**Title:** Evaluating the Clinical Success of Clear Aligners for Rotational Tooth Movements: A Systematic Review

**Research Question:** To evaluate the accuracy and predictability of planned rotational tooth movements in orthodontic patients (adults and adolescents, permanent dentition) treated with clear aligners

## **Objectives:**

# **Primary**:

1. To evaluate the effectiveness and accuracy of clear aligners in producing rotational tooth movements by comparing planned versus achieved outcomes.

# Secondary:

- 1. To identify which types of teeth show the highest or lowest predictability in rotational correction.
- 2. To evaluate the influence of aligner design features (e.g., attachment shape, optimized attachments, staging protocols) on rotational accuracy
- 3. To identify clinical or treatment-related factors (e.g., amount of rotation planned, use of auxiliaries) that may affect rotational outcomes
- 4. To compare the predictability of rotation between different clear aligner brands or systems, if applicable
- 5. To analyze the need for refinements

#### Methods:

#### ☐ Inclusion Criteria:

- o Studies involving human patients with permanent dentition treated exclusively with clear aligners.
- No age limits (adolescents, adults).
- Studies reporting quantitative data on rotational tooth movement (planned vs achieved).
- o Any clear aligner system (e.g., Invisalign, Spark, ClearCorrect).
- Clinical studies including RCTs, cohort studies, cross-sectional studies.

## **■** Exclusion Criteria:

- o In vitro, ex vivo, or animal studies.
- o Studies on mixed or deciduous dentition.
- Studies not reporting rotational movements or not providing quantitative data.
- o Case reports, reviews, editorials, expert opinions.
- Studies involving combined appliance therapies (unless data on clear aligners are presented separately).

#### **■** Sources:

 Systematic search in: PubMed, Scopus, Embase, Web of Science, Cochrane CENTRAL, LILACs, Ovid, ClinicalTrials.gov, ProQuest (searching until April 2025).

# □ Study Selection:

o Two independent reviewers will screen titles, abstracts, and full texts. A third reviewer will resolve disagreements.

#### **Data Extraction:**

 Based on a standardized model including: study design, sample size, age, aligner brand, amount of planned and achieved rotation (degrees), type of teeth, presence/type of attachments, treatment duration, number of refinements.

## **□** Risk of Bias Assessment:

- o **ROBINS-I** for non-randomized studies and **RoB 2** for RCTs.
- o The **GRADE** approach will be used to evaluate the certainty of evidence.

**Note:** This protocol will be registered on PROSPERO and developed in accordance with PRISMA guidelines.