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Elastic Button Technique (EBT) with Clear Aligners | ClearPath
ClearPath Orthodontics
Enhancing predictable bite correction with directional force in clear aligner therapy.

CLINICAL INDICATIONS & MECHANICS

Corrects Complex Bite Relationships:
Essential for Class II/III corrections, canine traction, and posterior crossbite management.

Provides Directional Force:
Provides outside force to guide teeth into the correct relationship.

Metal vs. Ceramic Buttons:
Metal buttons are generally used on posterior teeth where strength matters more than appearance, while ceramic or tooth-colored buttons are often used on anterior teeth to preserve esthetics during treatment.

THE EBT BONDING PROTOCOL

Carinal Third Placement:
Buttons must be bonded near the gingiva, centered on the tooth surface.

S-Shape Placement:
Buttons must be bonded near the gingiva, centered on the tooth surface.

Verify Wire Placement:
Buttons must be bonded near the gingiva, centered on the tooth surface.

Integrated Digital Planning:
ClearPath aligners include computer-aided design windows to ensure stable elastic connections.

EBT ENHANCED VS. ALIGNER-ONLY MOVEMENTS

MOVEMENT TYPE	ALIGNER ONLY	EBT ENHANCED
Tipping & Rotation	✓	✓
Class II/III Bite Correction	✗	✓
Canine Traction	✗	✓
Posterior Crossbite	✗	✓

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Elastic Button Technique (EBT) Guidelines for Clear Aligners

The Elastic Button Technique (EBT) is a clinical protocol in clear aligner therapy that uses small bonded buttons on specific teeth as anchor points for elastic bands. These elastics apply directional force that aligners alone cannot generate, which makes the technique essential for correcting bite relationships rather than only straightening tooth position. Clear aligners move teeth well on their own, but certain movements, including Class II and Class III bite correction, canine traction and space closure, require an outside force to guide the jaw and teeth into the correct relationship. Elastic buttons provide that anchor point. Placement, bonding method and cutout window design all affect how reliably the elastic performs, and inconsistent execution is a common cause of unplanned emergency visits. For dentists using ClearPath Aligners, a detailed instruction form is provided that specifies when EBT should be performed, which tooth requires the elastic button, and at which treatment step it should be placed.

What Is the Elastic Button Technique in Clear Aligner Therapy?

The Elastic Button Technique refers to bonding a small metal or ceramic button to the surface of a tooth, then stretching an elastic band between that button and another anchor point, either another button or a hook built into the aligner. The elastic delivers continuous, directional force between the arches and within a single arch, depending on the correction needed.

Unlike traditional braces, where elastics attach directly to brackets or archwires, clear aligners require a dedicated cutout window in the tray so the elastic can reach the bonded button underneath. This detail matters because a poorly designed cutout can restrict elastic movement, irritate the cheek or gum tissue, or fail to hold the elastic securely in place.

Button materials vary by case. Metal buttons are generally used on posterior teeth where strength matters more than appearance, while ceramic or tooth-colored buttons are often used on anterior teeth to preserve esthetics during treatment. The choice of material does not change the underlying mechanics of the technique, but it does affect patient comfort and willingness to comply with elastic wear over the course of treatment.

Why Elastic Buttons Matter for Predictable Tooth Movement

Aligners apply force through the plastic tray itself, which works well for tipping, rotation and bodily movement within a single arch. Bite correction between the upper and lower arch is a different mechanical problem, and this is where elastic buttons become necessary.

A few reasons elastic buttons matter clinically:

- They provide a fixed anchor point strong enough to hold interarch elastic force over weeks of wear.
- They allow targeted movements, such as canine traction or posterior intrusion, that aligner plastic cannot achieve on its own.
- They reduce reliance on refinement trays by supporting bite correction earlier in treatment.
- They give the clinician a controllable, adjustable mechanism separate from the aligner sequence itself.

Core Guidelines for Using Elastic Buttons with Clear Aligners

Effective use of the Elastic Button Technique depends on three factors working together: correct placement, appropriate elastic force, and the right case selection. Skipping any one of these tends to reduce treatment predictability, and the effect is often not visible until several weeks into wear, when a poorly seated button or an incorrect elastic pattern has already allowed the bite relationship to drift from the planned sequence.

Button Placement and Bonding Protocol

Buttons are typically bonded to the cervical, or gingival, third of the tooth crown, close to the gumline. This placement differs from how buttons are positioned on traditional braces, where the bracket sits at the center of the crown.

A standard bonding sequence generally follows these steps:

1. Etch the tooth surface using the manufacturer's recommended acid concentration.
2. Rinse and dry the area thoroughly before bonding.
3. Bond the button to the cervical third of the crown, centered on the tooth surface.
4. Confirm the aligner's cutout window aligns correctly over the bonded button.
5. Insert the aligner and attach the elastic between the designated anchor points.

