

## Evaluating the Effects of Posterior Bite Plane, Essix Retainer and Hawley's Appliance on Speech.

LijinJames,<sup>1</sup> UB Rajasekaran,<sup>2</sup> Aniruddh V Yashwant<sup>3</sup>

<sup>1</sup>(Post Graduate Student, Department Of Orthodontics and Dentofacial Orthopaedics, Indira Gandhi Institute of Dental Sciences, Sri BalajiVidyapeeth Deemed University, Puducherry, India)

<sup>2</sup>(Professor and Head, Department Of Orthodontics and Dentofacial Orthopaedics, Indira Gandhi Institute of Dental Sciences, Sri BalajiVidyapeeth Deemed University, Puducherry, India)

<sup>3</sup>(Senior Lecturer, Department Of Orthodontics and Dentofacial Orthopaedics, Indira Gandhi Institute of Dental Sciences, Sri BalajiVidyapeethDeemed University, Puducherry, India)

Corresponding Author: LijinJames

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**Abstract:** Function such as speech has to be maintained during the orthodontic treatment. As speech is crucial for communication, to perform day to day activities and social acceptance, precautions should be taken to prevent any disturbance of speech during active and retentive phase of orthodontic treatment. Appliances such as posterior bite plane, Essix retainer and Hawley's appliance have an effect on speech. Many patients advised for these appliances, often complaint about the hindrance in speech. Hence, we would like to evaluate the effects of appliances on speech.

**Keywords:** Posterior bite plane, Essix retainer, Hawley's Appliance

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### I. Introduction

Retainers are routinely used by patients for 6 to 12 months after orthodontic treatments have been completed in light of the fact that remodelling occurs in soft and hard tissue during this retention period. Though, in the long term, it might be essential to tolerate the retention procedure until the growth is complete. Hawley and Essix are the two most commonly used removable retainers in orthodontic treatment,<sup>1</sup> whereas, the effect of Posterior bite plane in correction of skeletal open bite, cross bite and also used as retainer for the management of vertical problems.<sup>2</sup> The aim of this study is to compare the effects of Posterior Bite Plane, Essix Retainer Hawley's Appliance on speech and to evaluate which appliance gives least effects on speech.

### II. Materials & Methods

Inclusion criteria for this study involve male and female patients with a mean age 18-30 years in ethnic Pondicherry & Tamil Nadu population. Patients who had undergone previous orthodontic treatment, patient with missing teeth, prosthesis, gross asymmetry, history of trauma, cleft lip and palate were excluded from the study.

The Posterior bite plane was prepared by extending the base plate to cover the occlusal surface of the teeth, Essix retainers were developed from plastic, polyester .030", Essix sheet materials as indicated by the producer's guidelines and Hawley retainers were fabricated with labial wire with vertical loops, Adams clasps and lingual acrylic. (Figure 1)

The speech articulation of 30 patients was evaluated prospectively. The patients were randomly selected into retention by treatment allocation cards such as Posterior bite plane, Essix retainer and Hawley's appliance. The all groups included 10 participants with a mean age of 18-32 years. Speech sound assessments were performed using vowels (a) with different consonants in first day,<sup>3</sup> second week and one month. The sound analyses were obtained using spectral and temporal parameters with a computerized speech lab model 4300B. Statistical analysis was done using IBM SPSS for Windows, version 20.



**Figure 1:** Intraoral Photograph showing Group 1-control group, Group 2-Posterior Bite Plane, Group 3-Essix Retainer and Group 4-Hawley's Appliance.

### III. Results

p value less than 0.05 was considered statistically significant. Patients wearing the Essix retainer exhibited the least difficulty during speech followed by Hawley's retainer. Patients using bite plane exhibited the maximum difficulty in speech among all the groups.(Table- 1)

**Table 1:**Statistical evaluation of F1, F2, and F3 frequencies of the [a] vowel with different consonants (t, d, n, l, s, and z)in different observation periods.

