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THE EDITOR'S CORNER

I remember Dr. Tweed saying that any man with reasonable manual dexterity who studied the Tweed Technique and adhered closely to its teachings could quickly turn out orthodontic results equal to or even better than his. I notice that he repeats that in his book. I did not believe it then and I do not believe it now. But, I have a feeling that he did and does believe it. Of course, he also said that the individual must devote himself to the study and care of his patients to the same extent that he himself does.

I think I can remember Dr. Begg making a similar statement.

I have observed that orthodontists are a very devoted group of people. They are serious-minded about the quality of their work and constantly striving to improve. I have no figures to prove it, but I have the feeling that the percentage of orthodontists who attend scientific meetings, take courses, read textbooks and journals, and who give clinics to share their knowledge and experience is quite high. Having said that, then I feel free to say that I do not think our post-treatment evaluation of our cases is anywhere near as thorough as our pre-treatment workup and case study.

It is all well and good to learn techniques, but the only way that we have of knowing whether the techniques are working properly in our hands is with a thorough post-treatment assessment of every case we treat. To me this must include a post-treatment cephalometric eye. Dr. Tweed says he has developed a "cephalometric eye" from years of correlating faces and cephs. Still, he doesn't rely on that eye for his post-treatment assessments and he has records to prove what he says as well.

It isn't necessary to become a slave to the geometry of cephalometrics, but it is important, if you extracted four teeth to correct a bimaxillary protrusion, to know whether you reached your objective or whether you still have a bimaxillary protrusion.