

INTRODUCTION

Background: Soft tissue profile differs in its morphology and appearance based on the underlying three-dimensional skeletal structure. Hence, it can be affected by underlying bone morphology in the sagittal or vertical facial dimensions.^{1,2}

Objectives: This study aimed to compare soft tissue profile variations between Class I and Class II adult patients in the three vertical skeletal facial patterns (normodivergent, hypodivergent and hyperdivergent). The primary purpose of the study was to determine which skeletal variation had the most significant impact on the soft tissue profile.

MATERIAL & METHODS

Retrospective soft tissue profile analysis was performed in Lateral Cephalograms for 131 adult patients (47 males, 84 females).

Soft tissue analysis was divided into three categories, subnasal profile, general profile, and soft tissue thickness. Sample was then divided based on two sagittal skeletal patterns (Class I and Class II), and three vertical skeletal groups.

Viewbox cephalometric tracing software was utilized for the assessment. Descriptive, comparative and correlation statistics were obtained using SPSS software.

RESULTS

Intergender: Males presented significantly thicker soft tissue compared to females at the level of the upper lip, lower lip and chin.

Sagittal: Class I individuals displayed significantly thicker upper lip especially in females, however, no significant differences were found at the level of the subnasal profile. Class II patients presented a significantly decreased Z-angle, facial angle, lower lip and chin prominence.

Vertical: Hyperdivergent patients had generally thinner soft tissue when compared to the normodivergent and hypodivergent groups. Hyperdivergent patterns also presented significant differences at the level of subnasal and general profiles compared to the other vertical groups.

DISCUSSION

Intergender:

Soft tissue thickness: Similar to other studies, males presented thicker soft tissue compared to females in all aspects of the face.^{2,3,4} This interesting finding could be used for gender identification. Patients' gender must be considered when planning orthodontic treatment where the outcome of extraction therapy on the facial profile would be more noticeable in females compared to males.⁵

Subnasal profile: Females have more protruded lips.

General profile: There was no gender dimorphism.

Sagittal

Soft tissue thickness: In a study conducted on an adult Pakistani population, Jeelani et al. concluded that soft tissues have a tendency to camouflage underlying skeletal discrepancies i.e, Class III individuals presented thicker upper lip and thinner lower lip and chin, whereas Class II pattern had thinner upper lip and thicker lower lip. We found this to be true between Class I and Class II patients only at the level of the upper lip.⁶

Subnasal profile: Since the H-line measures the harmony of the subnasal profile specifically at the level of the lips, we can imply that Class I and Class II profiles in our sample were equally harmonious.⁷

General profile: Significant differences at the level of Z-angle, 0-degree meridian, facial angle, lower lip prominence and chin prominence, where the Class II group presented increased facial convexity due to mandibular retrognathism, similar to Buschang et al.¹

Vertical

Soft tissue thickness: Similar to our results, a study conducted on CBCT found that the soft tissue was considerably thinner in hyperdivergent patterns at the level of the upper lip, lower lip and chin.²

Subnasal profile: Hyperdivergent patients display a more convex subnasal profile. This could be related to the fact that the backward positioned chin in high angle cases give the impression of protruded lips at the subnasal level. This is not attributed to thicker lips as seen above.

General profile: As FMA increased, the profile presented a more convex trend especially at the level of Z-angle, 0-degree meridian, facial angle and chin prominence. Chin was more retruded in hyperdivergent group as opposed to the hypodivergent group.

CONCLUSIONS

- The **vertical dimension** had a more overall impact on the soft tissue compared to the sagittal. Soft tissue thickness, subnasal profile and general profile were all influenced by the vertical dimension
- Males present **thicker soft tissue** compared to females, whereas females have a more **convex profile**
- Vertical dimension must be given special consideration when planning orthodontic treatment and mechanics

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Soft Tissue Comparison between Males and Females using Mann-Whitney test

Soft tissue variables	Males (N=47)	Females (N=84)	p-value (0.05)
Subnasal Profile			
Upper lip to E-plane	-5.43	-4.43	0.043
Lower lip to E-plane	-2.85	-1.70	0.029
Nose	9.41	7.64	0.024
Soft A to Holdaway	-3.64	-4.19	0.027
Lower lip to H-plane	0.15	0.71	0.082
Soft B to Holdaway	-6.53	-4.64	0.000
Soft tissue Thickness			
Upper lip at subnasale	17.79	11.99	0.000
Upper lip at vermillion	15.06	13.83	0.003
Lower lip 1	15.94	10.60	0.000
Lower lip 2	11.64	13.54	0.000
Chin at pog	13.13	10.57	0.000
Chin at Gn	8.77	6.94	0.000
General Profile			
Nasolabial angle	99.62	100.57	0.633
Z-angle	76.98	76.64	0.859
0-degree meridian	2.38	3.64	0.316
Facial angle	91.70	90.05	0.465
Upper lip prominence	0.96	1.51	0.164
Lower lip prominence	-2.28	-1.26	0.201
Chin prominence	-8.32	-7.15	0.195

