

Catalogue

UNI-Smile Distractor



"Giving the people a nice Smile."

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UNI-Smile Distractor

Introduction



INDICATIONS

Surgically assisted rapid maxillary expansion (SARME) is needed in skeletally matured patients (closed midpalatal suture), to correct a transverse maxillary deficiency or hypoplasia of \rightarrow 5 mm. This is frequently seen in adolescents and adults. Those patients often present with a unilateral or bilateral posterior crossbite and anterior dental crowding.

GENERAL PRINCIPLES

1. Simple and efficient
2. Compatibility where possible
3. Small in all dimensions

TYPE

UNI-Smile Distractor



UNI-Smile Distractor

Features



- Small and hygienic
- Bendable plates in the direction of the bone
- Pins for an excellent grip on the bone



- Easy placement
- Excellent fixation



- Smallest modules on the market
- Hygienic



ABUTMENTPLATES

**SELFDRILLING SCREW
FIXATION**

MODULES



UNI-Smile Distractor

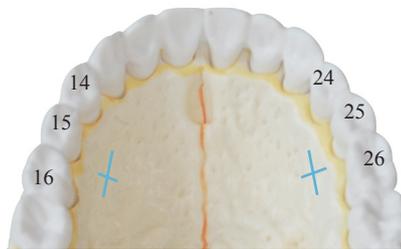
Surgical procedure



Sequence of the surgery

1. Corticotomies: lateral - midline + posterior disjunction
2. Placement of the UNI-Smile Distractor with self-drilling screws between teeth n° (14)-15-16 and (24)-25-26

INCISION



A cross palatal incision or an L-incision, between premolar and molar or between premolars has shown to be the ideal location. The incision is made, 1 cm downwards as indicated on the picture.

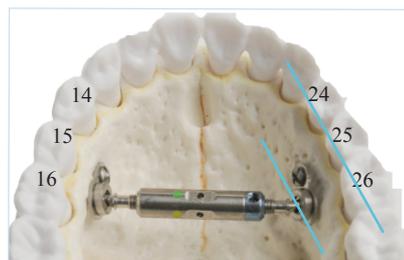
The correct distractor module can be measured bone tot bone with the fitting models (IT0400).



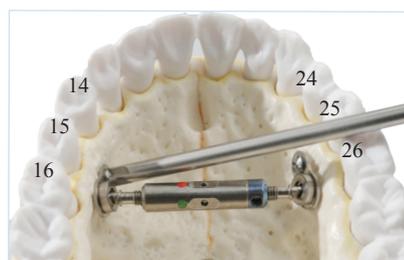
IT0400

PLACEMENT

Blue mark ALWAYS to the left!



The abutment plates are placed horizontally. The blue side is intended for the left side of the patient.



The Smile Distractor must be fixed to the palatal bone with a self-drilling screw on each side (DSSA06 or DSSA07 - screwdriver IT0315).



IT0315

UNI-Smile Distractor

Surgical procedure



ACTIVATION



The surgeon must activate the Smile Distractor until the two front teeth have an opening of ± 1 mm. To do this, place the key instrument (IT0314) over the middle part of the distractor body and turn from the front to the back.



IT0314

BLOCKING SCREW



The blocking screw (D002) is placed in one of the two available threaded holes with the screwdriver (IT0128). Place the blocking screw perpendicular over the cylinder, with a clear view of the screw hole. The blocking screw should be fixed real firm, using wrist force.



IT0128

Sequence of the distraction

1. At the end of the surgery the blocking screw is tightly engaged, using wrist force. Place a tampon in case the blocking screw should drop.
2. One week after the surgery the activation of the Smile Distractor is started. Remove the blocking screw and expand until bone resistance is felt, then turn once or twice more. During activation (1 to 2 weeks) the patient should turn two times a day a quarter of a turn. At each quarter of a turn a new colour appears.
3. After completion of the distraction put the blocking screw back real firm, using wrist force. The distractor needs to be in place 3 to 6 months.



