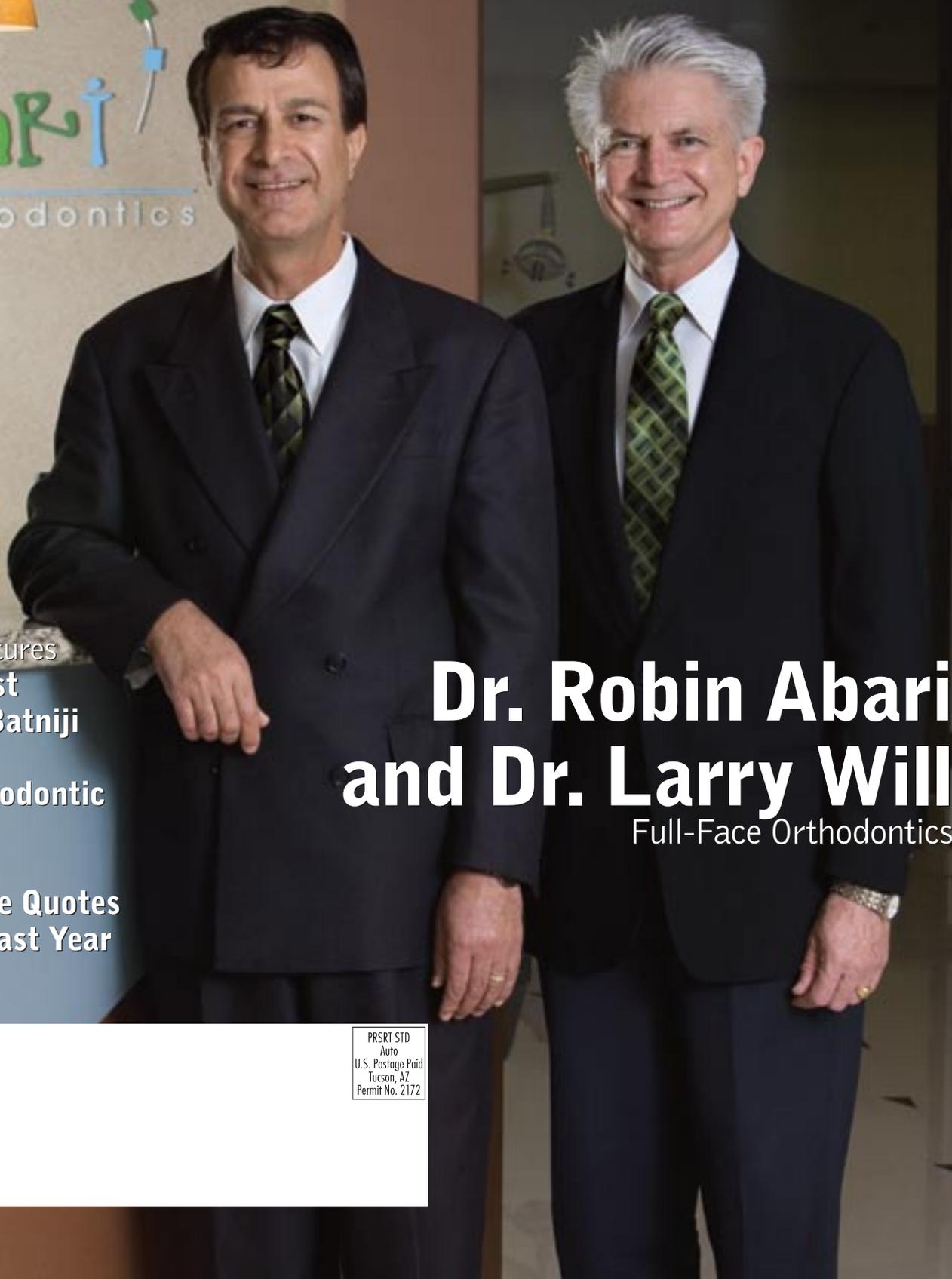


# DOCTOR *of* DENTISTRY

A BUSINESS AND LIFESTYLE MAGAZINE FOR DENTISTS



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**Dr. Robin Abari**  
**and Dr. Larry Will**  
Full-Face Orthodontics

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# Dr. Robin Abari and Dr. Larry Will

## Full-Face Orthodontics

By Travis Anderson

Robin Abari, D.D.S., was resting comfortably at home when his telephone rang at an unusually early hour.

