

# The Innovator



**Who:** Dr Nick Mohindra

**What:** The Oralift

**Why:** Reversing ageing without knives or needles



The fields of science and medicine are littered with examples of serendipitous discoveries; from the discovery of penicillin by Alexander Fleming to the psychedelic effects of LSD. This extends to the world of anti-ageing; Retin-A, for example, a vitamin A derivative used to treat acne, was found to also reduce facial wrinkles in older patients. Dr Mohindra's Oralift follows the same tradition.

## Making of an innovator

Dr Nick Mohindra qualified as a dentist from Edinburgh Dental School in 1969 and, after practicing for seven years in South Wales, established a NHS practice in Ashford in Kent when his son's illness necessitated him living close to the London hospital that was treating him.

While practising in Ashford, Dr Mohindra was always interested in what was happening at

the forefront of dentistry, and continued to attend post-graduate courses. One of the topics that fascinated him was TMD (temporomandibular disorder) – the current thinking being that it is the temporomandibular joint, which connects the upper and lower jaw, that causes many cases of facial pain.

Believing that the solutions that were being put forward weren't addressing the problem, Dr Mohindra started to do his own research.

## Breaking taboos

This research led Dr Mohindra to develop a theory that in evolutionary terms we were losing lower facial height – the distance between the tip of the nose and the chin. He thought that if it could be shown that we could replace the loss of lower facial height, then perhaps tackling the problem of facial pain might become easier.

As Dr Mohindra explains: "All I wanted to do at that point was to show that we could change lower facial height. This was almost a taboo in dentistry because we had been taught that the facial muscles were like elastic bands with memory so they would just snap back into

their old position if you tried to alter them.

"I found through my research that it was possible to change lower facial height in denture lift patients by up to 20mm. I had patients returning saying that they were having no problems with their new dentures, and so it seemed obvious that these results needed to be written up in a scientific way."

Dr Mohindra then entered a new world of scientific research, which was alien to him as a general practitioner. In 1992, on the advice of the then editor of the *British Dental Journal*, he worked with a consultant from Kings College, called Dr David Davis, on a paper showing how lower facial height could be increased in edentulous patients. This paper was published in the internationally acclaimed *British Dental Journal* in 1996. Following this, he worked with Dr Davis on getting ethical approval for doing further research to ascertain the results of increasing lower facial height on posture, and relief of headaches, neck and shoulder pains. Ethical approval was granted for this research, but unfortunately Dr Mohindra was unable to obtain funding.

"I was in a dilemma about what to do next. Funding is usually

diverted to the universities so it was impossible for me to do X-rays or MRI scans to find out what was happening to the temporomandibular joint or the muscles. So I decided to just continue recording the experiences of my denture patients. But this was when I noticed something unusual. They were coming back to me and saying not only did they now feel good, they were starting to look good as well.

"We started to record the process by taking photographs of the patients and that is when I realised they were right – they were definitely starting to look younger."

This observation again had to be documented in a research paper, which was published in 2002. This research showed that patients, after having this treatment, looked between five and 20 years younger. By this time he was treating not only edentulous patients, but dentate patients as well. Dr Mike Grace, editor of the *British Dental Journal*, commented on Dr Mohindra's determination to scientifically validate his observations. Dr Grace wrote: "Very few people actually do the hard work to really prove their ideas are right. Nick Mohindra's story to me is the perfect example of how scientific publishing should work for all concerned."

## Development of the appliance

At that point, Dr Mohindra was achieving these results with a pivot appliance, which he was using to determine by how much to increase lower facial height permanently. He then started to realise that the pivot appliance alone, without permanently increasing lower facial height,

was having a positive effect on facial aesthetics. This pivot appliance was quite difficult to make, and he felt that for this to be commercially viable he had to design an appliance that would be much easier to use which is when the Oralift came into being. The Oralift was designed to be much easier to fit and to use. It looks like a gum shield you would use in sport but the difference is that it has two hard blocks on either side to keep the jaws separate.

## How it works

"We really don't know exactly how it works but we have some theories as to why it is working," Dr Mohindra explains. "There are two principles at work here; the

capacity of the body to adapt to new situations and the ability of the body to heal."

The Oralift encourages the muscles in the lower jaw to rest in a different position from the normal resting position, which in turn results in the muscles releasing growth factors which have an anti-ageing effect. The Oralift not only affects the muscles in the jaw, but it in turn has an effect on the muscles of the head and neck, and even the muscles involved in swallowing and breathing have to work differently. It is this impact on lots of the various muscles that seems to produce the all round anti-ageing effect of the Oralift.

That's one theory. Another theory is about the healing

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process – collagen levels in the body deplete as we age and have long been linked with the effects of ageing. But when we cut ourselves the body releases collagen to help us heal. The Oralift seems to cause micro-trauma to our muscles which is followed by healing. This healing process continues for up to ten months after the initial trauma. A further possibility is that the Oralift is changing the environment in the muscles so that old, tired stem cells become rejuvenated.

#### The seal of approval

Anecdotal and photographic evidence show some amazing results but the next stage for Dr Mohindra is clinical trials. "I know that this device is quite revolutionary but I also know that clinical trials conducted by a university are essential.

"For the last five or six years I have been trying to get a university interested in doing trials and we now have someone on board. I am really looking forward to an independent body looking at the Oralift and seeing whether they come up with the same things as me – or even discover something new that I haven't thought of."

#### Natural beauty, natural results

The Oralift promises incredibly subtle but rejuvenating effects – or self-rejuvenating as Dr Mohindra describes it. "Younger looking, healthier skin, a firmer jaw line, an improved smile window from oval to classic, fuller lips and up-tilted eyes are just some of the results we have observed in some patients that have had the treatment, and the boost to confidence becomes self-evident. The results look a lot more natural than other more



artificial treatments such as surgery or injections."

Ageing is very rarely down to one particular problem and this is how Oralift is different from other aesthetic treatments. Dr Mohindra continues: "The Oralift can have an impact on every area. It is not obvious like having a facelift, but the total effect can be very striking."

#### A long journey

Overcoming resistance from the world of cosmetic surgery and aesthetics: that a simple bit of plastic – designed by a dentist – can produce these results has been a long journey, but over time long-term studies and the photographic evidence has seen a more positive reaction from both clinicians and patients alike. Clinical trials will only give it more credibility.

Time has also added to the discoveries as Dr Mohindra admits: "As a dentist I'm used to looking at teeth and to start noticing subtle changes in the face and skin has been a learning curve – a doctor from the Middle East was the first to say to me, 'Nick, do you realise what you are doing? You are reversing the ageing triangle'. I hadn't even heard about this ageing triangle. She explained

what it was and then it seemed obvious – cheeks are lifted, jowls are tightened and the shape of the face is changing.

"The regime I have developed over the last few years is very simple. It is like comparing it to exercise; when we take up an exercise programme the advice is not to jump straight in but to build up slowly. Therefore, patients begin by wearing the appliance for a few minutes a day, every third day, building up to a maximum of two hours. I believe it's important to have rest periods between wearing the appliances, and the long-term results suggest that this minimal use of the appliance is giving more consistent, good results. I'm also very excited that more dentists are coming on my courses, and that Oralift is now available in more practices across the UK and overseas."

#### CS&AG

**Treatment:** Oralift  
**Price:** From £575  
**Time taken:** 1.5 hours  
**Anaesthetic type:** None  
**Hospital stay:** None  
**Available from:** For more information go to [www.oralift.com](http://www.oralift.com) or [www.dentalfacelift.com](http://www.dentalfacelift.com), or phone 020 7636 9978