

無理なくできる

GP矯正治療 導入マニュアル

著 寺本 清峰

はじめに

筆者が開業して13年、歯科医師になって20年が経過しました。その間、歯科業界も目覚ましく発展し、さまざまな知識や技術が応用されるようになりました。

今日まで、筆者も皆さんと同様に種々の治療技術を学び習得してきましたが、GPとして小児期から家族ぐるみで長期間関わっていく診療を実践していると、健全な口腔環境と機能の獲得・維持が、天然歯を長期間安定した状態で温存するために欠かせないことに気付かされます。GPだからこそ矯正治療は必要不可欠である……地域に根ざした診療をしている皆さんも、きっと同じように感じているのではないのでしょうか。

そんな歯科医師のニーズもあったからでしょう。昨今はアライナー矯正が身近なものとなり、多くの歯科医院で導入され始めています。しかし「アライナーをきちんと装着する」という「患者の積極的な治療参加」が強く求められるため、「思ったほど使い勝手がよくない」「結局、従来型の矯正治療が必要になった」という話も多く耳にするようになりました。結果、「矯正治療をきちんと学びたい」という思いが湧き上がりますが、矯正治療は専門性が高く、いざ始めるとなると「ハードルが高い」と感じて躊躇してしまう歯科医師も多いようです。そこで本書は、そんな歯科医師でも無理なく矯正治療を実践できるよう、できるだけ平易に矯正治療の「押さえておくべきポイント」をまとめました。

筆者は矯正専門医ではありません。しかし、歯科医師として駆け出しのころから矯正治療を学ぶ機会に恵まれたことから、長期にわたる患者さんとの関わりの中で矯正治療をどう位置づけるのか、どのタイミングで活用するのかといった「GPならではの矯正治療の使い方」を実践してきたという自負があります。そこで本書では、「矯正治療のテクニック」といった技術論ではなく、ゴール設定や治療の進め方など「GPとしてまず理解しておきたいこと」を重点的に解説することにしました。本書を読んでもいただければ、小児・成人を問わず、GPならではの矯正治療をスタートさせる基礎を作り上げることができると思います。

はじめて矯正治療にチャレンジする先生、まだ経験の浅い先生のステップアップに役立つことができれば幸いです。

2025年7月吉日

寺本 清峰

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愛知学院大学歯学部附属病院 第一補綴学講座（現 有床義歯学講座）

専科専攻生

矯正専門医にて研修し、矯正治療を学ぶ

2006年 同講座 非常勤助手

2007年 大府市 松下歯科医院に勤務し、インプラント治療や審美治療を学ぶ

2012年 てらもと歯科医院 開業

【所属学会など】

- 日本顎咬合学会 認定医、理事、副支部長
- 日本臨床歯周病学会 会員
- 日本口腔インプラント学会 会員
- 日本臨床歯科学会（SJCD）名古屋支部専務理事
- NOAH（名古屋臨床咬合研究会）会長
- MIMCD 所属
- K-project 所属



1. THE FIRST CLASS OF THE FIRST CLASS

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THE FIRST CLASS OF THE FIRST CLASS

Category	Value
Blue	1
Orange	2
Yellow	3
Purple	4
Red	5

2

THE FOLLOWING ARE THE
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QUESTION

What is the most common cause of a tooth with a root fracture?

1. Trauma
2. Periodontal disease
3. Root canal treatment
4. Root resorption

ANSWER

1. Trauma



1. **Prevalence of periodontitis**

The prevalence of periodontitis is high, affecting approximately 10-15% of the population. It is a chronic inflammatory disease of the supporting structures of the teeth, characterized by the destruction of the periodontal ligament and alveolar bone.



Figure 1

The prevalence of periodontitis is high, affecting approximately 10-15% of the population. It is a chronic inflammatory disease of the supporting structures of the teeth, characterized by the destruction of the periodontal ligament and alveolar bone.