“My wife picked up the phone and I saw her face turn white,” he says, recalling that life-changing day of October 21, 2004. “I knew something was wrong. She didn’t say a word and handed me the phone. The person on the other end said, ‘Are you Dr. Abari? This is your alarm company. Your office is burning.’” The call shook Dr. Abari to the core, but he held out hope that it was an inexplicable prank. The pair got in the car and headed to his office in Diamond Bar, CA. “When we arrived, the building was in flames,” he says. “I just lost it. I’d never experienced such a massive loss. I thought it was the end of my career.”

With the help of colleagues and patients, Dr. Abari rebounded

from the brink of disaster and resurrected Abari Orthodontics. Today, he and his business partner, Lawrence Will, D.D.S., put their more than five decades of combined experience to work operating two thriving locations, one in Diamond Bar and the other in San Dimas, CA.

Dr. Abari moved to California after receiving his postgraduate orthodontic training from New York University College of Dentistry. He has practiced there since 1981, transforming more than 20,000 smiles in the process, while pioneering a nonextraction orthodontic treatment philosophy.

Dr. Abari subscribes to a European philosophy of orthodontics in which preserving teeth, rather than pulling them, is the goal. “In the past, we orthodontists simply pulled teeth because there

**Left to right, seated: Shauna, Dr. Larry W. Will, Dr. Robin F. Abari, Lorane Abari; left to right, standing: Mirna, Kylene, Edina, Angie, Monique, JayJay.**



wasn't enough room for them," he says. "We realize now that there isn't enough room because the arches aren't developed properly. A better treatment method is to normalize the underdeveloped arch and pursue what I refer to as full-face orthodontics.

"Early in my career, I looked at my patients' faces and realized that when I didn't extract teeth, they had better smiles and profiles. These observations led me to pursue nonextraction. I wanted to get the teeth straight, but I also wanted to improve the look of the full face. I want my patients to have a big, beautiful smile and a balanced profile."

## EARLY TREATMENT IS CRUCIAL

The American Association of Orthodontists recommends that a child's first visit to an orthodontist happens by the time a child is 7 years old, but that message isn't spreading fast enough for Dr. Abari and Dr. Will.

"I spend a lot of time talking to colleagues throughout the country about the importance of early diagnosis and treatment," says Dr. Abari, who has on several occasions been named one of the nation's "top orthodontists" by Consumers' Research Council of America. "My colleagues say, 'Oh, I didn't know that, Robin! I thought we had to wait until all the baby teeth are lost to begin orthodontics treatment.' The reality is that if I can see a patient by 9 or 10 years old, I can take advantage of the bone growth and expand the arches. We can create ideal, 'U'-shaped arches that allow us to avoid extracting teeth. When someone has their bicuspids extracted, the dental arches often narrow and take on more of a 'V'-shaped appearance, creating dark voids in the corners of the mouth. Our approach avoids this."

## Lessons from the Ashes

When he lectures throughout the country, Robin Abari, D.D.S., shares the painful story of how his office burned to the ground in 2004, and how he was able to rebuild. "I thought I was the only one who'd been through this, but I've had numerous phone calls from people throughout the country who look to me for reference," the orthodontist says. "So many dentists got flooded in New Orleans, and the hurricanes of 2006 in Florida caused a lot of dentists to call me. That's one of the joys, to help them know how to come back from devastation. It took me three years to learn how. Sometimes, during these calls, I get emotional and I cry when I hang up the phone. I know how difficult it is for them to continue. I remember a lady called me from Boston and wanted to console me right after my fire. She said, 'Robin, I am a periodontist. I was practicing for 14 years and my office burned. It's been such a painful thing that I gave up.' Some people don't come back. When I tell others about my experiences, I say, 'Use technology to your advantage and do everything digital.' About a year before the fire, my wife, a computer expert, made everything in our office digital. If we were not digital, all of the charts and X-rays would have burned. We could not have come back. My story provides an amazing lesson for the doctors. I tell my colleagues to raise their insurance to the maximum limits, digitize their office and make a plan. I didn't think anything like this could happen to us. If you have a disaster, small or big, what are you going to do?"

