

## PHORIAS IN ORAL INFECTIONS AND IMPACTIONS

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We find that the average dentist is unaware of the danger of a devitalized tooth, an impacted third molar, or the extra pressure created in the straightening of teeth. In our office, we start looking for infection when the phorias are unusually high, especially when the 13B finding shows 12 exophoria or higher. In such cases we have a complete mouth X-ray made and find in about 90 percent of these cases an abscess, a failed root canal, or a root fragment. Another symptom we have watched carefully for years is where we find hyperphoria of over  $\frac{1}{2}$  prism diopter. The following case is a good example.

Case #1. Female, age 72. She had a list of various eye men who had tried to fit her with glasses; none gave her visual comfort or been good vision. The last three names she gave me were ophthalmologists of high standing. The last one finally gave up, saying that he did not know what else he could do. His Rx was within  $\frac{1}{4}$  diopter of the sphere and cylinder of our final Rx. Yet, at that time only 20/80 at far and near was the best vision that lenses could give her. She showed  $3\frac{1}{2}$  prism diopter left hyperphoria and a near finding of 12 exophoria. When I asked her to have a full mouth X-ray made, she informed me that her teeth had been extracted at the age of 28. She had had no discomfort with her dentures and was certain we would find nothing in her mouth that would interfere with her vision. Nevertheless, we insisted upon the radiographs. When the films came in the next day, we found two second molar root fragments and two impacted third molars. She had these removed and the patient is again seeing 20/20 for and near. Her phorias are fairly normal and above all she is comfortable and happy.

Case #2. Female. Age 9. This patient had been treated previously by us for toxic amblyopia at the age of 6. When she came in this time with all the symptoms of discomfort, we ran a routine examination and found  $3\frac{1}{2}$  prism diopter right hyperphoria. Spotting some braces on her upper teeth, we asked who was doing her orthodonture work. She gave me the name of a very outstanding man in his field, a professor in our dental college. I called him and asked if he would release the tension slightly so I could run another check. This he gladly consented to do, and when we took the phorias, two days later, we found only  $\frac{3}{4}$  prism diopter right hyperphoria with the patient fairly comfortable. This we reported to the professor, at his request, and now he teaches his students to be careful of how much tension they use in straightening teeth.

Case #3. Male, age 17. He wanted to join the air corps, but was rejected. We found a 6 prism diopter right hyperphoria upon examination. He had been to his dentist, who pronounced him "ok". Since then I just do not believe even my own dentist. I had quite a telephone conversation with his dentist, who assured me there was absolutely nothing wrong with this lad. So, we

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started training. In about two weeks the phorias were down to  $\frac{1}{2}$  prism diopter right hyperphoria. He made the army air corps. When he had finished part of the training, his instructor noticed that he landed his plane at a tilt, and upon re-examination they grounded the boy. He, of course, was disgusted. His mother was elated, as she did not want him in the air in the first place. On his next leave, we rechecked and the old 6 prism, diopter right hyperphoria was back. We then insisted on an X-ray, and found four impacted third molars. I am certain that had the molars been removed he would have become a fine flyer.

Case #4. Male, age 16. Amblyopic. O.D. at least lenses would not give him over 20/25, without RX 20/40. High exophoria at near. The other findings were negative. Upon questioning, we found he had loosened a tooth in a football game several years before, with only a slight ache lasting a few days. An eye physician had just examined him and made this statement, that "one eye is 40 years old, he must wear glasses constantly to preserve this eye". His mother wasn't satisfied with this diagnosis, so she sent him to us. We found the nerve had been broken. The tooth was abscessed. We had the tooth extracted, and gave the lad a few syntonizations of Syntonic Rx #1 (MU Delta). The results 20/15, without RX.

Case # 5. Male, age 50. He was under the best of medical care for over three years. He is manager of a large storage warehouse. His case was diagnosed as hardening of the aorta. He was permitted to go to the office two hours a day, no gold, no scotch. He came in for an examination. Again, the high phoria at near caused us to run oral radiographs, with six teeth showing infection. These were extracted over a period of two weeks. By this time the pain over the heart had disappeared, and within a month he threw his medicine bottles in the waste paper basket. He now works as long as he pleases, plays golf. And takes a scotch whenever he pleases. Once more, I believe an eyes examination revealed a condition that had been missed by a group of top notch M.D.'s, who had all the equipment of a fine hospital at their disposal.

My advice is to watch the mouth, while you work on their eyes. We have found it impossible to give visual comfort and keep out of the so-called problem cases, without paying closer attention to their general health, especially their teeth.

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Syntonic prescription: Syntonic Rx No. 1  $\mu\delta$  (Mu Delta)