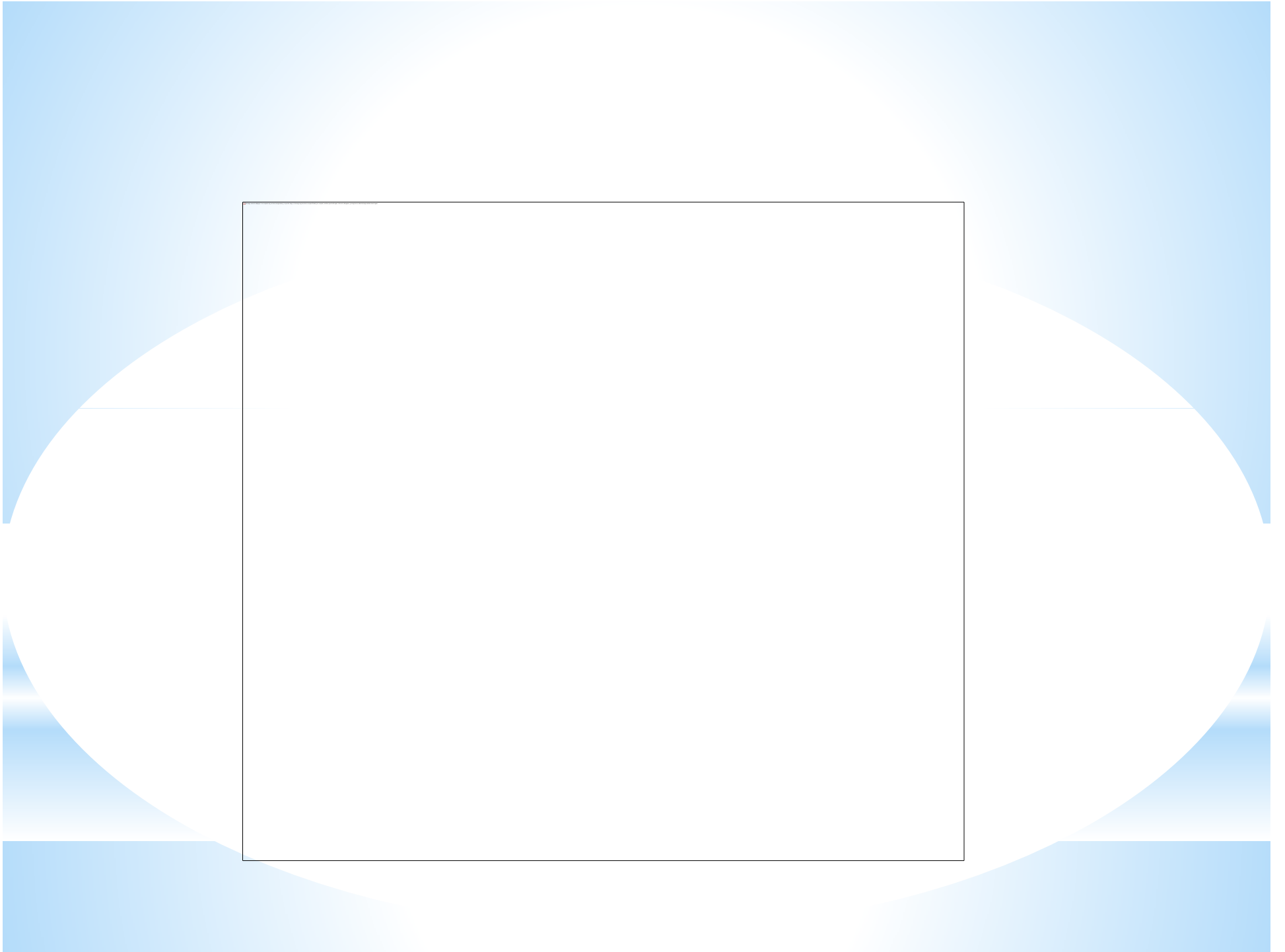
*James J. Xia, MD, PhD, MS,\* J. Kevin McGrory, DDS, MS,†  
Jaime Gateno, DDS, MD,‡ John F. Teichgraeber, MD,§  
Brian C. Dawson, BS,|| Kathleen A. Kennedy, MD, MPH,¶  
Robert E. Lasky, PhD,# Jeryl D. English, DDS, MS,\*\*  
Chung H. Kau, BSD, MScD, MBA, PhD,††  
and Kathleen R. McGrory, DDS, MS‡‡*

