



THE SnoreFree™ SYSTEM

Recently a wealth of information has been presented through the print, radio and broadcast media about different methods to treat snoring. As the public has been made aware that dental devices can be used to treat snoring, dentists have been looking for the most effective way to help their patients with this annoying social problem.

How many patients do you have in your practice that snore? Statistics show that up to 50% of your patients could benefit from the SnoreFree™ appliance.

The SnoreFree™ System is a safe, simple, and effective solution for snoring. After extensive research, this appliance is now available to the dental community. The SnoreFree™ is the only one-size-fits-all anti-snoring device which requires:

- **No Impressions**
- **No Models**
- **No Costly Lab Bills**
- **No Long Time-Consuming Appointments**
- **No Adjustments With Handpieces**

The SnoreFree™ was developed by an orthodontist, Dr. Scott Feldman, and a general dentist, Dr. Norman Shapiro. Together, they collaborated for years testing various designs and materials until they perfected the ideal intraoral anti-snoring appliance. Then, after two years of clinical studies at Northridge Hospital Sleep Disorder Center, the appliance was finally ready for the world.

When treating Obstructive Sleep Apnea with a dental appliance, the SnoreFree™ is often used as an initial, or test, appliance. This allows the dentist to inexpensively evaluate whether a mandibular repositioning appliance will work for that patient. If it does, the dentist can choose one of the other appliances that is titratable.

Since Space Maintainers Laboratory introduced the SnoreFree™ to the dental profession, the overwhelming response from dentists and patients has been positive. As public awareness increases about snoring, more and more people will be seeking out dentists to help them solve their problem. Using appliances like the SnoreFree™ will keep you on the cutting edge of the non-surgical methods to treat snoring and sleep apnea. There is no better time than now for you to begin using the SnoreFree™ appliance.

INTRODUCTION TO THE SnoreFree™ SYSTEM:

1. SnoreFree™ Appliance.
2. Upper U-Shaped Section. (see figure 2)
3. Rectangular breathing hole. (see figure 3)
4. Lower Lingual Flange. (see figure 4)



Figure 2



Figure 3



Figure 4



Figure 5

5. Stabilizer Handle. (see figure 5)
6. Upper and Lower Seating Guides. (see figure 5)

HOW TO FIT THE SnoreFree™

Before you begin, assemble the following:

1. Thermal water-heating unit (with water deep enough to cover SnoreFree™ appliance). (see figure 6)
2. A bowl of cold water (with water deep enough to cover SnoreFree™ appliance). (see figure 7)
3. A watch or a clock with a second hand.
4. The stabilizer handle. (see figure 8)
5. The SnoreFree™ appliance. (see figure 9)



Figure 6



Figure 7



Figure 8



Figure 9

CUSTOM FITTING:

1. Before fitting the SnoreFree™ appliance, have your patient open and close to an anterior edge-to-edge position. Practice this a few times until the patient is comfortable with this procedure.
(see figure 10)
2. Firmly insert the stabilizer handle into the rectangular hole of the SnoreFree™ appliance until the tip of stabilizer handle projects from the tongue side of the appliance. Failure to seat the handle may cause the breathing hole to collapse during fitting.
(see figure 11)
3. Now have the patient open wide. Place the SnoreFree™ appliance, with the handle in place, in the patient's mouth (at this time do not heat appliance). Have the patient close to the same position as practiced in Step 1. (see figure 10) The patient's lower anterior teeth should be between the lower lingual flange of the SnoreFree™ appliance and the lower seating guide of stabilizer handle. (see figure 12) Note: make sure that the facial mid-line is lined up, using the stabilizing handle as a guide. (see figure 13). Practice this at least 4 to 5 times, allowing the patient to become comfortable with this procedure.
4. Now you are ready to heat and fit the SnoreFree™ appliance.
5. Prepare a bowl of cold water deep enough to cover the SnoreFree™ appliance with the handle in place.
(see figure 14)
6. Bring the water in the heating unit to a boil. Then reduce the heat to just below the boiling point. With the SnoreFree™ appliance attached to the handle, fully unnerse the SnoreFree™ into the hot water for 35 - 40 seconds.
(see figures 15 & 16)
7. Place the SnoreFree™ appliance in the bowl of cold water for a "quick-dip". (approx. 2 -3 seconds) (see figure 17)



