## PRESENTING THIS ISSUE

## Foreword

## Olivier SOREL

Editor-in-chief of this Issue

The topic of the canine tooth is vast and we have tried to approach it in as large-minded and complete a fashion as possible. So it was not possible, without shortening or excluding some, to publish all the relevant articles in a single issue.

The contents of the first canine issue were basic, elucidating the tooth's genesis, its function, and the diagnosis of problems associated with it. This issue number 2 is clinical. It deals with a number of problems, with authors providing answers to them from their own experiences, supported by data from the literature and illustrated by records of numerous clinical cases.

To start off, P. AUROY and J. LECERF present prosthetic solutions for the replacement of missing canine teeth. We believe that an understanding of their point of view is essential in order for dentists from varying specialties to collaborate with each other. Being able to perceive the difficulties and to understand the various available solutions makes it possible for practitioners work together in providing well-adapted and effective multi-disciplinary therapy.

K. DELSOL describes the different ways in which canines can be transposed, their periodontal environment, and the dental anomalies associated with them. He details, case by case, orthodontic responses to malpositioned canines supporting his conclusions with an analysis of the literature.

Unlike transposed canines, which are relatively rare, impacted canines

have a prevalence rate of 3% and often have to be surgically uncovered. H. VAN BEEK opens the debate on whether an uncovered impacted canine should be "tunnelised," that is moved through the bone or brought out of its bony crypt and moved openly, with an analysis of the advantages and disadvantages of both approaches.

Next, D. RINCUSE, turns to the question of the supposed supremacy of the canine in protecting occlusal movements, and considers the worth of the opposing opinions as a factor of the validity of the scientific proofs for them. He demonstrates that no one type of occlusion is suitable for every situation and insists that orthodontists individualise their objectives to satisfy the special needs of each patient.

No matter how well a canine tooth may be incorporated into the dentition with careful occlusal equilibration there is no guarantee for its longevity if its periodontal milieu is not healthy. In this regard, we believe it is important for us to review the particularities of the periodontium of canine teeth, on the improving the techniques of mucogingival surgery and the necessity of including them in the criteria for making therapeutic decisions.

Finally, because we are persuaded that sharing clinical experience is the best way for the orthodontic community to provide the best health care possible, we urge our readers to inspect the usual rubrics furnished in this journal.

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