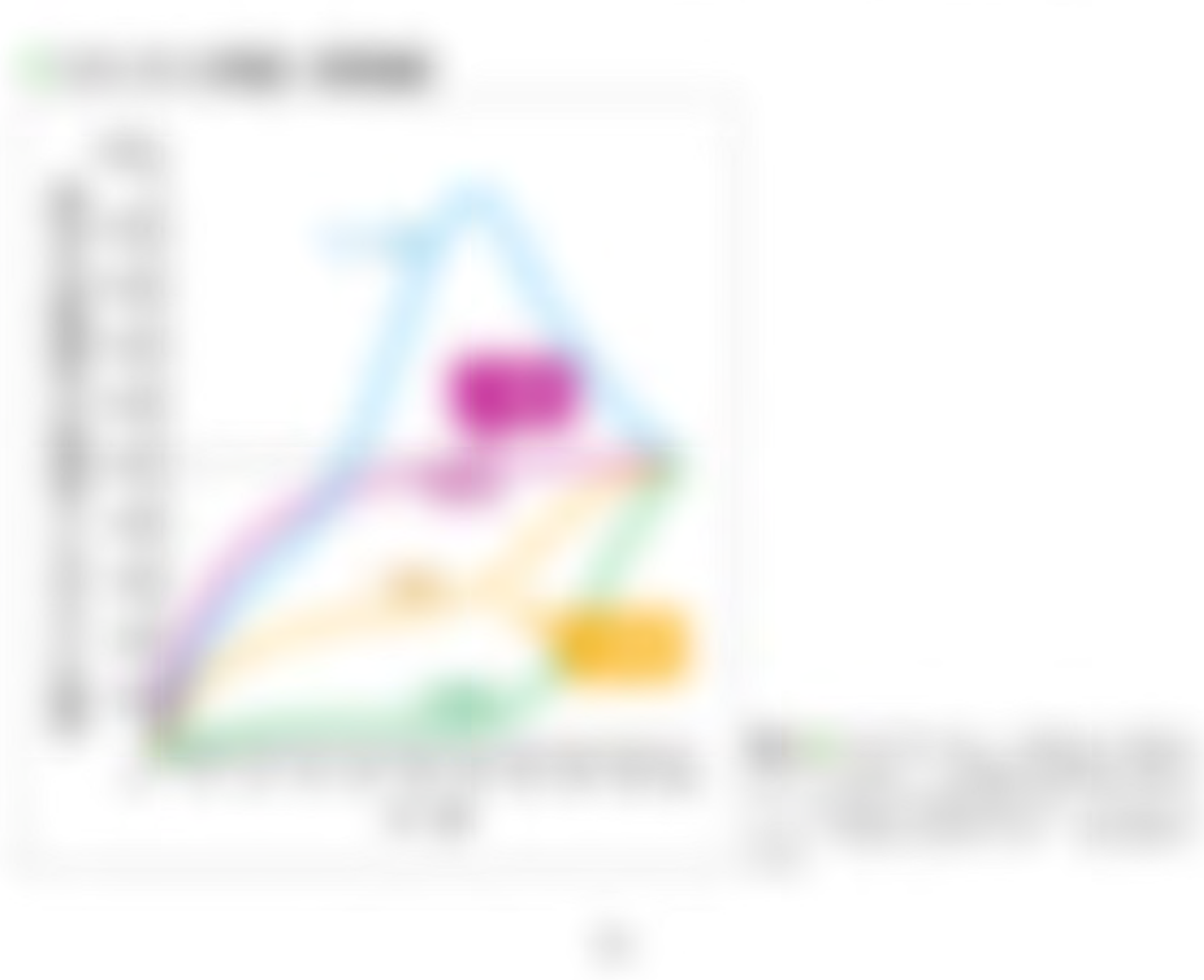


Figure 2



CHAPTER 2 COMMON FINANCIAL TERMS

Figure 1: The Role of the Teacher in the Learning Process



The teacher's role in the learning process is a complex and multifaceted one. It involves not only the transmission of knowledge and skills, but also the facilitation of student learning and the creation of a supportive learning environment. The teacher's role is to guide students through the learning process, providing them with the resources and support they need to succeed. This includes assessing student learning, providing feedback, and adapting instruction to meet the needs of individual students.



