‘Zeena’-Practice or Malpractice?

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Letter to Editor Open Access

Introduction

Braces, which have long been the symbol of nerds, geeks, mouth-breathers and others who dwell at the bottom of the high school food chain, are gaining popularity in East Asian1 and Middle Eastern countries as aesthetic paraphernalia.

There is no scientific literature that documents the origin of this practice. However, this trend probable started in Thailand and had spread across the region to countries like Malaysia, The Philippines, Indonesia and China [1,2] and probably was imported to the Middle East through immigrant workers and dental tourism.

While, this facial accessory may seem odd to the rest of the world, for whom, braces epitomize adolescent awkwardness where most children hate having to wear braces and other orthodontic paraphernalia, these metal-and-rubber adornments have become an alluring status symbol in many East Asian and Middle Eastern countries and wearing them is a sign of financial prosperity.

They are variously known in these countries as ‘Fake or Fashion or Faux braces’ or more colloquially as ‘behel’ in Indonesia, ‘zeena or tajemli’ in Middle East.

Pictures and videos of local Asian and Western models, actresses and musicians as Andika Kangen, Stefani and Katy Perry (in her Last Friday Night video) with braces are posted on the blogs dedicated to fashion braces, inspiring young people to try and emulate them [1].

Availability and Presentation

Children or adults seeking fake braces usually approach the clinic or saloon demanding for the same. The motivational factor behind such a practice varies. Sometimes patients request this before a full-fledged orthodontic treatment as “trial braces” just to know how actual braces “feel” before investing for them, since, the cost of these fake braces is quarter the cost of treatment braces. However, most of the patients approaching for it simply get it done to “remain in the crowd”, since, their friends or relatives have it so they must have it as well, while for others it is just a fashion accessory. There is another group of patient who get these braces simply because therapeutic braces are far too expensive for them to afford and find this as a cheap way “raise” their socioeconomic status.

The choice of brackets can range anything from metal to ceramic, bracket with hook or without hook, big or small (in such a case lower anterior brackets are bonded on upper) and so on. Often the patient may present with a picture from Internet or a picture of fake braces done in a friend’s mouth and demand the placement of their own brackets or modules or elastic chain in a similar pattern. Since, the demand is high most clinics usually keep a good variety of modules and elastic chains with respect to their pattern and color to meet their customers demand and are nearly every possible color and themes from "flowers", "power O", and "Mickey Mouse" to "Hello Kitty".

There placement and removal is similar to the placement of therapeutic braces, however, it has the difference that these are placed in a straight line more in compliance to the patient’s demand without any concerns about bracket positioning errors.

Many of the DIY kit include an over the counter cyanoacrylate resin (often those used for plumbing) as adhesive for the brackets. However, dentists usually bond the bracket with some kind of dental adhesives.

Since, there are no regulation or guidelines available technically anyone can place the brackets- being orthodontist, GP dentist, hygienist, nurse, in beauty salons or patients or their friends and the practice being an easy source of money seems to be flourishing openly under the sky, despite being unethical.

These fake braces can be fitted in dental clinics, beauty salons, sold as over the counter product in shops and worst of all, by street side vendors. Besides, blogs and websites such as Malaysia’s Braces Faces [3] and Analicious [4] provide these adornments online. Some websites even provide do-it-yourself (DIY) tutorials.

Usually these braces are put from premolar to premolar predominantly but not exclusive to the maxillary arch. The arch wires can range anything from being plain ligature wire to twisted multi-stranded ligature wire, figure of eight, to NiTi wires followed by placement of over rings, or elastomeric chain (E chain) of various colors and designs.

The craze of this style statement is predominant, but not limited to adolescents only, and even adults are seen in clinical practice wearing this adornment! Besides, patient’s usually put these braces multiple number of times. In fact, a sizable number of patients whose treatment is complete also often refuse debonding and like retaining their braces as zeena. There are no regular appointments for these patients and they walk in as and when they desire for changing the modules and E chain and often demand their placement in various fashions.

Hazards Associated With This Practice

1. Tooth movement: often the repeated putting of E-chain on light wire leads to premolar rotation and the premolars coming into buccal cross bite.
2. Worsening of crowding
3. Ditching in of incisors
4. Darkening of tooth colour due to prolong leaching of composite at the bracket base.
5. Difficulty in maintaining oral hygiene leading to white spot lesions, cervical and proximal caries, poor gingival health.

5. Repeated bonding and debonding leading to loss of enamel and often the development of sensitivity.

6. Officials in Thailand have warned that the wires on some fake braces may contain lead and lead to lead toxicity over a period of time.

Some online sites have warned that fashion braces should be worn for only five months at most.

Anecdotal reports claim that a 17-year-old girl in Thailand’s northeast city of Khon Kaen was left with an infected thyroid owing to these fashion braces, which led her to a fatal heart failure. Police in Chon Buri province connected an illegal braces market stall to the death of a 14-year-old girl.

In Thailand the production and sale of these item is now punishable by up to six months in prison and fine of $1,600. Unsurprisingly, these measures seem to have only pushed things further underground, creating a sort of fake braces black market in which DIY kits continue to be sold discreetly. Fake braces have also come to be associated with a scrappy motorbike subculture known as dek wehn wehn. (Dek is Thai for ‘kids’, and wehn wehn is an onomatopoeia sound of a motorbike revving up [5].

However, no such regulations, making this a quack practice, are present in any of the Middle Eastern countries in the author’s knowledge and the practice of zeena goes unchecked.

Conclusion

It is our responsibility to make our patients aware of the adverse effects of using a prescription thing just as an aesthetic commodity. Besides, there is a dire need for regulations that prohibits the use of treatment armamentarium by anyone for unauthorized purposes.

References