

Book Reviews

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The 20 principles of the Alexander discipline (2008)

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This book details the latest and revised principles underpinning the long-established ‘Alexander discipline’ and professes ‘much evidence-based knowledge’ to substantiate anecdotal clinical experience. It is intended as the first in a series—forthcoming volumes to be devoted to specific orthodontic problems. This volume has been dedicated to ‘current and future orthodontists of the world’ to enable ‘the highest quality orthodontic results possible in a simple, routinely sequenced technique’. It follows Wick Alexander’s best-selling textbook the Alexander discipline published in 1987, which described many of the principles in their infancy. As the discipline is in its fourth decade, it is appropriate to review techniques that have been extensively tested, refined, and integrated with theory and practice.

There are 20 chapters, each dealing with one principle from E=R (effort=results) and KISS (keep it simple, stupid) to Let It Cook and Create Compliance. It is not a hands-on guide to orthodontic mechanics for the neophyte but rather a distillation of ‘years of trial and error’ by the author of the ‘little things necessary to complete treatment successfully’. In this way, an alternative and thought provoking account of a lifetime of clinical experience and teaching has been recorded for posterity. Each chapter is liberally illustrated with colour plates and cephalometric analyses, and most are orientated around a clinical case study. It is of passing interest to note that of the 17 case studies presented, 13 required the use of a headgear, which is presumably why the final chapter on how to ‘Create Compliance’ may be of particular relevance and importance to this technique.

Many younger European practitioners may be unfamiliar with the 0.018 inch slot and multiloop mechanics, the more mature practitioners perhaps being thankful to have left them behind with the non-pre-programmed slot. Clearly,

the appliance design has some unusual properties both in the bracket prescription (Chapter 6) and in the bracket placement (Chapter 7) and these sections may appeal to users of other systems. However, the clinical application of this particular bracket system may have limitations, as evidenced by case study 4, which can only be described as a Class I malocclusion with mild crowding in a non-growing individual managed on a non-extraction basis. The discussion of the outcome declares ‘the patient was extremely compliant’ which accounts for the relatively brief (20 month) treatment period. The reader should reach his own conclusions about the ‘efficiency’ of this approach with regard to personal clinical experience versus the principle of ‘Let It Cook’ (Chapter 13). The penultimate chapter on retention proclaims a surprisingly low reliance on permanent mandibular retention and details the many ‘little things’ in finishing that promote long-term stability. It is a great shame that this is not supported by scientific evidence from over 30 years of clinical practice and over 15 000 treatments. The initial claim to have written this book with ‘much evidence-based knowledge’ is only partially fulfilled. A brief scan of the reference lists reveals a host of citations to the author and little discussion of the international evidence base to support the proposed ‘best clinical practice’.

This book is going to be of immense interest to practitioners of the Alexander discipline and without doubt offers a refreshing approach and clear insight to the treatment philosophy based on the author’s considerable clinical experience and international reputation as a teacher and guru. However, it is unlikely that the cover price will attract many readers with experience of other appliance systems, and an interest in evidence-based best clinical practice.

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