Format in frequency (Hz)		Control group			Posterior bite plane			Essix retainer			Hawley's appliance		
		1 <sup>st</sup> day	2 <sup>nd</sup> week	1 month	1 <sup>st</sup> day	2 <sup>nd</sup> week	1 month	1 <sup>st</sup> day	2 <sup>nd</sup> week	1 month	1 <sup>st</sup> day	2 <sup>nd</sup> week	1 month
ta	F1	.008	.009	.004	.335	.312	.301	.069	.038	.017	.268	.235	.190
ta	F2	.005	.006	.007	.339	.327	.321	.056	.031	.024	.298	.239	.187
ta	F3	.008	.001	.004	.351	.313	.302	.047	.037	.027	.279	.251	.197
da	F1	.003	.005	.002	.339	.336	.325	.087	.026	.014	.265	.239	.201
da	F2	.005	.003	.006	.325	.328	.316	.065	.043	.029	.256	.225	.183
da	F3	.006	.007	.004	.329	.305	.296	.035	.028	.012	.283	.229	.177
na	F1	.009	.001	.003	.343	.333	.315	.054	.039	.013	.249	.243	.183
na	F2	.002	.001	.007	.336	.317	.303	.076	.036	.024	.254	.236	.195
na	F3	.007	.008	.002	.330	.326	.316	.054	.029	.016	.267	.230	.187
la	F1	.005	.003	.005	.325	.308	.300	.049	.040	.034	.268	.225	.191
la	F2	.005	.002	.004	.319	.311	.304	.076	.032	.024	.288	.219	.201
la	F3	.008	.003	.008	.351	.345	.334	.037	.028	.018	.269	.251	.160
sa	F1	.004	.003	.005	.343	.334	.327	.043	.025	.012	.269	.243	.187
sa	F2	.002	.004	.005	.356	.343	.336	.077	.050	.043	.274	.256	.198
sa	F3	.004	.005	.007	.347	.341	.329	.051	.032	.014	.254	.234	.189
za	F1	.001	.002	.004	.321	.315	.304	.054	.032	.004	.251	.235	.203

za	F2	.005	.007	.002	.312	.310	.301	.065	.021	.016	.245	.228	.196
za	F3	.003	.001	.005	.330	.316	.303	.053	.025	.013	.263	.247	.211

#### IV. Discussion

Posterior bite plane can be incorporated in to upper or lower arch for correction of anterior open bites to unlock the occlusion by discluding all the anterior teeth to permit further eruption and intrusion of the posterior teeth.<sup>2</sup> Essix retainers are used to maintain the newly positioned tooth in correct position in all three dimensions after the end of orthodontic treatment. A Hawley's appliance may be used actively to achieve minor orthodontic tooth movements and passively for retain the teeth in the corrected position at the end of the orthodontic treatment.<sup>1</sup>

Formats were typically utilized for the assessment of vowels. Phoneticians focus around the initial three formants for etymological data<sup>3</sup>. The first format frequency (F1) connects to the articulatory height of the vowel and rises when the tongue is brought down. The second format frequency (F2) reflects generally the vowels and rises when the tongue placed toward the front. The nearer they are together, the more 'back' a vowel sounds. The third format frequency (F3) adds to quality distinctions, which is more dependent on the area of lip cavity and could rise when accompanied by the reduction of the lip cavity.<sup>4</sup>

A past study demonstrated that pitch and format frequencies may change significantly during puberty, whereas this change ends at the age of 18 years.<sup>5</sup> To ensure that the sound phonating approaches for each patient at various examination times were almost the equivalent, the age criteria (older than 18 years) was chosen in our investigation to avoid intentional distance from change in sound from puberty. Furthermore, all patients had the experience of learning English for over 10 years. English pronunciation specialists were likewise used to ensure the accurate pronunciation of those designed words before enrolment.<sup>6</sup> Thus, in our study, we expected that all subjects could pronounce their selected words precisely.

To lessen the impact of impairment in speech as much as possible, two measures ought to be taken. The first is to inspire retainer-wearing patients to practice distortion sounds and the second is to alter the structure of the bite plane, retainer & appliance with the goal that it will be less likely to impact on speech.<sup>7</sup> More grounded materials might be utilized to lessen the thickness of bite plane, retainer & appliance.<sup>8</sup>

#### V. Conclusion

To conclude this study, essix retainer can be used as a retainer after fixed appliance therapy, since it has the least effect on speech, avoids and reduces the time frame. Posterior bite plane shown maximum influence on speech as per this study results.

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