

Dear Kevin,

You must excuse my clear narcissistic tendency.

As you say “orthohydrotonics” is not orthotropics, this new disease of “craniofacial-osteodental dysplasticum” is not Craniofacial Dystrophy (any other new diseases, or suggested pathologies out there Ed?), the “North England School of Cranial Release Aquatherapy Provision” is not the London School of Facial Orthotropics and it must just be a coincidence that my father also calls himself a maverick and free thinker. Very sorry to have jumped to any conclusions, please excuse me.

And of course in reality it is the BOS and orthodontic establishment in the UK who are avoiding debate and enquiry, in particular the one on the aetiology of malocclusion, that I eluded to.

While I acknowledge that you are not referring to orthotropics, it would be a good opportunity to remind you that we zealously wish to lay ourselves (and our supporting references) bare to contemporary scrutiny, respond to scientific challenges, engage in debate, and start whatever research possible. All we ask for is a level independent playing field.

As you rightly note there's a vacuum of quality evidence in orthodontics, and, this has been filled by a range of ideas, some ludicrous and more reasonable. Should we not apply the above test to all these ideas, including any incumbents.

Regarding the research. Are you sure that you have looked at the pilot that I did for you, I might have missed it but never saw the drobox file shared by you or Martyn, and if so please do get back to me which your thoughts on this, as you agreed? I do feel left in a difficult position with people (not you clearly) saying that I'm not doing research while I cannot, as every single door is closed in my face. Also as I've mentioned, I believe that it is only in North Korea that people are held responsible for the actions of their parents (who is no more than a part time associate at my clinic), and if you are unable to help could you refer me to someone else who could?

Finally, I will take this opportunity to formally challenge you to a debate on the aetiology of malocclusion, as I am sure that this will help shed light onto this vacuum. As this is a much needed area of further investigation and we could keep it as light hearted at this article.

Best wishes,

Mike

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