

Perspective

Classification and Causes of Malocclusion

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DESCRIPTION

One of the most typical dental issues is malocclusion, or "bad bites". When someone closes mouth, upper and lower teeth do not align. This is considered as malocclusion. Malocclusion exists when teeth are crowded- that is, when they are too large for mouth-or when they are crooked. But, if the upper and lower jaws aren't aligned, this can happen. Orthodontics or braces are commonly used to correct malocclusion. Some more severe malocclusions may probably require surgery.

Causes of malocclusion

Malocclusion is generally an inherited condition. This approach it could be exceeded down from one era to the next. There are a few situations which can alternate the form and shape of jaw. These include:

- Teeth are too big on jaw, inflicting tooth to crowd collectively and have an effect on the alignment among the top and decrease jaw.
- Frequently sucked thumb while someone has been a child or toddler.
- Misplaced a teeth and ultimate tooth shifted to fill that gap.
- Someone has an inherited circumstance that impacts the jaw, inflicting the tooth to be misaligned.
- Tumors to the mouth or jaw, accidents that bring about the misalignment of the jaw.

Symptoms

The most common indication of malocclusion is the appearance. It's possible that a person has an overbite or underbite. When the teeth in the lower jaw are too far behind the teeth in the upper jaw, this is known as overbite or overjet (retrognathism). When upper front teeth are too far behind the lower front teeth, it is an underbite. Other clinical manifestations include:

- Difficulty or pain while biting or chewing.
- Speech difficulties (rare), which includes lisp.
- Mouth respiration (respiration *via* the mouth without ultimate the lips).
- Inability to chew into meals correctly (open chew).
- Common biting of internal cheeks or tongue.
- Misalignment of jaw fractures after a severe injury.

Malocclusion classes

Malocclusion of tooth is commonly identified through ordinary dental exams. The dentist will look at the tooth and might carry out dental X-rays to decide in case the tooth is well aligned. If your dentist detects malocclusion, they'll classify it through its kind and severity. There are 3 important instructions of malocclusion:

Class 1: When the upper molars overlap with the lower molars in a favorable position, but the teeth are crowded or spaced too widely apart, then it is Class 1 malocclusion.

Class 2: When a person has a severe overbite, he/she has a Class 2 malocclusion. The upper teeth and jaw overlap extensively with the lower teeth and jaw in this type of malocclusion.

Class 3: When someone has a severe underbite, It has a Class 3 malocclusion. The lower teeth overlap the upper teeth in this type of malocclusion.

CONCLUSION

The majority of malocclusions is genetic and can't be avoided. A person can assist the kids keep away from malocclusion with the aid of using stopping them from sucking their thumbs. If lose enamel happens, a person could get malocclusion. Consider changing lacking enamel with dental implants or dental bridges if someone got misplaced enamel. Braces are one of the most wellestablished malocclusion therapies. In some cases, teeth must be pulled before braces therapy may begin in children and teenagers. Braces enhance the smile and bite by straightening the teeth and jaw. The simplicity of removable orthodontic devices makes them popular for malocclusion therapy. Retainers and headgears are examples of removable devices. Retainer trays help to keep teeth aligned after braces or other orthodontic treatments. All types of malocclusions of the teeth can be treated with invisalign. It's a set of aligner trays made of clear plastic. As a result, it is not visible to others.

Invisalign aligners are removable and must be placed for 20-22 hours per day. During that period, it applies pressure to the teeth and jaw to keep them in perfect alignment. Invisalign is a clear braces system that gives a beautiful smile while remaining undetectable.

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