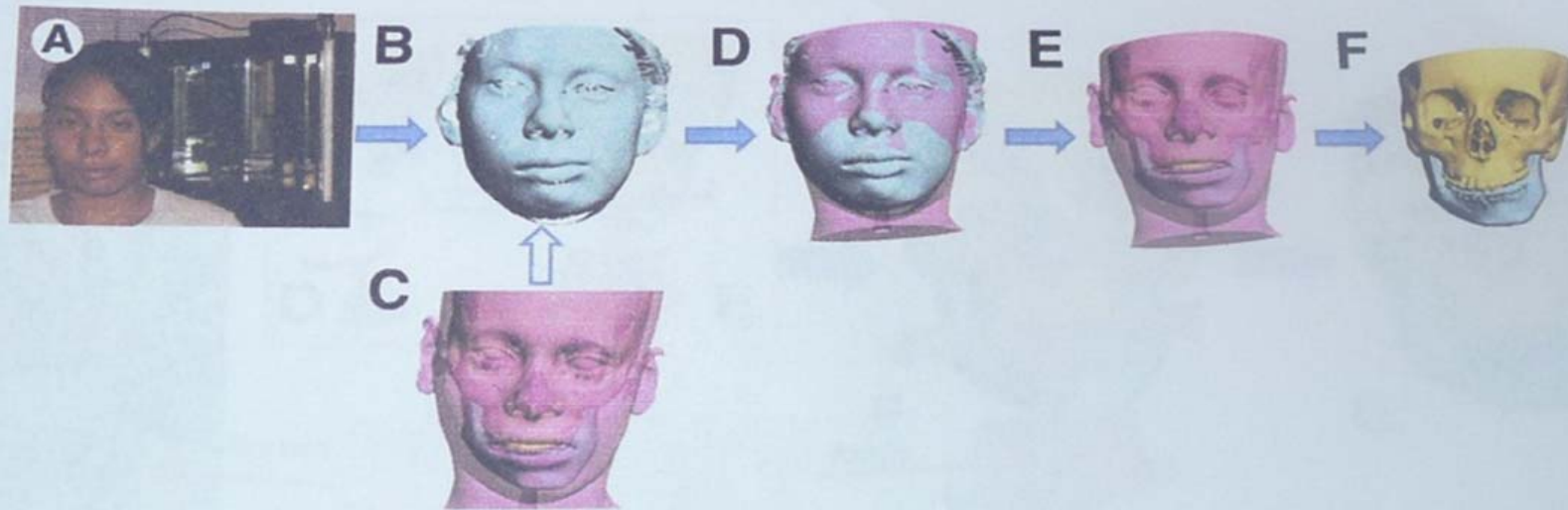
**Purpose:** The purpose of this study was to evaluate the clinical feasibility of a new method to orient 3-dimensional (3D) computed tomography models to the natural head position (NHP). This method uses a small and inexpensive digital orientation device to record NHP in 3 dimensions. This device consists of a digital orientation sensor attached to the patient via a facebow and an individualized bite jig. The study was designed to answer 2 questions: 1) whether the weight of the new device can negatively influence the NHP and 2) whether the new method is as accurate as the gold standard.

\*Director of Surgical Planning Laboratory, Department of Oral and Maxillofacial Surgery, The Methodist Hospital Research Institute, Houston, TX; Associate Professor of Surgery (Oral and Maxillofacial Surgery), Weill Medical College, Cornell University, New York

†Professor, Departments of Pediatrics and Obstetrics and Gynecology, and Director, Design and Analysis Support Services, The University of Texas Health Science Center at Houston, Houston, TX.

\*\*Chairman, Professor and Graduate Program Director, Department of Orthodontics, The University of Texas Health Science





**FIGURE 1.** Laser scanning method. *A*, The patient sits on a calibrated chair that is positioned at the center of the laser scanner. *B*, A 3D facial image in the NHP is captured by the laser scanner. *C*, A 3D CT facial and bone (underneath the soft tissue) model of the patient's head. *D*, The recorded NHP is transferred to the 3D CT facial model by registering it to the 3D facial image in the NHP. *E*, Resultant 3D CT facial model in the NHP. *F*, Resultant 3D CT bone model in the NHP.

*Xia et al. A New Method of Recording NHP. J Oral Maxillofac Surg 2011.*

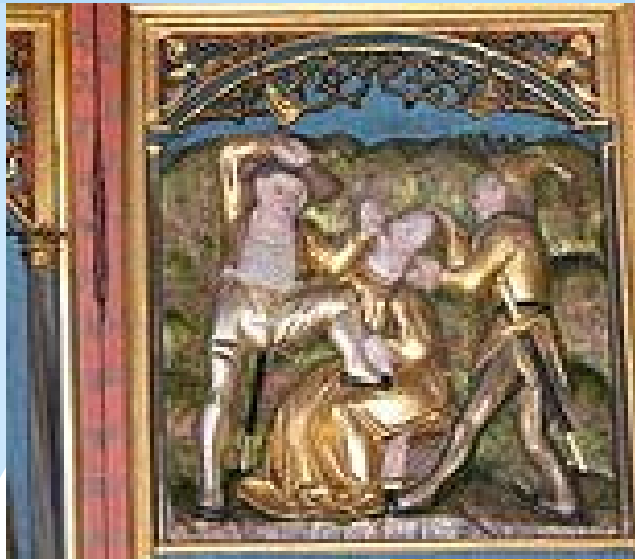
# NEW DIRECTIONS?

- \* 3D/3T VIRTUAL ARTICULATOR
- \* MISSING PIECE IN THE PUZZLE IS THE ORIENTATION OF THE OCCLUSAL PLANE IN NHP, AND THE ABILITY TO REPRODUCE THE POSITION AT WILL OVER TIME
- \* LOCALIZATION OF THE OCCLUSAL PLANE IN REAL TIME WITH ABSOLUTE OCCLUSAL FORCES
- \* COMPUTER GENERATED OCCLUSAL PLANE
- \* CAD/CAM TECHNOLOGY

\* ST. APOLLONIA DIED C 249 IN  
ALEXANDRIA, EGYPT



# \* SAINT APPOLONIA: VICTIM OF TORTURE





**THANK YOU FOR YOUR  
ATTENTION**

