Your child has been given an orthodontic appliance called a lower lingual arch (LLA).

The most common time to use an LLA during early treatment is at the end of the “mixed dentition period,” a time at which the remaining baby teeth are about to be lost. The appliance is used to hold the permanent molars in their current positions so that these teeth will not move forward after the baby teeth in front of them are lost.

This appliance is cemented in place and cannot be removed by the patient. The LLA is usually tolerated quite well by patients. Initially, your child’s teeth may feel a bit tender and perhaps a bit mobile. If the cheeks adjacent to the appliance become sore, application of wax on the appliance is helpful. Patients may also feel some tenderness in the area of the tongue next to the appliance, and may actually see the imprint of the appliance on the tongue. If these symptoms do not resolve themselves within three to five days, or seem to be worsening after that time, a call should be made to the office.

One problem that many patients encounter is food getting trapped under the appliance. Your child should be told not to try to “suck” the food out, because this can result in the particles of food being carried into the lung. Instead, your child should be instructed to “swish and swallow” using water or some other type of liquid.

Care should be taken to avoid hard, sticky or chewy foods to prevent the LLA from breaking or becoming loose. If the LLA becomes loose (even if just on one side) or breaks, an immediate call to the office is indicated.