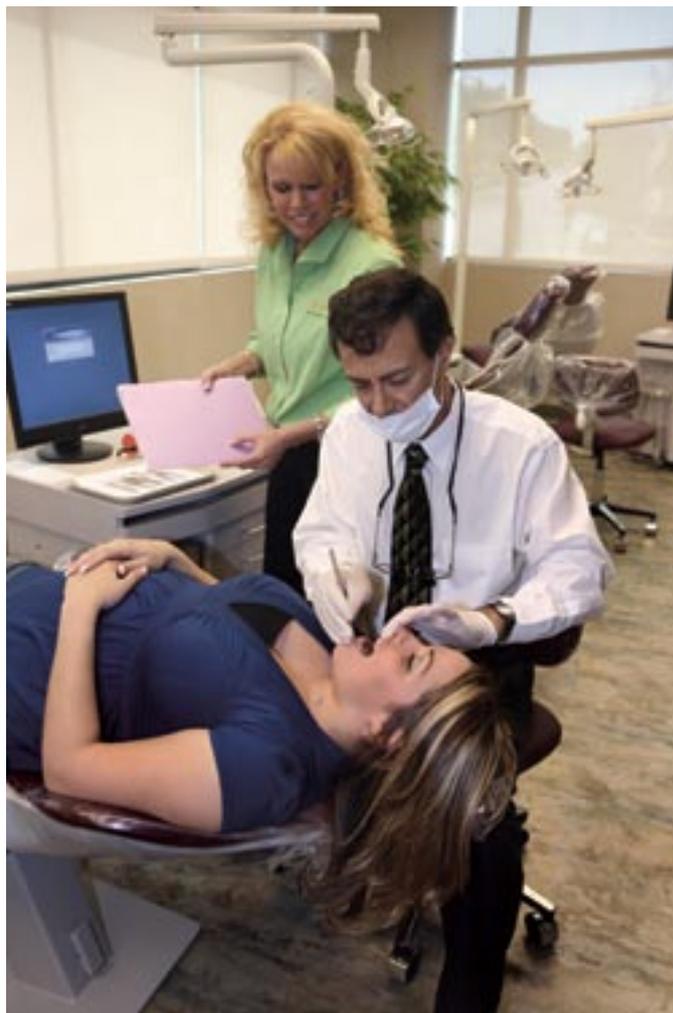


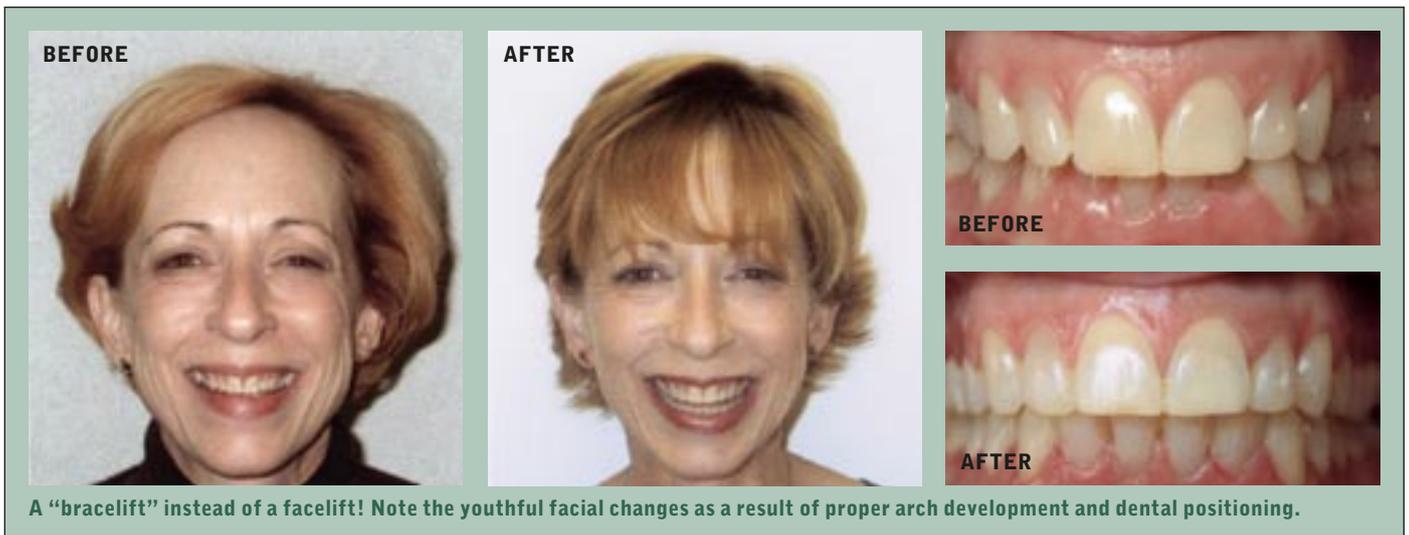
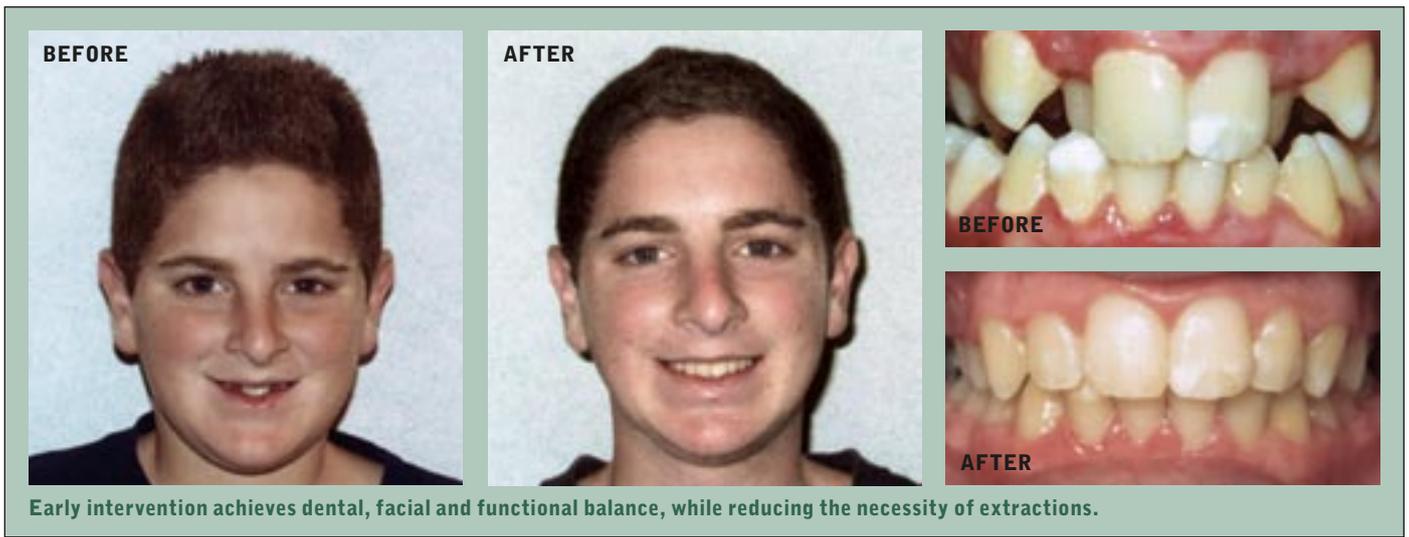
PHOTO BY ROCK KESHISHI/STUDIO 55

**Dr. Abari uses a European style of orthodontics that avoids unnecessary extractions.**

Treatment for children at Abari Orthodontics often is done in two parts. During the first phase, also known as the early interceptive phase, Dr. Abari and Dr. Will can guide facial growth, prevent crowding of permanent teeth, correct skeletal problems affecting the bite and curtail harmful oral habits. During this phase, they often use orthopaedic appliances, such as the mandibular anterior repositioning appliance and the Frankel, to stimulate growth of the lower jaw and reduce the need for future surgery. "Many children have lower jaws that aren't growing to their optimum size," Dr. Abari says. "The beauty of our nonextractions treatment philosophy is that we utilize the appropriate European-style appliance to achieve the jaw's natural growth potential."

