BOOK REVIEWS

Goal-Directed Orthodontics

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e have all experienced the frustration of treating a retrognathic patient with Class II elastics, only to have the overjet relapse during retention. In such a case, a more thorough understanding of pretreatment condylar position in centric relation might have directed the treatment plan toward upper-premolar extractions or mandibular-advancement surgery. In this book, Dr. Andrew Girardot reviews the subject of treatment planning around condylar position and raises the larger question: What is the orthodontist's role in establishing the overall health of the masticatory system?

Assembling 24 contributors from around the world, this volume is dedicated to Dr. Ronald H. Roth and his philosophy of treating to a seated condylar position. The 26 chapters are divided into three sections, the first focusing on philosophy and diagnosis and the other two covering a variety of interesting treatments: preadolescents in the mixed dentition, Class II cases with upper-premolar extractions, equilibration, distraction osteogenesis, and patients with sleep disorders, among others.

Every chapter is lucidly written and filled with high-quality records, but three held particular interest for me. In "The Ideal Form and Function for the Gnathic System: An Orthodontic Treatment Goal", Dr. Girardot provides a thorough overview of the TMJ and describes dynamic and physiologically ideal tooth positions. In "Goal-Based Diagnosis and Treatment Planning in Orthodontics", Dr. Theodore D. Freeland uses easy-to-follow photographs to simplify the laboratory steps involved in establishing a power centric bite and performing a facebow transfer. In "3-Dimensional Facial Analysis and 7-Step Cephalometric Treatment Planning", Drs. Michael J. Gunson and G. William Arnett offer a well-structured method for obtaining the best results in terms of facial esthetics, airway, and occlusion. I found their surgical records remarkable.

My only critique is that not enough consideration is given to the evidence-based literature regarding the function of teeth in relation to the TMJ. Research has shown that condylar position is adaptable without detriment to the patient's masticatory health. Should the orthodontist eliminate interarch elastics from the mechanotherapy when the patient's primary concern is overjet? A point-counterpoint section might have appealed to a broader audience.

In summary, however, *Goal-Directed Orthodontics* is about removing the guesswork from orthodontic treatment. Specific pretreatment goals and a systematic approach will lead to precise results. If you agree that orthodontists are keepers of the condyle, or if you are simply interested in learning more about the Roth philosophy of treatment planning, this is a book for you.

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