

UNUSUAL ORTHODONTIC EXTRACTION TREATMENT IN BIPROTRUSIVE UNILATERAL CLEFT LIP AND PALATE

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Objectives: Four premolar extractions are usually an option for biprotrusive orthodontic patients. However, in regard to cleft lip and palate patients it is often necessary to consider different biomechanical approaches due to agenesis, dental anomalies and midline deviation. In addition, cases which there were alveolar bone graft failures demand options such as unusual extractions protocol and non-conventional mechanics. **Clinical report:** a 26-year-old female patient with unilateral cleft lip and palate showed agenesis of left maxillary lateral incisor, maxillary dental midline deviation to the left, $\frac{1}{2}$ Class II malocclusion, severe crowding, presence of left maxillary lateral incisor distal to the cleft, displaced mandibular canines and the right mandibular canine had gingival recession. Besides this, she was a biprotrusive patient with lack of lip seal. Orthodontic treatment started with right maxillary lateral incisor extraction for midline correction such as left maxillary lateral incisor distal to the cleft and mandibular canines extractions. Alveolar bone graft was performed but with no success and the case demanded prosthetic rehabilitation. By the end of the treatment, it was attained Class I molar and Class II canine relationship. Mandibular premolars assumed mandibular canines place such as maxillary canines assumed maxillary lateral incisors site. The site from right maxillary central incisor to left maxillary canine was rehabilitated with fixed dental prosthesis. **Conclusion:** The final result shows the good quality of this case atypical approach, which proved to be highly achievable in means of aesthetic and facial goals.