Although orthodontists have traditionally focused on treatment for children, Dr. Abari and Dr. Will also care for many adults who have esthetic and functional problems with their bite and jaw. Each patient is evaluated for the treatment option that fits their needs and lifestyle. A wide range of treatment methods is available, including completely clear, removable aligners.

"When parents come here with their children, we help them understand how great the results can be," Dr. Will says. "We utilize computer-generated models to show them how we would



transform a child’s smile. We also have books that contain photographs of hundreds of patients, organized by type of problem, to show cases that are similar to their child’s, such as open bite, crowding and missing teeth. You can imagine that the personnel who assist in these discussions have to be extremely confident and conversant in what they are talking about. People are adept at picking up on whether what you are saying is true, or whether you are just speaking from a script. By the time we are done explaining our philosophy, most parents realize that their children will look and function better because their bite will be normal by the time we’re finished. With a proper bite, their teeth and the structures around them will last longer. We want our work to last for a lifetime.”

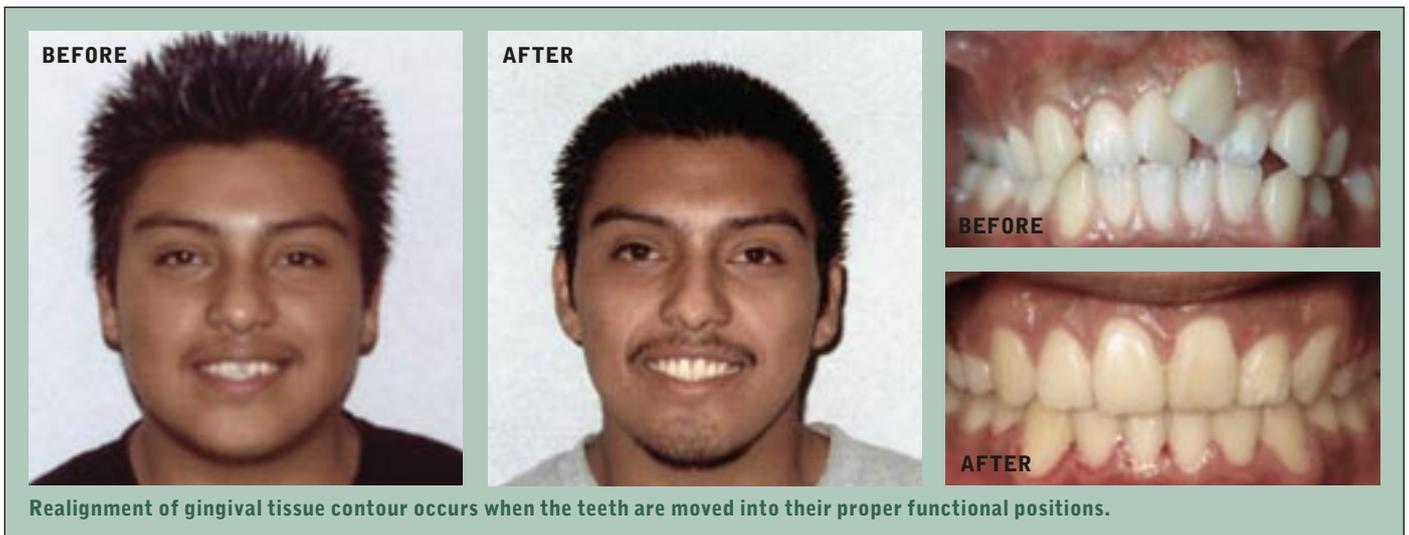
Dr. Abari cites the case of a 16-year-old girl who came with her parents to see him for a second opinion. Her lower jaw was receded in dramatic fashion. “Her upper jaw and nose were in gorgeous shape, but her lower jaw was undeveloped,” he says. “This is absolutely genetic. One of her parents has this problem, too. Now, look at her after her treatment — beautiful. She’d gone to another orthodontist who wanted to treat her without

bringing the jaw forward. They wouldn’t have been able to create the same results.”

