

New Treatment Modalities (For Children)

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Posture, upper airway obstruction, tongue habits, muscle and facial abnormalities all have a profound effect on occlusion and facial appearance.

Studies have shown that there is a relationship between upper airway obstruction, facial appearance and dental abnormalities. The term 'Long Face Syndrome' has been used to describe the familiar facial pattern of the airway obstructed patient. An example can be seen below. It is common that in these patients, head posture is altered to help maintain an adequate airway that may be obstructed. The primary causes of upper airway obstruction include enlarged tonsils and adenoids, turbinate hypertrophy, allergic and nonallergic rhinitis (stuffy nose). Sleep disordered breathing such as snoring and obstructive sleep apnoea is also an associated disorder commonly associated with upper airway problems. Since airway obstruction can have a major negative impact on facial development, it is vital that we recognise signs of upper airway obstruction early and communicate closely with other specialists.

Long Face Syndrome



Fig. 2. A patient with a long, narrow face.

Normal facial growth and dental arch development depends upon the position of tongue within the dental arch during growth and development. Ideal arch form results when forces of the tongue, cheeks and lips are in balance and this can only be achieved if the tongue has room to rest and function within the dental arch.

Mouth breathing due to an obstructed nasal airway causes a lowering of tongue position which results in a change in the balance between tongue and cheek pressure on the dental arches.

Consequently we often find that mouth breathing patients have high palates, narrow arches and a significant amount of crowding.

If the oral and facial muscles are not in balance and mouth breathing is not addressed it can lead to facial abnormalities and impact on facial aesthetics.

Myofunctional Therapy is treatment that aims at improving and establishing the correct function of the oral and facial muscles. Here at Divine Smiles, myself , a certified **Orofacial Myologist** is able to offer **Myofunctional therapy** to all our patients.

It includes the evaluation and treatment of:

- Detrimental orofacial habits (eg. Thumb sucking, nail biting, tongue thrusting)
- Posturing problems related to the lips, tongue, jaw and respiratory system
- Detrimental breathing patterns
- Swallowing patterns which may be associated with malocclusions
- Facial and postural aesthetics

Myofunctional therapy is painless and it involves a series of exercises which are relatively simple. When certain muscles are strengthened and functioning properly, other muscles will follow suit until an overall balance of these muscles is achieved. This will result in a normal attractive face. Treatment will also be beneficial to patients prior to orthodontic treatment (braces), as bad habits which can result in malocclusion will be eliminated. Sometimes if a myofunctional disorder is detected early, orthodontic treatment may be minimal or even avoided.