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1. **Introduction**

1.1



1.2

1.3

1.4



1.5

1.6



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1000-10000



1000-10000

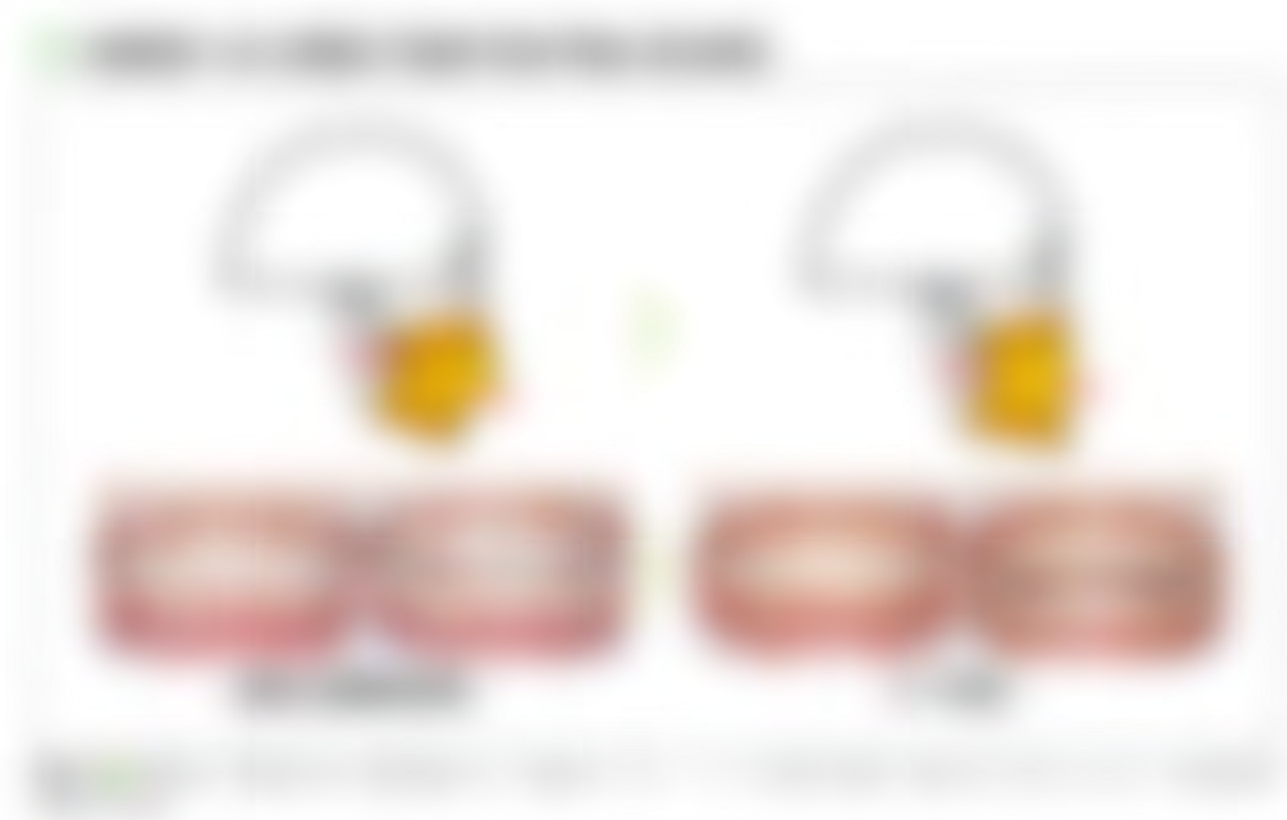




Figure 1.10



Figure 1.11

Figure 1.12

Figure 1.13

Figure 1.14

Figure 1.15



Figure 1.16

Figure 1.17

Figure 1.18



红包 (Red Envelope)

1. 红包 (Red Envelope)

红包 (Red Envelope)



红包 (Red Envelope)



红包 (Red Envelope)

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1. Introduction



2. Conclusion





Figure 10-10



Figure 10-10: A cross-section of a tooth showing the pulp chamber and pulp root. The pulp chamber is located within the crown, and the pulp root extends down the length of the root. The pulp is shown as a dark, irregular space within the tooth structure.

Figure 10-11



Figure 10-11: A cross-section of a tooth showing the pulp chamber and pulp root. The pulp chamber is located within the crown, and the pulp root extends down the length of the root. The pulp is shown as a dark, irregular space within the tooth structure.

Figure 10-11: A cross-section of a tooth showing the pulp chamber and pulp root. The pulp chamber is located within the crown, and the pulp root extends down the length of the root. The pulp is shown as a dark, irregular space within the tooth structure.