### SELF-LIGATING SUCCESS

During the second phase of treatment, Dr. Abari and Dr. Will have access to numerous types of braces that they can use to enhance the patient’s outcome. They offer traditional, clear and self-ligating braces, as well as removable aligners. In fact, the orthodontists have been designated as Invisalign Premier Providers, a recognition attained only by the top 5% of Invisalign providers nationally.

Increasingly, the partners are using high-tech self-ligating braces. They believe the system offers better and faster results for many patients. The average length of treatment with traditional braces is between two and four years, but Dr. Abari and Dr. Will finish most of their self-ligating cases within 18 months. “It is so superior to the conventional method,” Dr. Abari says. “Before, orthodontists applied so much force to the supportive tissue, the gum and tissue around the teeth. Now, we use a tiny amount of force. We are learning that the less force we apply to the braces,



the more biologically acceptable to the body. The teeth move better, and we don't have to pull teeth, either."

"The self-ligating system uses heat-activated wires whose chemical composition reacts with the oral temperature to gradually release a continuous light force," Dr. Will explains. "This force continues to move the teeth until they are in proper functional position. The self-ligating system integrates perfectly with our nonextraction philosophy to produce a pleasing, individualized smile for each patient."

The orthodontists aren't simply interested in straightening teeth, though. When Dr. Abari lectures throughout the country, his colleagues often inquire about his success in handling marginal ridge and gingival contour discrepancies. "That's where we create the optimal esthetics, which is to say that we create a great marriage between the teeth and gum," Dr. Abari says. "Alignment of the teeth means you not only have to have to get the teeth straight, but you have to make sure the margin of the gum tissues has an ideal form and shape. If you do orthodontics at a high level, this is the standard that is required."

Building relationships with other dentists — whether in their

neighborhood or on the national scene — is an important part of their everyday practice, and the orthodontists work hard to keep their colleagues involved. "Every six months, unless we are advised otherwise by the dentist, we generate an automatic notice that it is time for the patient to get a dental cleaning," Dr. Will says. "We work hard to keep in touch with the referring dental offices to make sure the patients keep their appointments. It's a team effort. We really encourage our colleagues to call us at any time. We appreciate the back and forth conversation. That kind of communication can really help the patient."

## PARTNERING WITH DR. WILL

Dr. Will describes the day he signed on to the Abari Orthodontic team, over three years ago, as "a really happy, special moment." There are many aspects of the practice that he particularly likes. "They range from our use of the latest technology to enhance the patient experience to our constant efforts to educate ourselves and our staff," Dr. Will says. "For example, we now use temporary anchorage devices, which are removable mini-implants, to assist in the correction of more complex skeletal/dental conditions, such as