Consistency in this sequence reduces the risk of debonding, which is one of the more common reasons patients return for an unplanned visit. Some clinicians also use an adhesiveless bonding method, in which a heated metal button is pressed directly into the aligner material to create a mechanical bond, though this approach is generally reserved for specific situations, such as when immediate elastic traction is needed and a full etch-and-bond cycle is not practical at that visit.

Elastic Wear and Force Application

Elastic force needs to match the movement being requested. Interarch elastics used for Class II or Class III correction typically require heavier, more consistent wear than intra-arch elastics used for smaller adjustments such as space closure.

Dentists generally instruct patients on:

- How many hours per day the elastic should be worn, based on the correction type.
- When to change the elastic band to maintain consistent force.
- How to reattach an elastic that has come loose without damaging the button or aligner.
- What signs, such as persistent soreness or a loose button, should prompt an earlier follow-up visit.

Case Types That Require Elastic Buttons

Not every clear aligner case needs elastic buttons. Case selection typically follows the same evidence-based screening used for other clear aligner decisions, weighing the severity of the bite discrepancy against what aligner movement alone can realistically achieve. The technique is generally indicated for:

- Class II malocclusion, where the upper arch needs to move backward relative to the lower arch.
- Class III malocclusion, where the opposite correction is needed.
- Crossbite correction, particularly in the posterior region.
- Canine traction, often used to guide an impacted or displaced canine into position.
- Space closure cases where additional anchorage improves control over the closing movement.

How ClearPath Aligners Supports the Elastic Button Technique

ClearPath incorporates EBT guidelines directly into its digital treatment planning and aligner manufacturing process, rather than treating elastic button placement as an afterthought.

Cutout Window Design and Button Compatibility

Cutout windows are engineered to align with standard button placement at the cervical third of the crown, which supports a secure elastic connection without excess plastic interfering with the button head. Consistent window sizing across trays helps maintain a stable connection point as treatment progresses through each stage.

Attachment and Material Considerations

Because tri-layer aligner material behaves differently under sustained elastic tension than single-layer material, ClearPath's digital planning process accounts for elastic wear zones when generating the treatment sequence. This helps reduce the chance of the cutout window distorting or weakening under repeated elastic force.

Clinician-Led Elastic Protocols

Elastic wear instructions and button placement recommendations are reviewed by the treating dentist as part of the digital treatment plan, rather than generated as a fixed default. This keeps the clinician in control of timing, force level and case-specific adjustments throughout treatment.

If a case requires a change to the elastic pattern partway through treatment, ClearPath's clinical support team can help the treating dentist adjust the plan without restarting the full aligner sequence from the beginning. This flexibility matters in bite correction cases, where the response to elastic wear can vary from one patient to the next even when the starting diagnosis looks similar.

Benefits of the Elastic Button Technique for Dentists and Patients

- **More predictable bite correction.** Elastic buttons give the clinician a direct mechanism to correct anteroposterior relationships that aligner trays cannot address alone.
- **Fewer refinement trays.** Addressing bite discrepancies earlier, rather than after the aligner sequence is complete, tends to reduce the number of additional trays needed.
- **Better anchorage control.** Buttons provide a stable point for elastics without depending on aligner plastic alone to resist movement.
- **Improved patient understanding.** A visible button and elastic system helps patients understand why certain teeth require additional support during treatment.
- **Broader case eligibility.** Cases involving mild to moderate bite discrepancies can often be treated with aligners rather than requiring a switch to fixed appliances.
- **Clearer clinical documentation.** Button placement and elastic wear instructions create a specific, trackable part of the treatment record.

Best Practices Checklist for Elastic Button Placement

- Confirm cervical third placement and proper centering before bonding.
- Match the cutout window size to the button head to avoid tissue irritation.

• Match the selected window size to the button used to avoid tissue irritation.

- Select elastic force and wear schedule based on the specific correction needed.
- Review button and elastic status at each patient visit, not only at aligner changes.
- Educate patients on reattaching a loose elastic without visiting the office for minor adjustments.
- Document button placement and elastic pattern as part of the digital treatment plan.
- Reassess bite relationship periodically rather than assuming the original elastic plan needs no adjustment.
- Communicate clearly with patients about the difference between normal soreness from new elastic wear and a sign that something needs attention, such as a shifted button or an unusually sharp cutout edge.

Partnering with ClearPath for Elastic Button Guided Aligner Treatment

The Elastic Button Technique gives dentists a reliable way to correct bite relationships that aligner trays cannot address on their own. Consistent button placement, appropriate elastic force and clear case selection criteria all contribute to more predictable outcomes for patients who need this level of correction, and following a defined protocol reduces the chance of unplanned visits caused by a loose button or an uncomfortable cutout window.

ClearPath aligners builds EBT guidelines into cutout window design, digital treatment planning and clinician-reviewed elastic protocols, keeping dentists in control of every stage of bite correction. Dentists interested in an evidence-based approach to elastic button treatment planning can learn more about [partnering with ClearPath](#) to review the clinical workflow firsthand.



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