1

1.1



1.2

2

2.1



2.2

Figure 1



Figure 1: A 3x3 grid of images showing a cross-section of a tooth with a filling. The filling is a composite material, and the surrounding tooth structure is visible. The images show different stages of the filling process, from the initial placement to the final curing.

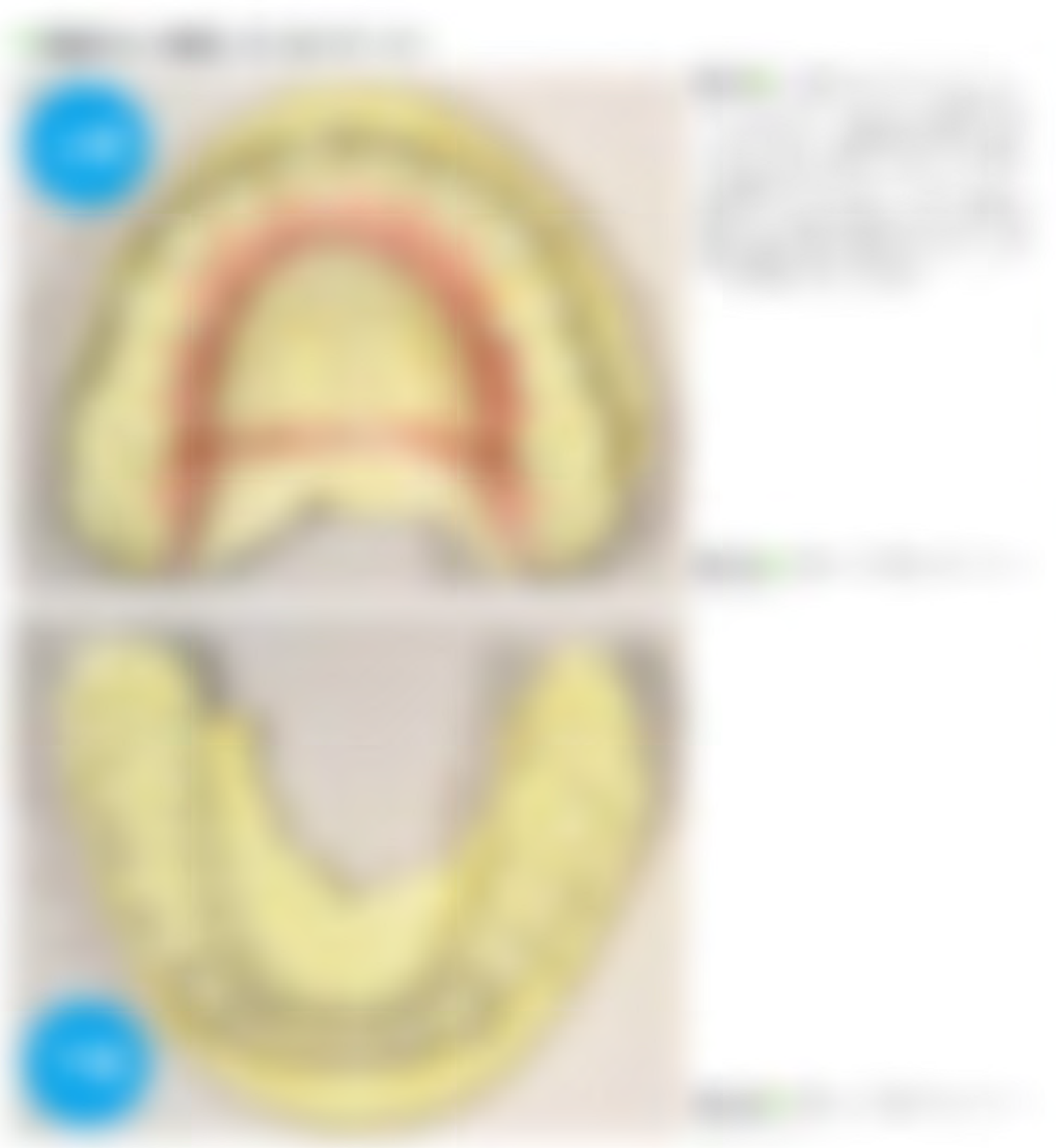
2. The filling material is placed in the cavity and cured with a light source.

Figure 2



Figure 2: A 3x3 grid of images showing a cross-section of a tooth with a filling. The filling is a composite material, and the surrounding tooth structure is visible. The images show different stages of the filling process, from the initial placement to the final curing.

