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## At-home invisible teeth aligners could come back to bite you

By [Erin Quinlan](#)

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You’ve seen the trendy ads for mail-order dental aligners that took over bus stops and subway cars a few years ago: “Don’t watch the gap; close the gap.” “Straighten your smile in an average of six months.” The promise? To turn your snaggle-toothed frown upside down without the pricey services of an orthodontist.

Fast forward to 2019, however, and dental specialists tell The Post that perfect pearly whites aren’t always the result of these services — and may require additional, costly procedures.

“I’ve had a lot of patients — particularly millennials — who jumped on board with the do-it-yourself aligners and now are coming to my practice because they aren’t happy with the results at all,” says Dr. Janet Stoess-Allen, founder of Park Avenue Orthodontics on the Upper East Side.

Dr. Brent Larson, director of the orthodontics division at the University of Minnesota in Minneapolis, says that he, too, is increasingly called upon to correct unintended consequences of DIY aligners. “One of the common complaints is, ‘Well, my teeth might be a little bit straighter, but I can’t bite well anymore.’”

Companies such as SmileDirectClub shot to success by selling Invisalign-style tooth trays directly to consumers, eliminating office visits for savings of up to 70 percent. To date, SmileDirect has gussied up the grins of more than 500,000 patients nationwide, a rep for the Nashville, Tenn.-based company tells The Post. A recent deal with CVS Health will double SmileDirect’s retail locations from 246 outposts in North America. Also, United Healthcare announced last week that SmileDirect’s services are now covered in-network for its 1.5 million-plus members; some could correct their crooked choppers for under \$1,000 without having to file a single claim.

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Dr. Jeffrey Sulitzer, an orthodontist and the chief clinical director of SmileDirectClub, tells The Post that the DIY label is a misnomer. “There are doctors involved at every step of the way,” he says. “Our program is doctor-prescribed and doctor-directed.”

For most SmileDirect customers, that interaction happens remotely. The process begins when customers get their choppers scanned at a retail location or use a mail-in mold kit to create dental impressions at home. Then, a SmileDirect dentist or orthodontist reviews the resulting images alongside the patient’s medical history, in some cases requesting X-rays or additional information before approving treatment.

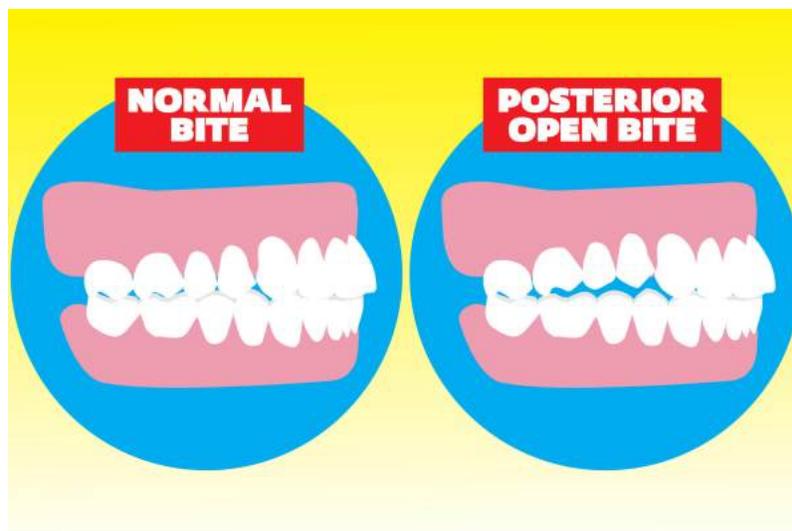
“All this data is identical to the initial review that’s performed in a traditional environment,” Sulitzer says.

Patients who get the OK then receive a full set of custom aligners in the mail, along with instructions on providing virtual progress photos and feedback to an assigned dentist or orthodontist at least once every 90 days. For patients experiencing problems such as pain

or loose teeth, SmileDirect makes referrals to brick-and-mortar dental offices, Sulitzer says.

Still, Larson, who also serves as president of the American Association of Orthodontists, says successful teeth straightening requires face time from start to finish. “There are many things I cannot assess remotely,” he says. “I need to know the health of the supporting gum tissue and bones. I need to know whether there’s any pathology or other things that might impact the treatment. I need to know how the jaw moves and functions, so that I can make people have a healthy, functional bite when we’re done, so that they can actually chew food successfully.”

Orthodontist Brent Larson says that one issue that can arise with aligners supervised remotely is a posterior open bite, where back teeth don’t touch evenly.



Eventually, sloppy treatment can bring on the grin reaper. “It can cause problems long term with the health and function and life span of a tooth,” Larson says. “One of the challenges is that the problems that can result often don’t show up immediately. So, people don’t relate those problems with trying to move their teeth.”

Larson says people should know that teeth straightening is not “something that just changes your look. It’s actually a very complicated biological procedure.”

Stoess-Allen agrees and worries that mail-order orthodontia is too tempting for many patients to resist. “I think this is something that doctors really need to oversee,” she says. “And I think that’s something more and more people will learn over time — unfortunately, at their own expense.”