

Content available at: https://www.ipinnovative.com/open-access-journals

## IP Indian Journal of Orthodontics and Dentofacial Research

ONNI PUBLICATION

Journal homepage: https://www.ijodr.com/

### **Editorial**

## AI and Orthodontics

# Amit Nagar<sup>1</sup>\*

 $^1$ Formerly at Dept. of Orthodontics and Dentofacial Orthopaedics, King George's Medical University, Lucknow, Uttar Pradesh, India



#### ARTICLE INFO

Article history: Received 25-07-2024 Accepted 10-07-2024 Available online 02-09-2024 This is an Open Access (OA) journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: reprint@ipinnovative.com

John McCarthy an American Computer scientist coined the term "Artificial Intelligence" which when defined is a field of science concerned with building computers and machines that can reason, learn and act in such a way, that would normally require human intelligence or that involves data whose scale exceeds what humans can analyse. Artificial intelligence computer systems are used extensively in medical and dental sciences.

During last 15 years the field of AI has shown a lot of potential as it can be employed to solve a variety of tasks in diagnostic and clinical orthodontics.

AI has been making significant strides in orthodontics, improving diagnostics, treatment planning, and patient care. Here are some key areas where AI is being utilized:

- Diagnostic Imaging: AI algorithms can analyze X-rays, CBCT scans, and other imaging modalities to identify dental and skeletal issues. For instance, AI can detect misalignments, assess bone structure, and identify potential issues that may not be immediately apparent to the human eye.
- 2. Treatment Planning: AI can assist in creating personalized treatment plans by analyzing data from a patient's imaging and historical treatment outcomes. It can simulate different treatment scenarios, predict outcomes, and help in selecting the most effective

course of action.

- 3. **Custom Braces and Aligners**: AI is used to design custom braces and aligners based on detailed 3D scans of a patient's teeth. This technology can optimize the fit and function of orthodontic appliances, improving comfort and efficacy.
- 4. Predictive Analytics: By analyzing large datasets, AI can predict treatment times and outcomes with greater accuracy. This can help in setting realistic expectations and in tracking progress throughout the treatment process.
- 5. **Patient Monitoring**: AI can be employed in remote monitoring systems to track patients' adherence to treatment plans. For example, smart aligners with embedded sensors can send data on how well the patient is following the prescribed treatment.
- 6. Virtual Consultations and Communication: AI-powered chatbots and virtual assistants can facilitate communication between orthodontists and patients, providing information, answering questions, and managing appointment scheduling.
- 7. **Automated Workflow**: AI can streamline administrative tasks, such as patient record management and appointment scheduling, freeing up time for orthodontists to focus more on patient care.
- 8. Enhanced Learning and Research: AI helps in analyzing research data and clinical outcomes, contributing to the development of new techniques and

E-mail address: dramipra2008@gmail.com (A. Nagar).

<sup>\*</sup>Corresponding author.

improving existing ones.

Overall, AI enhances the precision, efficiency, and effectiveness of orthodontic treatments, benefiting both practitioners and patients.

Faculty of Dental Sciences King George's Medical University Lucknow, Uttar Pradesh, India https://orcid.org/0000-0001-5899-1482

## **Author biography**



Amit Nagar, Former Professor Dept. of Orthodontics and Dentofacial Orthopaedics

Cite this article: Nagar A. AI and Orthodontics. *IP Indian J Orthod Dentofacial Res* 2024;10(3):143-144.