2. The filling material is placed in the cavity and cured with a light source.



Pulp Chamber

Root Canal





Microscopic image of a cross-section of a blood vessel showing a thick, irregular wall.



Microscopic image of a cross-section of a blood vessel showing a thick, irregular wall.





ÖĞRETİM PROGRAMI

Öğretim Programı, öğrencilerin kazanacakları bilgileri, becerileri ve tutumları belirler. Öğretim Programı, öğretimin içeriğini, yöntemlerini, araç-gereçlerini, değerlendirme yöntemlerini ve ölçme araçlarını belirler. Öğretim Programı, öğretimin kalitesini artırır ve öğrencilerin öğrenme süreçlerini destekler.

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MINISTRY OF HEALTH AND FAMILY WELFARE, GOVERNMENT OF INDIA

For the purpose of the present survey, the following definitions have been adopted:-

1. Fertility rate - The number of live births per 1000 women of reproductive age (15-44 years) in a given year.

2. Infant mortality rate - The number of deaths of children under the age of five years per 1000 live births in a given year.

3. Maternal mortality rate - The number of deaths of women during pregnancy or within 42 days of delivery per 1000 live births in a given year.

1. Fertility rate (FR)



Figure 1: Fertility rate (FR) for different regions of India, 1970-2000



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2. Infant mortality rate (IMR)



Figure 2: Infant mortality rate (IMR) for different regions of India, 1970-2000



COMMISSION OF THE EUROPEAN COMMUNITIES

Directorate-General for Economic and Financial Affairs
Brussels, 12 October 2005

MEMORANDUM FOR THE RECORD

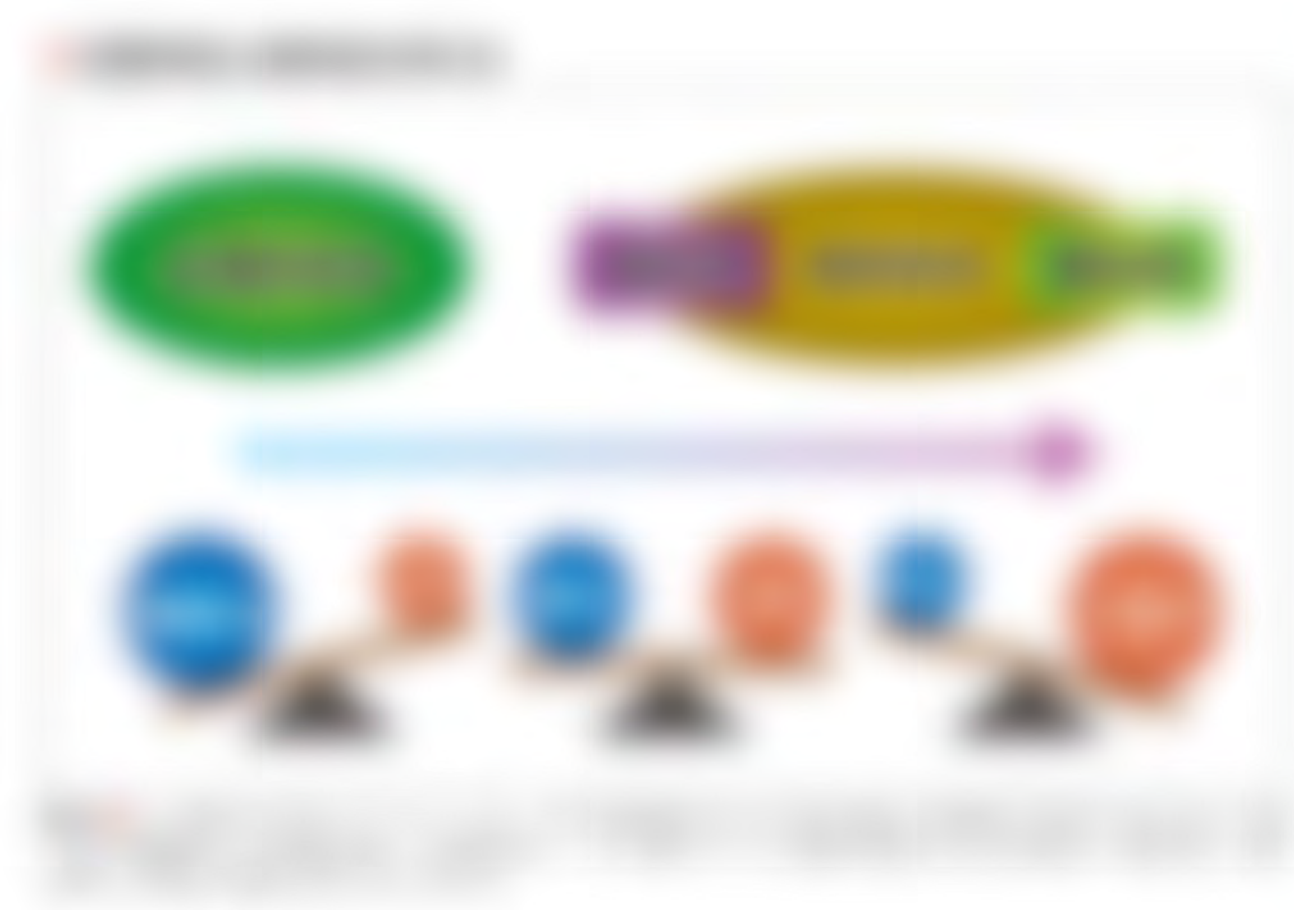
Subject: **Proposal for a Council Directive**
on the **rights of the child**

