

# The Truth Behind Orthodontic Relapse



American  
TeleDentistry  
Association

Trey Lawrence, the General Counsel for the national orthodontic trade guild, the American Association of Orthodontists ("AAO"), testified before the Texas State Board of Dental Examiners that any orthodontic procedure is an "irreversible procedure."<sup>1</sup> So, if Lawrence is right, have his trade association members across the country been cheating consumers for decades by unnecessarily selling them "retainers" after orthodontic treatment and charging them for treating relapses?

The conclusive truth is that much of orthodontic treatment, including clear aligner therapy, is indeed reversible – a condition commonly referred to as "orthodontic relapse."

## What is Orthodontic Relapse?

Dr. Thilander – a World Federation of Orthodontists Honorary – defines relapse as "a return to the pretreatment condition" and that "despite correct diagnosis and treatment planning followed by careful stabilization of the final result, relapse tendencies still exist in a fairly high percentage in cases treated."<sup>2</sup>

Dr. Ricky Harrell – Program Director of the Georgia School of Orthodontics and Diplomate of the American Board of Orthodontists – states that relapse is the "800 lb. gorilla in the orthodontic room" and that "orthodontic relapse and posttreatment problems have existed since the first active appliance therapy on a patient."<sup>3</sup> Indeed, nearly a century ago, Oppenheim echoed Dr. Harrell's words in stating that "retention is one of the most difficult problems in orthodontia; **in fact, it is the problem.**"<sup>4</sup>

Despite extensive research, the various elements leading to relapse of treated malocclusions **are not completely understood**, which makes retention **one of the most challenging aspects of orthodontic treatment**. In addition, there appear to be **no descriptive characteristics** of a case or pretreatment variables that can accurately predict relapse. In fact, one study found that patients treated with Invisalign relapsed more than those treated with conventional fixed appliances.<sup>5</sup>

## How Often Do Patients Relapse?

One study found that **orthodontic relapse occurs in almost 80% of orthodontic treatment**<sup>6</sup> while another study found that relapse can occur in approximately 70% of cases after orthodontic treatment.<sup>7</sup> The only known way to maintain satisfactory alignment in the posttreatment period is with long-term use of fixed or removable retainers, but **even with the effective use of retainers**, there is a more than a 19% relapse rate.<sup>8</sup>

Many adult orthodontic patients are those who had orthodontic care as teenagers and have experienced relapse as studies show that over 70% of teenage orthodontic cases relapse.<sup>9</sup> Dr. Thilander found that 40% to 90% of orthodontically treated patients have **dental alignment results determined as unacceptable just 10 years after** retention began<sup>10</sup> while another study found that some relapse of the teeth occurs after **just a few hours.**<sup>11</sup>

**It is the ATDA's belief, based on the real clinical data, that the AAO's testimony stretched the understanding of common oral health care to a level of farce, which serves its interest of thwarting alternative, efficacious and more affordable consumer options. For the AAO, what is really "irreversible" is the public trust it has squandered.**

American TeleDentistry Association || Jun. 10 2022

1. Trey Lawrence, Texas State Board of Dental Examiners, May 13, 2022 <https://www.youtube.com/watch?v=lxqM6zoUno4&t=8981s>

2. Thilander B. Orthodontic relapse versus natural development. Am J Orthodontic Dentofacial Orthopedic. 2000 May;31(5):562-3.

3. Dr. Ricky Harrell, Retention and Stability – the Bane of Orthodontics, Orthodontic Practice US, <https://orthopracticeus.com/ce-articles/retention-and-stability-the-bane-of-orthodontics/>

4. Oppenheim A. The crisis in orthodontia. Part I. Tissue changes during retention. Int J Orthod 1934;6:639-644.

5. Kuncio D, Maganzini A, Shelton C, Freeman K. Invisalign and traditional orthodontic treatment postretention outcomes compared using the American Board of Orthodontics objective grading system. Angle Orthod. 2007 Sep;77(5):864-9.

6. Chung How Kau. A commercial available tooth positioner for the treatment of simple orthodontic relapse. 2017. Clinical [trials.gov/ct2/show/NCT03532082](https://trials.gov/ct2/show/NCT03532082)

7. Sadowsky C, Sakols E. Long-term assessment of orthodontic relapse. Am J Orthod. Dec;82(6):456-63.

8. Lang C, Alfter G, Goz G, Lang GH. Retention and stability-taking various treatment parameters into account. J Orofac Orthopedic. 2002 Jan;63(1):26-41.

9. Dr. David Galler, Retainers: Prevent Orthodontic Relapse Retainer Agreements: Prevent Relationship Collapse, The Academy of Clear Aligner Therapy, Winter 2015.

10. Thilander, supra note 2.

11. Reitan K. Principles of retention and avoidance of posttreatment relapse. Am J Orthod. 1969 Jun;55(6):776-90