Figure 10



Figure 11



Figure 12



Figure 13



Figure 14



Figure 15



Figure 16



Figure 17

8. Immediately seat the SnoreFree™ appliance against the patient's upper teeth, keeping them between the upper buccal and lingual walls of the SnoreFree™ appliance, while maintaining the facial mid-line using the handle as a guide. With your fingers, evenly adapt the buccal and lingual walls of the SnoreFree™ appliance against the maxillary arch. Finger pressure should also be used on the labial surface of the maxillary anteriors to increase retention. (see figure 18)
9. Guide the mandible forward over the lower flange so that the patient's lower anterior teeth are between the lower lingual flange of the SnoreFree™ appliance and the lower seating guide of the stabilizer handle. (see figures 19 & 20)
10. Have the patient bite into the SnoreFree™ appliance firmly and suck in around the handle for 30 to 40 seconds, like you would suck a malt through a straw. (see figure 21)
11. While the patient is sucking in around the handle, have him bring his tongue up to the roof of his mouth for 3 - 5 seconds This adapts the lingual flanges. Then have him push his tongue against the lower lingual flange of appliance for 3 - 5 seconds.
12. As the patient continues to hold this position, use finger pressure against the lips and cheeks to further mold and shape the buccal walls of the SnoreFree™ appliance. (see figure 22)
13. Have the patient stay in the closed position for 30 to 40 seconds while continuing to suck on the handle. This will allow the SnoreFree™ appliance to cool and shrink into the interproximal embrasures creating excellent retention. Next, have the patient open. If proper retention has been created, the appliance should stay retentive even with the handle in place. (see figure 23)
14. Remove the SnoreFree™ from the patient's mouth and place it in the cold water for 1 minute. (see figure 24)



Figure 18



Figure 19



Figure 20



Figure 21



Figure 22



Figure 23



Figure 24

All these procedures may be repeated if necessary.

15. Remove the handle and try-in the custom-fitted SnoreFree™ appliance to check for a proper fit. You should see that the:

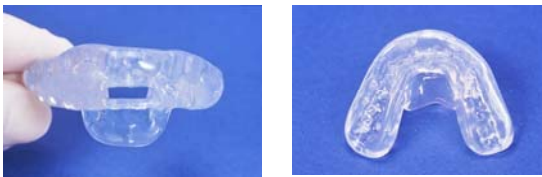
A. Patient is at an edge-to-edge position. (see figure 25)

B. Mid-line and breathing hole are intact; the lower anterior incisal edges are slightly covered. (see figure 26)

C. Posterior support is fully obtained. (see figure 27)

D. Patient can open without the mandible falling back. (see figure 28)

E. Appliance is completely molded. (see figures 29 & 30)



PLEASE SUPPLY THE PATIENT WITH THE SnoreFree™ APPLIANCE, PATIENT INSTRUCTIONS, THE BLUE TRAVEL CASE, THE CLEAN N FRESH™ APPLIANCE CLEANER, AND THE APPLIANCE BATH. ALL THESE ITEMS ARE INCLUDED AS PART OF THE SnoreFree™ SYSTEM. (see figures 31-34)



Figure 31



Figure 32



Figure 33



Figure 34

Each SnoreFree™ system features a 90-day supply of Clean and Fresh; the fast acting, mint-flavored, anti-germ, effervescent appliance cleaner. Clean and Fresh is also highly effective on athletic mouthguards, bleaching splints, TMJ splints, nightguards and every type of removable orthodontic appliance as well as dentures and partials.

As an extra patient service, many doctors routinely provide a cleaning system each time they deliver an appliance. The cleaning system consists of Clean and Fresh and a custom designed appliance bath. This bath has a removable inner rinsing basket to hold the appliance, making insertion and removal of the appliance neat and easy. Your patients will appreciate your thoughtfulness and be more motivated to perform proper appliance hygiene with this easy-to-use system.

To order the cleaning system or CLEAN N FRESH™, please call 888-423-3270, and ask for Success Essentials.

ATTENTION DOCTOR!

IMPORTANT INFORMATION TO RELATE TO THE PATIENT:

1. Most patients do not have a problem sleeping with the appliance in place the entire night. However, if your patient tells you that they continually remove the SnoreFree™ during the night, or that they are experiencing some discomfort, inform them that they may need a few days to become accustomed to the new sensation of wearing the SnoreFree™ appliance. We recommend that these patients first practice wearing the SnoreFree™ during the day for 15-30 minutes at a time.
2. Sometimes a patient's teeth may not come together properly in the morning immediately upon removing the appliance. If this occurs, inform them that it is the result of a temporary foreshortening of the inferior lateral pterygoid muscles and typically subsides in a short period of time through normal function during the day. If the patient wishes to speed up the return to normal function, they can do so by gently clenching their teeth in centric occlusion several times and holding the clench for 5 to 10 seconds each time. This isometric clench of the closing muscles invokes an inverse stretch response that relaxes the protruding muscles and allows them to return to their normal resting length.
3. Some patients may initially experience what they describe as TMJ discomfort. Inform them that the down-and-forward position of the mandible achieved while wearing the appliance, in most instances, will not harm the joint and that it is, in fact, the therapeutic position often used to relieve TMJ discomfort. The discomfort they are experiencing is muscle tension that should gradually disappear.