The Commission has the honour to acknowledge the receipt of the letter of the President of the Council dated 12 October 2005, in which the Council has decided to refer the proposal for a Council Directive on the rights of the child to the Committee of the Regions.

The Commission has the honour to inform the Council that the Committee of the Regions has been consulted on the proposal for a Council Directive on the rights of the child.



CHAPTER 3 COMMON FRUIT TREES



2

RESEARCHER'S
NOTES

RESEARCHER'S
NOTES

RESEARCHER'S
NOTES



RESEARCHER'S
NOTES





The first part of the text discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes the need for transparency and accountability in financial reporting. The second part of the text focuses on the role of technology in streamlining operations and improving efficiency. It mentions the use of various software tools and platforms to manage data and automate processes. The final part of the text concludes with a summary of the key findings and recommendations for future research and implementation.



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The larynx is the voice box, and the trachea is the windpipe. The bronchi are the airways that lead to the lungs. The lungs are the organs that take in oxygen and release carbon dioxide. The diaphragm is the muscle that contracts and relaxes to breathe. The rib cage is the bony structure that protects the lungs and heart.



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3

CHAPTER 3 THEORY OF THE EARTH

THE EARTH'S INTERIOR

The Earth is a sphere of approximately 12,756 km in diameter. It is composed of several layers, each with different physical and chemical properties. The layers are the crust, mantle, and core. The crust is the outermost layer, followed by the mantle, and then the core. The mantle is further divided into the upper mantle and the lower mantle. The core is divided into the outer core and the inner core. The outer core is liquid, while the inner core is solid. The mantle is solid, but it is plastic and can flow. The crust is solid and brittle. The layers are separated by boundaries called discontinuities. The most important discontinuities are the Mohorovičić discontinuity, the Gutenberg discontinuity, and the Core-Mantle boundary.

THE EARTH'S SURFACE



The diagram shows the distribution of mass within the Earth. The layers are labeled: Crust, Mantle, and Core. The Crust is the outermost layer, followed by the Mantle, and then the Core. The Mantle is further divided into the Upper Mantle and the Lower Mantle. The Core is divided into the Outer Core and the Inner Core. The diagram is labeled with 'CRUST', 'MANTLE', 'CORE', 'UPPER MANTLE', 'LOWER MANTLE', 'OUTER CORE', and 'INNER CORE'.



THE HUMAN BODY

THE HUMAN BODY IS A COMPLEX ORGANISM. IT IS MADE UP OF MANY DIFFERENT PARTS, EACH OF WHICH HAS A SPECIFIC FUNCTION. THE HUMAN BODY IS A COMPLEX ORGANISM. IT IS MADE UP OF MANY DIFFERENT PARTS, EACH OF WHICH HAS A SPECIFIC FUNCTION.



