

Early detection can help to reduce, and in many cases prevent, the risk for health problems in children. According to the American Dental Association (ADA), a good night's sleep is essential for children because it restores energy and helps physical growth and mental development. While a child needs a good amount of sleep, the quality of sleep is most crucial. When a child does not get good sleep, it can result in negative consequences like poor brain development and behavioral issues.

SIGNS TO WATCH FOR WHEN SLEEPING

- Unusual sleeping position (head up and back)
- Bed-wetting
- Night terrors
- Snoring
- Teeth-grinding
- Restlessness
- Mouth breathing

BEHAVIORAL SIGNS

- Daytime drowsiness
- Difficulty concentrating
- Irritability
- Moodiness
- Fidgeting
- Tantrums

All of these items can be signs and symptoms of a child not getting enough sleep. Many children who are diagnosed with attention deficit hyperactivity disorder (ADHD) display very similar signs and symptoms of a sleep-deprived child. Getting evaluated for sleep-disordered breathing benefits a child's well-being as it may discover underlying health issues.

EVALUATION

At our practice, hygienists and dentists are trained to assess a child's health history and evaluate indicators of sleep-disordered breathing. If signs and symptoms are present, then an evaluation with our myofunctional therapist is recommended. A healthy pediatric airway should be >12mm; we refer to this as "like breathing through a water hose". An unhealthy airway that is <12mm is called "like breathing through a coffee straw". Contributing factors that lead to an insufficient airway are:

- Enlarged tonsils
- Tongue-tie/lip-tie
- Underdevelopment of dental arches

Our therapist will complete a thorough assessment and take measurements of the lips, tongue, and

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MEMBER ARTICLE | BY TRINA SHIPLEY, MAADOM

oral cavity, along with a CBCT. She will also take photos and gather a comprehensive medical history and will evaluate for factors indicating sleep-disordered breathing, including evaluating lip and tongue ties.

TONGUE TIES

A tongue tie (medical term is ankyloglossia) is a tight band of tissue under the tongue called a frenum. The frenum anchors the tongue to the floor of the mouth, causing restriction of muscle function. This condition is present at birth and often not diagnosed as a problem. The ties vary in severity, and the more restricted it is, the less movement a child has with their tongue. A tongue tie can cause several issues, such as:

- Open mouth breathing
- Tongue thrust (leading to improper teeth development)
- Poor muscle function
- Facial growth alterations
- Feeding, drinking, chewing, and swallowing difficulties
- Digestive issues/acid reflux
- Speech challenges
- TMJ and neck pain
- Headaches
- Risk for sleep apnea



MEET THE **MEMBER**

Trina has worked in dentistry for over 26 years. She was a CDA for several years before moving to the business and management side. She is currently the accounting manager for Pax Dental in Southern Maryland. Trina is a lifetime AADOM member, earned her FAADOM in 2016 and MAADOM in 2023.

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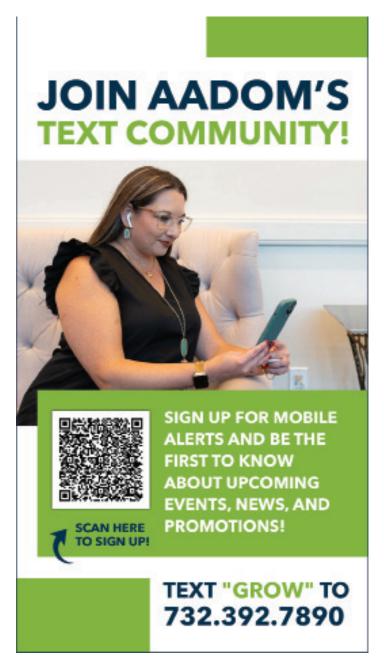
A laser is used to release a tongue tie, but the crucial part of treatment is therapy. Treatment for a tongue tie involves a combination of orofacial myofunctional therapy before and after the release. Therapy is performed for at least two months before and after the release. We advise patients to consider it physical therapy for their mouth and facial muscles. Lips and buccal ties are also evaluated as they can contribute to the growth development.

In our practice, we started treating infants at the end of 2022. Many babies are born with tongue and lip ties, which can cause issues with latching for breastfeeding. These infants can latch almost immediately using a laser to release the ties. The laser is a non-invasive, clean, fast procedure with no sutures. Our myofunctional therapist assists the dentist and will educate the parents on homecare and therapy. Seeing the immediate difference this makes and the relief it gives a mom when she can finally breastfeed is amazing. It doesn't stop there; our therapist collaborates with lactation nurses to ensure the mom has all the support she needs, and we offer infant and toddler airways programs to assist parents with growth and development throughout childhood.

AIRWAYS PROGRAMS AND TREATMENT

We have programs that are tailored to each child's specific needs and depend on many factors such as age, development, health history, and clinical findings. The goal of treatment is to get the child healthier and sleeping better. Widening the dental arches with an orthodontic guide appliance allows for proper tongue space and sufficient airflow and aids in correcting crowded teeth. The palate is formed by the tongue resting on the roof of the mouth; if this is not occurring, it makes nasal breathing more difficult. Getting the tongue to rest correctly on the roof of the mouth helps widen the upper jaw, allowing for a larger airway. Tongue placement and function are achieved with myofunctional therapy throughout treatment.

Myofunctional therapy is performed by our healthcare professionals who have completed extensive training and certification. Our therapists will create an



individualized program to teach correct oral function and rehabilitate oral structures. Therapy works by strengthening the muscles of lips, tongue, cheeks, and face and their related functions (breathing, sucking, chewing, swallowing, and some aspects of speech). Therapy helps the following:

- Reduce and eliminate sleep apnea symptoms
- Attain a lip seal to establish proper nasal breathing as a primary function
- Improve speech and promote proper chewing and swallowing

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- Improve focus and help with ADD/ADHD symptoms
- Eliminate oral habits such as lip biting and cheek chewing

The combination of expansion and therapy can significantly improve a child's health and sleep. To provide optimal treatment, we collaborate with other healthcare professionals such as ENTs, sleep specialists, pediatricians, chiropractors, etc.

SUCCESS

Since offering this treatment in our practice, we have seen an increase in the number of children needing it. Parents are coming back to us amazed by the difference they see in their children. One of our dentists has a 7-year-old daughter who was experiencing several of the sleep and behavioral issues listed above. After completing treatment, she has become a completely different child. She sleeps

better, stopped wetting the bed, and no longer has random tantrums. Our myofunctional therapist has treated her and many of our employees' children.

There is a lot of information and videos available on the internet regarding sleep-disordered breathing in children. This is not one of our patients, but it is a great video testimonial of how this treatment can change a child's life: Finding Connor Deegan - Foundation for Airway Health - YouTube (the one with the mom; get your tissues ready!)

CONCLUSION

As you read this article, I am sure you can think of a child you have seen who could benefit from an evaluation for sleep-disordered breathing. Maybe it is your child. Dental professionals play a crucial role in children's dental health but can also significantly impact their sleep and health.