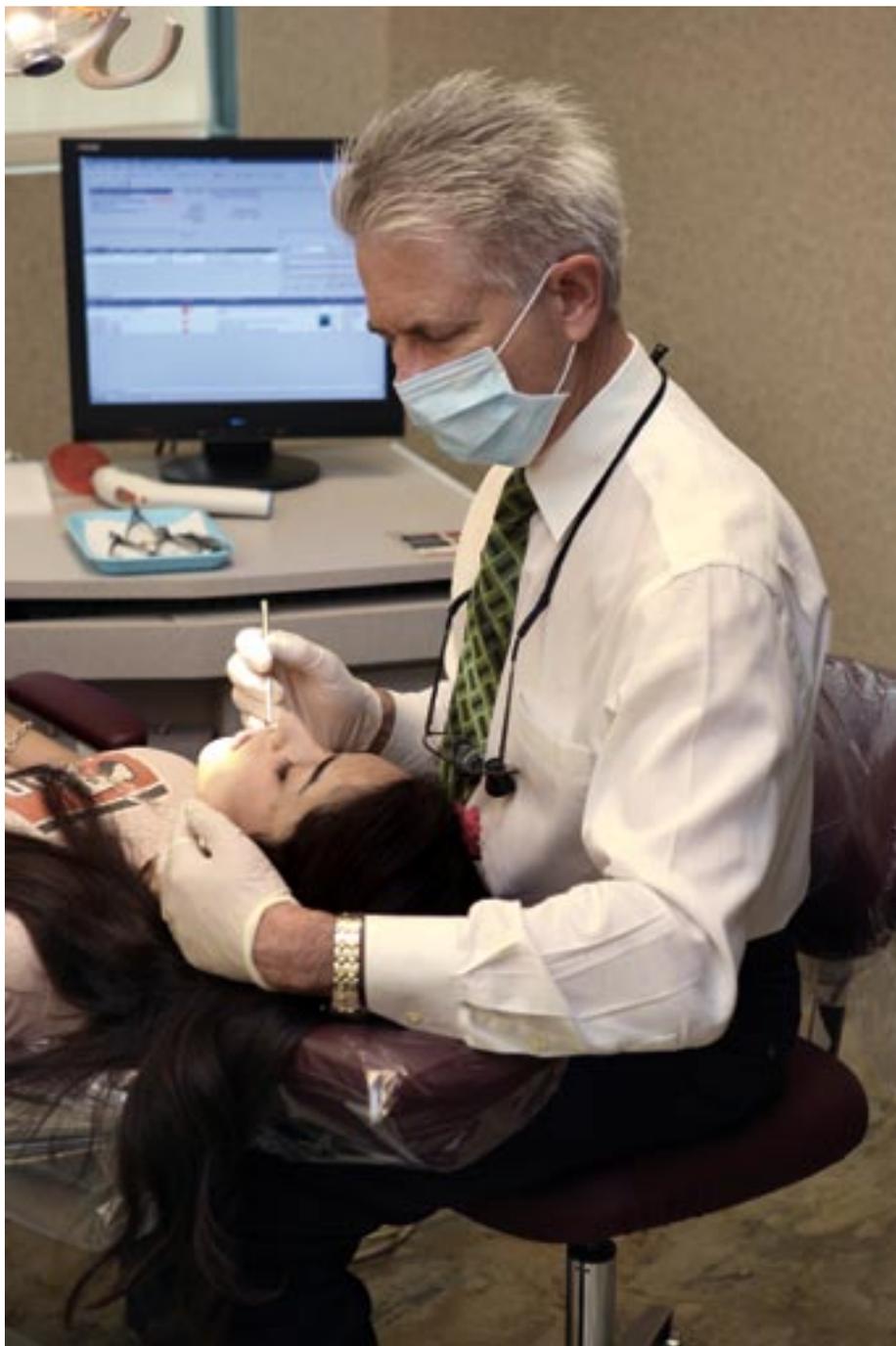
open bite. This latest treatment modality opens doors for us to achieve movements previously impossible without surgical intervention. Obviously, the patients are pleased when we can avoid surgical procedures and place the temporary anchorage devices in our office. Our office environment is so dynamic, I love it.”

Dr. Will received his undergraduate and graduate degrees from Loma Linda University, at one time training under Robert Ricketts, D.D.S., who was a pioneer in light-wire orthodontics treatment. During his training, Dr. Will was exposed to different approaches to orthodontics, an incredibly useful experience that benefits his patients today. He also brings a unique perspective to his work. As an undergraduate, he majored in biology and minored in art, a combination that has proven invaluable. “The visual is so prominent to me,” he says. “Orthodontics is a combination of science and art. It’s a huge construction project. You have to have the eye of an artist and the mind of an architect.”

## TWO THRIVING OFFICES

In August 2007, Dr. Abari reopened a new, high-tech office in Diamond Bar at the same location as the original destroyed office. The office now complements the flourishing San Dimas office to provide patients with convenient location options. Dr. Abari reflectively states, “Sometimes God closes one door and opens two others.”

Even after working for nearly three decades, Dr. Abari and Dr. Will don’t see themselves contemplating retirement. One need only visit his office in San Dimas to see why. The walls are decorated with hundreds of unsolicited thank-you letters from grateful patients, many of them children and teenagers. Dr. Abari and Dr. Will frame and display the letters, which provide a daily reminder of their often life-changing work. “It’s a driving force,” Dr. Abari says. “I love being an orthodontist. There are people who fix computers or fix cars, and they are great at what they do and we love them because we have computers and cars. As orthodontists, we fix how people feel about themselves. Our entire office team takes great pride in the fact that we do far more than just move teeth: We are remodeling their mind and body.”



**Dr. Larry Will trained under one of the pioneers of light-wire orthodontics.**

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