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THE HUMAN BODY

THE HUMAN BODY

THE HUMAN BODY





Game 1998 Blue Chip Economic



Transparency

Transparency is the ability to see through the fog of uncertainty and to see the true nature of the world. It is the ability to see the world as it is, not as it appears to be. It is the ability to see the world as it is, not as it appears to be. It is the ability to see the world as it is, not as it appears to be.



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1. **Introduction**

2. **Methodology**



3. **Results**



4. **Conclusion**

The results of the study show that the proposed method is effective in identifying the food items. The accuracy of the method is high, and the results are consistent across different food items. The method is also easy to use and can be applied to a wide range of food items.

5. **References**

[1] Smith, J. D. (2018). Food item identification using deep learning. *Journal of Food Science*, 99(1), 1-10.

[2] Jones, A. B. (2019). Food item identification using deep learning. *Journal of Food Science*, 100(1), 1-10.

[3] Brown, C. D. (2020). Food item identification using deep learning. *Journal of Food Science*, 101(1), 1-10.







THESE TWO

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THESE TWO



Small text block below the robot illustration.

2. Small text block at the bottom of the left page.





1 **PLANTING THE SEED**
 The seed is placed in the soil and watered. The seedling emerges from the soil and grows into a small plant.

5 **PLANTING THE SEEDLING**
 The seedling is placed in the soil and watered. The seedling grows into a small plant.

6 **PLANTING THE SEEDLING**
 The seedling is placed in the soil and watered. The seedling grows into a small plant.



Figure 10-10
 The process of the cell cycle.



Figure 10-11
 The process of the cell cycle.



Figure 10-10
 The following figure shows the results of the simulation. The results are displayed in a table with 4 columns and 3 rows. The first column is labeled 'Time' and the second column is labeled 'Value'. The third and fourth columns are labeled 'Upper Bound' and 'Lower Bound' respectively. The data is as follows:

Time	Value	Upper Bound	Lower Bound
0.0	0.0	0.0	0.0
0.1	0.1	0.1	0.1
0.2	0.2	0.2	0.2
0.3	0.3	0.3	0.3
0.4	0.4	0.4	0.4
0.5	0.5	0.5	0.5
0.6	0.6	0.6	0.6
0.7	0.7	0.7	0.7
0.8	0.8	0.8	0.8
0.9	0.9	0.9	0.9
1.0	1.0	1.0	1.0

Figure 10-11
 The following figure shows the results of the simulation. The results are displayed in a table with 4 columns and 3 rows. The first column is labeled 'Time' and the second column is labeled 'Value'. The third and fourth columns are labeled 'Upper Bound' and 'Lower Bound' respectively. The data is as follows:

Time	Value	Upper Bound	Lower Bound
0.0	0.0	0.0	0.0
0.1	0.1	0.1	0.1
0.2	0.2	0.2	0.2
0.3	0.3	0.3	0.3
0.4	0.4	0.4	0.4
0.5	0.5	0.5	0.5
0.6	0.6	0.6	0.6
0.7	0.7	0.7	0.7
0.8	0.8	0.8	0.8
0.9	0.9	0.9	0.9
1.0	1.0	1.0	1.0

The following figure shows the results of the simulation. The results are displayed in a table with 4 columns and 3 rows. The first column is labeled 'Time' and the second column is labeled 'Value'. The third and fourth columns are labeled 'Upper Bound' and 'Lower Bound' respectively. The data is as follows:



- Nucleus
- Mitochondria
- Golgi apparatus
- Endoplasmic reticulum
- Lysosomes
- Vacuole
- Cytoplasm
- Cell membrane



- Nucleus
- Mitochondria
- Golgi apparatus
- Endoplasmic reticulum
- Lysosomes
- Vacuole
- Cytoplasm
- Cell membrane

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【参考図書一覧】

- 佐藤貞雄（編著）．発達期の予防的咬合治療．東京：東京臨床出版，2007．
- 長谷川 信．必ず上達シリーズ．必ず上達 GUMMETAL 矯正歯科治療．東京：クインテッセンス出版，2015．
- 関崎和夫，高橋喜見子，里見 優（監修），菊地紗恵子，小石 剛，清水清恵，相馬美恵，田井規能，高野 真，外木徳子，中島隆敏，西川岳儀，益子正範，町田直樹，三谷 寧（著）．GP・小児・矯正が共に考える 実践早期治療．子どもの育ちをサポートするために．東京：クインテッセンス出版，2018．

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定価は表紙に表示しています