UNI-Smile Distractor

Product information



INSTRUMENTS



IT0315



IT0128



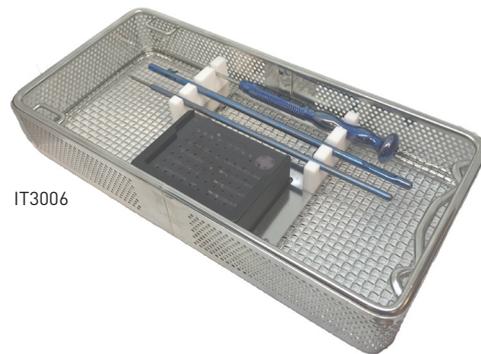
IT0314



IT0400



IT0333



IT3006

Cat. No.	Description
IT0315	Titanium Screwdriver Hexagon
IT0128	Square Screwdriver 1.2mm screw
IT0314	Distractor Key Instrument
IT0400	Dummies 4 pieces
IT0333	Patient Key Distractor
IT3006	Inox organiser Smile Small 24x12

UNI-Smile Distractor

Product information



DISTRACTORS



Cat. No.	Description	Total expansion
DSA014	Module UNI-Smile 14mm	12
DSA016	Module UNI-Smile 16mm	14
DSA018	Module UNI-Smile 18mm	16
DSA020	Module UNI-Smile 20mm	18

* optional DSA022 and DSA024



SCREWS

Cat. No.	Description	Ø
DSSA06	Self-Drilling Screw 6mm	2.3 mm
DSSA07	Self-Drilling Screw 7mm	2.3 mm

* used with screwdriver IT0315, hexagon



BLOCKINGSCREW

Cat. No.	Description	Ø
D002	Blockingscrew for distractor	2.0 mm

* used with screwdriver IT0128, square



UNI-Smile Distractor

Patient information



DOWNLOAD

Download the complete patient information at www.titamed.com

At the end of your operation a small blocking screw is inserted by the surgeon. This makes your distractor passive.

A new consultation is scheduled a week later. Your physician will remove the blocking screw. This makes the distractor ready for the activation.

There are four holes in the mid-body of the distractor, one for every quarter of a turn. The distractor is activated twice a day, a quarter of a turn, what is the equivalent of 0,5 mm a day.

Insert the pin of the blue key in the hole in the middle of the distractor. Push the key slightly downwards and backwards. This makes the key hinging at the end of the white joint. Your surgeon will explain this the first time for you with a mirror.

By turning twice a day, we open the palate \pm 0,5 mm. So, After 10 days, we can expect an opening of 5 mm between the two front teeth, equal to a transversal bony distraction of 5 mm.

Activation



Place the key in the pin-hole and push backwards and downwards to hinge the key on the white joint.



Turn a quarter until the next pin-hole is present. Do so twice a day.

UNI-Smile Distractor

Patient information



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The distraction period takes 1 to 3 weeks, depending on the amount of widening needed. The opening between your two central incisors reflects this widening.



Before the widening.



Smile distractor in use.

Once the widening of the palate is achieved, the fixing screw is placed again by the physician. This makes the distractor passive again.

The distractor should be kept firm and immobile in the mouth for 3 to 5 months. Sometimes the distractor becomes loose during the healing process. Then a visit to your physician is necessary to retighten or remove the distractor.

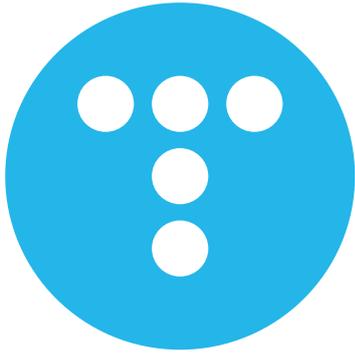


Six months after the widening.

Clean your distractor daily with a child toothbrush.

Note: the activation instrument is a key from American Orthodontics-Orthotrends and is named a shilliday key. This key is child-friendly, gives no room for error in use and is familiar to any orthodontist.





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