

Figure 1. Vertical extraction system (Benex, Helmut Zepf Medizintechnik and Hager & Meisinger) in use during extraction of maxillary left canine tooth. **A**, Maxillary left canine root after gross caries removal and pilot hole preparation into the canal. **B**, Placement of screw into the root. **C**, Support tray and assembled vertical tooth extraction system to achieve axial alignment. **D**, Progressive root extrusion in a vertical direction. **E**, Extracted root. **F**, Tooth socket after extraction. *Figure courtesy of Dr. Dietrich. (Courtesy of Hong B, Bulsara Y, Gorecki P, et al: Minimally invasive vertical versus conventional tooth extraction: An interrupted time series study. J Am Dent Assoc 149:688-695, 2018.)*

Hong B, Bulsara Y, Gorecki P, et al: Minimally invasive vertical versus conventional tooth extraction: An interrupted time series study. *J Am Dent Assoc* 149:688-695, 2018

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ORTHODONTICS

Patient satisfaction with Invisalign versus bracket-based orthodontic treatment



BACKGROUND

The quality of health care can be measured by many different variables. One that has become especially important is patient

satisfaction. Often patient and professional health care provider satisfaction can differ. A group of adult patients having orthodontic treatment was surveyed for their level of satisfaction and

DIDL Dimensions

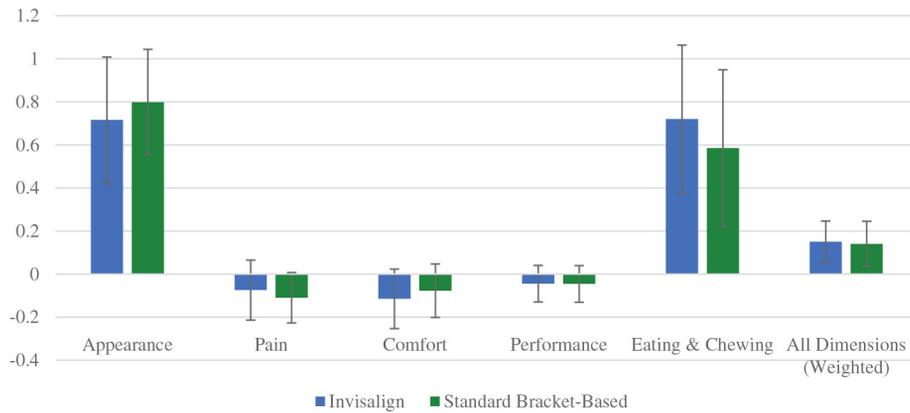


Figure 2. DIDL dimension comparison between Invisalign and standard bracket-based patients. (Courtesy of Flores-Mir C, Brandelli J, Pacheco-Pereira C: Patient satisfaction and quality of life status after 2 treatment modalities: Invisalign and conventional fixed appliances. *Am J Orthod Dentofacial Orthop* 154:639-644, 2018.)

quality of life related to their treatment, which was either with Invisalign aligners or with a conventional bracket-based approach.

METHODS

Over the course of 22 months, 145 patients treated with bracket-based or Invisalign therapy were recruited to complete a survey. The instrument consisted of 94 questions that were from the Dental Impacts on Daily Living index (DIDL index) and the Patient Satisfaction Questionnaire (PSQ). The measurements focused on various dimensions of satisfaction and quality of life. Each group completed the survey immediately after completing treatment. In addition, a small group consisting solely of patients who had bracket-based treatment completed a reliability analysis 6 months later.

RESULTS

One hundred twenty-two patients were assessed. Three socioeconomic variables of sex, age range, and location evaluated. Thirty-three members of the sample were men and 89 were women. Their mean age range was 18 to 25 years.

The average DIDL dimension scores for eating and chewing were significantly better for patients who had Invisalign versus those having bracket-based treatment (Figure 2). Forty-seven percent of the Invisalign wearers and 24% of the bracket-based patients reported 100% satisfaction with their treatment. For the PSQ factors scores, no significant differences were found for any factor between the 2 groups.

Twelve patients having the bracket-based treatment were retested 6 months after treatment. Their oral comfort, general performance, situational factors, and doctor-patient relationship were strongly correlated. Dental function, psychosocial improvement, and dentofacial improvement categories agreed with those obtained immediately after debonding.

DISCUSSION

Overall, the patients in both groups expressed satisfaction with their treatment, regardless of whether that was Invisalign or bracket-based therapy. Over 90% of the patients agreed that they would redo treatment if necessary. Patients who had Invisalign had higher levels of satisfaction with respect to eating and chewing than those having bracket-based treatment, but both groups were satisfied with their appearance and the dentofacial and psychosocial improvements they experienced.

Clinical Significance

Patient satisfaction is highly important to dental practitioners. Finding that both Invisalign and bracket-based orthodontic interventions produce similar levels of satisfaction on all dimensions of care, except for eating and chewing, indicates that dentists can confidently offer either option and allow patients to choose based on their preferences.

Flores-Mir C, Brandelli J, Pacheco-Pereira C: Patient satisfaction and quality of life status after 2 treatment modalities: Invisalign and conventional fixed appliances. *Am J Orthod Dentofacial Orthop* 154:639-644, 2018

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