TROUBLE SHOOTING and APPLIANCE MODIFICATIONS.

1. Treating a Class III Occlusion - It is often necessary to modify the stabilizer handle when treating a patient who has a Class III Occlusion. Removing the lower projection with a wire cutter or a cutting disk will allow the patient to close forward beyond their centric bite. Posturing the patient 2mm forward is usually sufficient to open the airway. (see figure 35)
2. Treating Class II Deep Bites - In a Class II deep bite with an excessive Curve of Spee, the posterior vertical dimension is so great that the lower posterior teeth will not make contact with the appliance. To correct this, increase the height of the appliance by heating it and compressing the sides of the posterior sections. This extra height should allow the lower posterior teeth to contact the appliance when it is seated. (see figure 36)
3. Relining the Appliance - The SnoreFree™ appliance is a one piece EVA material and cannot be relined with any type of material. (see figure 37)
4. The Patient's Snoring Doesn't Stop! - Have the patient practice bringing their mandible 1 to 2mm farther forward than the present position of the SnoreFree™ appliance. Then insert the handle upside down into the appliance. (see figure 38) This will allow you to re-heat just the lower surface and lower lingual flange of the appliance. (see figure 39) Then place the SnoreFree™ back in the patient's mouth and have him or her bite into the lower member in a slightly more forward position. Repeat steps 9-14. (see pages 2.4-2.5)
5. The Appliance Breathing Hole is Closed - To prevent the breathing hole from closing make sure that the handle is fully inserted into the appliance, and do not overheat it. Overheating the appliance during its initial placement can cause the appliance to slide off the handle when the patient bites into it. (see figure 40)
6. The Appliance Retention is Inadequate - With the handle in place, reheat the upper posterior segment of the appliance. Then, pinch the buccal and lingual walls with your fingers to increase their height. (see figure 41) While the appliance is still warm, reseat it, and then use your fingers to push upward on the cheeks extending and compressing the walls of the appliance against the buccal and labial surfaces of the maxillary teeth. While doing this, have the patient suck on the handle and place their tongue to the roof of their mouth.
7. The Patient Complains of Muscular or TMJ Discomfort - Insert the handle upside down. (see figure 42) Heat the lower surface and lower lingual flange. (see figure 43) Now guide the patient's mandible posteriorly in 1-2mm increments until the symptoms subside.

8. During the Initial Seating, the Patient Bit Down on the Appliance Walls and Distorted the Appliance. - Simply reheat the appliance until it is soft, then with your fingers reposition the distorted area of the appliance to its normal position. Next, reheat and reseat the appliance.

9. The Patient has Tori - During the trial fitting avoid having the patient close into the lower flange of the appliance. With the SnoreFree™ appliance heated, seat it normally, then have the patient move his lower jaw laterally 1-2mm to form-fit the lingual flange against the tori area.

10. The Patient has Loose Lower Anterior Teeth - Use a splinting material on the lower anterior teeth (Ribbond™, Easy Bond Retainer, or "the Invisible Retainer") before fitting the SnoreFree™ appliance.

11. One or Two Teeth Become Sore After Wearing the Appliance - Simply use a bur to remove a little material around a tooth if it becomes sore. This will reduce any excess force in that area.

12. The Patient is a Bruxer or a Clencher - Watch out for sore teeth. You may have to relieve the SnoreFree™ appliance in the area of the sore teeth.

13. The Patient Complains of Excessive Salivation - This is very common with most patients in the beginning of any appliance therapy. This will dissipate as the patient continues to wear the appliance.

14. The Patient Complains of a Dry Mouth - This should improve within 2-3 weeks. If it does not improve, re-evaluate his medical history and medication use. Consider having a discussion with his physician to eliminate any medical causes. If the patient is a mouth breather, have the patient increase his consumption of liquids, and use an oral rinse like Oral Balance or Biotine Mouthrinse. (available from Success Essentials.)



Figure 35



Figure 36/41



Figure 37



Figure 38/42



Figure 39



Figure 40