Soft Tissue Comparison between Class I and Class II regardless of gender

Soft tissue variables	Class I (N=61)	Class II (N=70)	p-value (0.05)
Subnasal Profile			
Upper lip to E-plane	-5.25	-4.39	0.046*
Lower lip to E-plane	-2.23	-2.01	0.463*
Nose	9.02	7.62	0.034*
Soft A to Holdaway	-4.05	-3.94	0.792*
Lower lip to H-plane	0.66	0.39	0.453
Soft B to Holdaway	-5.21	-5.41	0.587*
Soft tissue Thickness			
Upper lip at subnasale	14.79	13.44	0.008*
Upper lip at vermillion	14.85	13.77	0.001*
Lower lip 1	12.72	12.33	0.404*
Lower lip 2	12.77	12.93	0.54*
Chin at pog	11.59	11.40	0.689*
Chin at Gn	7.72	7.49	0.502*
General Profile			
Nasolabial angle	96.61	103.39	0.001
Z-angle	78.75	75.03	0.000
0-degree meridian	3.97	2.51	0.059*
Facial angle	92.59	88.94	0.035*
Upper lip prominence	1.69	0.99	0.246*
Lower lip prominence	-0.44	-2.66	0.001*
Chin prominence	-5.87	-9.06	0.000

Kruskal Wallis test comparing soft tissue between vertical groups regardless of gender (1: Normodivergent, 2: Hypodivergent, 3: Hyperdivergent)

Soft tissue variables	Vertical groups	p-value (0.05)	Vertical groups	p-value (0.05)	Vertical groups	p-value (0.05)	Vertical groups	p-value (0.05)	Vertical groups	p-value (0.05)																																													
Upper lip to E-plane	1	0.549	Lower lip to H-plane	1	0.010	Lower lip 1	1	0.370	Nasolabial angle	1	0.954																																												
	2	0.291		3	0.006		Lower lip to E-plane	1		0.025	Soft B to Holdaway	1	0.029	Lower lip 2	1	0.030	Z-angle	1	0.011	2	0.010	3	0.017	Nose	1	0.230	Upper lip at subnasale	1	0.585	Chin at pog	1	0.959	0-degree meridian	1	0.077	2	0.010	3	0.010	Soft A to Holdaway	1	0.206	Upper lip at vermillion	1	0.308	Chin at Gn	1	0.314	Facial angle	1	0.892	2	0.010	3	0.010
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Correlation between soft tissue variables and skeletal patterns

Soft tissue variables	ANB Males	ANB Females	FMA Males	FMA Females
Subnasal Profile				
Upper lip to E-plane	0.307	0.385	-0.053	0.282
Lower lip to E-plane	0.176	0.090	0.041	0.229
Soft A to Holdaway	-0.029	-0.204	-0.212	-0.256
Lower lip to H-plane	-0.025	0.130	0.155	0.169
Soft B to Holdaway	0.018	-0.054	0.555	0.262
Soft tissue Thickness				
Upper lip at subnasale	-0.074	-0.293	0.005	-0.186
Upper lip at vermillion	-0.186	-0.243	-0.038	-0.096
Lower lip 1	0.107	0.018	-0.159	-0.033
Lower lip 2	0.255	0.162	0.283	0.103
Chin at pog	0.034	-0.022	-0.126	-0.075
Chin at Gn	-0.090	-0.084	-0.417	-0.164
General Profile				
Nasolabial angle	0.266	0.228	-0.214	0.052
Z-angle	-0.313	-0.571	-0.312	-0.490
0-degree meridian	0.112	-0.154	-0.379	-0.463
Facial angle	-0.087	-0.293	-0.420	-0.221
Upper lip prominence	-0.032	-0.021	0.044	0.025
Lower lip prominence	-0.150	-0.202	-0.018	-0.123
Chin prominence	-0.337	-0.526	-0.432	-0.509

General profile (top) & subnasal profile (bottom) superimpositions of two randomly selected patients

