

Surgically Facilitated Orthodontic Therapy (SFOT) Patient Case

This case demonstrates the successful use of SFOT in managing a complex malocclusion with periodontal risk factors. Our patient exhibited a crossbite, a generalized thin periodontal phenotype, and reduced periodontium with widespread gingival recession. These anatomical and structural limitations created significant hurdles for traditional orthodontic treatment. SFOT was performed to enable safe and predictable arch development, enhance periodontal health, and achieve an aesthetic and stable result.

Case Overview:

Chief Complaint:

- Malocclusion with anterior crossbite and crowding

Diagnosis:

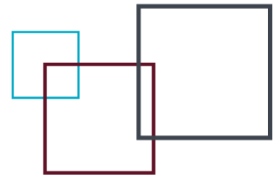
- Crossbite
- Generalized thin periodontal phenotype
- Generalized gingival recession
- Reduced alveolar bone support

Treatment Goals:

- Expand and correct arch form
- Prevent further recession or dehiscence
- Safely reposition teeth within a more favorable bony envelope
- Improve long-term periodontal stability

Pre- Op Clinical Photos:





5 Months Post-Op Photos:



Outcome and Results:

- Safe and controlled expansion achieved
- Significant improvement in alveolar bone volume and soft tissue profile
- Recession stabilized; no new sites of gingival recession observed
- Enhanced ability to achieve ideal tooth positioning
- Improved periodontal prognosis and esthetic result

Before

5 Months Post-Op



Is your patient a candidate for SFOT?

SFOT is a powerful interdisciplinary tool for patients with anatomical limitations that place them at risk during traditional orthodontic treatment. Ideal candidates often present with:

- Thin periodontal phenotype
- Labially displaced or crowded teeth
- Gingival recession or dehiscence risk
- Crossbites requiring transverse development
- Adults with limited bone support or prior orthodontic relapse

Enhancing alveolar housing and leveraging the biologic advantage of SFOT allows for **faster, safer, and more stable** orthodontic outcomes.