

## VULNERABLE ORTHODONTIC PATIENTS: our experience

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**AIM:** The vulnerable term derives from the latin language "Vulnerabilis". It translates as sensible and frail, that can be injured. It is a broad term that requires a containment: intellectual faculty, instruction, economic resources, illnesses. We report our experience with patients vulnerable to diseases. The concept of health vulnerability is not limited to one medical aspect, psychophysical disabled, serious general diseases, specific clinical conditions, patients with a high risk of infection, patients in fragile conditions. There are various types of vulnerabilities and various nuances.

**MATERIALS and METHODS:** Addressing vulnerable patients, even in a structure dedicated to this, means commitment to energy, resources, and effort in adapting protocols and procedures to the individuality and difficulty of these patients. The staff must be prepared to face unexpected situations.

Patients often have more pathologies that require coordination between more specialists. A longer time for therapeutic planning and treatment.

Patients with physical deficits have a need for adequate spaces and adaptable dental or surgical chairs.



Pazient with spastic muscular ontraction, adaptation for oral control

Pazient with multiple sclerosis with cushions to improve the position

Syndromic patient with cognitive delay Loss 16, poor oral hygiene, severe crowding in class II malocclusion



Therapy: dental care, fixed appliance, finishing with functional appliance

**RESULTS:** The complexity required in treating such patients in daily practice in our Department of Maxillofacial Surgery is analyzed: clinical difficulties, need for multidisciplinary involvement, criticality, medicolegal implications, ergonomic and management aspects, limitations, and improvements that should be made.

Depending on tissue biotype and other variables, there is no predictable outcome of treatment, despite careful analysis and accurate planning of orthodontic movements during treatment.

More time is needed for logistics and management, information and consent, limited compliance, psychological support to patient and family. Each case requires a personal protocol.

**CONCLUSION:** The complex management of these patients is not limited to clinical and medical-legal aspects but affects many aspects of patients' life, as well as operators' and all staff. It's important to simplify therapeutic procedures and adapt them to individual patients.

**Operators often have to accept a therapeutic compromise.**

Patient with trauma outcomes at age three  
Spasticity and cognitive delay



Therapy: functional appliance

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