

BRACE YOURSELF

If your daughter can grin and bear it, Mom, so can you

By Sigrid Bathen

In this winter of her ninth year, her mouth is wired and my jaw has inexplicably begun to ache.

I was 12 when they wired mine. My father repeatedly told me how sorry he was to have to do this but hoped I'd thank him someday (I have). For my part, I licked my sore gums and smiled through closed lips — enduring soup while the rest of the family enjoyed steak.

I thought I would never forget — three years of pursed-lip junior high school photos, the raw sores on the inside of my mouth, the stark terror when my entirely unsympathetic orthodontist (one of only two in town, both with terrorized and clearly captive clientele) found a piece of peanut (forbidden food!) in my bands.

"Well," I said lamely, "at least it wasn't gum." Gum being a capital offense in the 1960s world of orthodontia.

"I'm told you ask a lot of questions," the young orthodontist told me after his first session with my daughter last summer.

"I hear you break children's jaws," I replied coldly, repeating the worst-case scenario given by the pediatric dentist who had referred us.

"Rarely is that, uh, procedure, necessary if the problem is corrected early," the pediatric dentist said soothingly, as I breathed maternal fire on his cheerful office. "Usually, this, uh, problem, can be corrected without such, um, radical measures."

Her father took her to the second appointment with the orthodontist, and she came home with the bottom line: "Braces and headgear," he deadpanned. "And \$1,500."

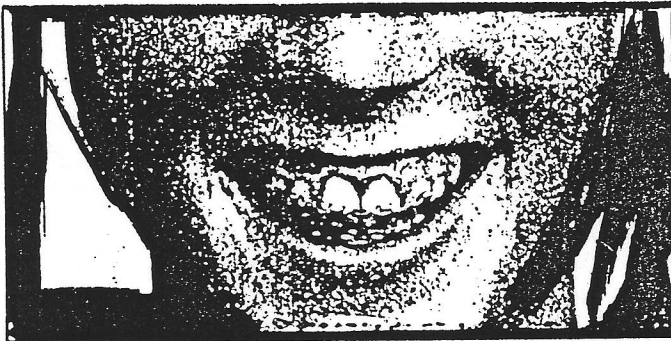
And not necessarily in that order.

When she was 7, there was a retainer, which she steadfastly refused to wear for longer than 20 minutes. It had a small, smooth, S-shaped wire extending from the front of the palate (to deter the thumb she persisted in sucking at night), and a nightly adjustment to correct what the orthodontists call an "open" bite (caused in part by the fact that it was a nice, safe home for the thumb at night).

"Mama," she told me once, when I gently suggested she try to stop. "If I have my blankie by my face at night, the silky part feels so nice that I just have to suck my thumb."

"Maybe if you just put your blankie at the end of your bed, so you know it's there," I said, trying to be helpful.

I might as well have suggested she give up "Ceebs" on Thursday nights.



HATLEY MASON

I remember thinking when she was about 2 that we were fortunate she had never: (1) used a pacifier; (2) developed an affinity for a baby blanket; or (3) sucked her thumb.

Then, about a year later, she developed a strong and close relationship with a simple green-and-yellow checked baby blanket with satin edging that a co-worker had given me before she was born.

And she started to suck her thumb.

The blankie by now has been many times repaired and frequently washed, despite her complaints that it "smelled bad" after it was washed (my impression being quite the opposite). It has been the object of innumerable, desperate, late-night, whole-house searches (sometimes whole-house, yard, car and neighborhood searches) because "I can't go to sleeeeeeep without my blaaaaaaankie, Mama, Papa, pleeeeeeze help me find it!"

And now suddenly, in this winter of her ninth year, she has put the blankie in the doll bed. And, at the insistence of the orthodontist and with the help of an excellent thumb-suckers detox program, she has gone cold turkey on the thumb.

I had no idea there were such things as anti-thumb-sucking programs, and I am even more amazed that it worked — all without finger splints or nasty-tasting ointments. There were a few simple, positive reinforcements — 10 days of dancing-duck stickers; an iron-on T-shirt patch that says "I Quit!" beside a thumbs-down drawing, to commemorate a thumb-free existence; and two bright metallic, heart-shaped congratulatory helium balloons that dance in the air over her bed at night.

Also, not incidentally, \$75 paid up-front to the smiling therapist holding a fistful of wax juice-sticks — because "you have to substitute something for the need to suck the thumb."

One night I found her sleeping contentedly, sucking subconsciously on her arm, but she has not gone back to the thumb. She has tolerated, largely with good humor, the first

stages of the orthodontic treatment — including a horrendous Rube Goldberg device with heavy wires running across the top of her mouth.

With the exception of ice cream, many of her favorite foods have gone packing, and I don't buy chewing gum or caramel treats for her in airport gift shops anymore. The food she can eat gets stuck often in the "appliance," which I've thought is an odd term to use for something you put in your mouth.

"When do I get this stuff off, Mama?" she asks, though not often.

"About a year and a half, sweetie," and she looks a little glum.

She is tall for her age, and she's heard somewhere that tall girls can become models. And she adds with a sly smile, "Models don't have to go to college, Mama."

"Models have short careers," I point out, "and then they have to do something else for a living."

"Brooke Shields goes to college," I add. "To Princeton, in fact."

"Oh, wow! Sandra goes to Princeton!" she beams. Sandra being the oldest daughter on "The Cosby Show."

So I can tell we're making progress, anyway, on this matter of models going to college.

The difficult part about 9-year-olds and braces is getting them to understand why this is necessary. All they know is that they can't eat caramel candy bars, and that braces hurt.

But she is beginning to realize that the space between her top and bottom teeth is not as wide — perhaps not even wide enough for a small thumb — and that there is almost room now on top for the tooth that couldn't get in before.

I've found her looking at the pictures of models — all with their uniform, straight, gleaming smiles — in fashion magazines. I've already advised her she's going to college in any case. She's decided she wants to be a doctor and a model, and she requested a microscope and purple nail polish for Christmas. I just hope she doesn't go as far away as Princeton.

There is no more orthodontic talk about breaking the jaws of little children. And, as inexplicably as it began, the dull ache in my jaw is gone. □

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