

CENTURY ORTHODONTICS

OUR THIRD CENTURY OF ORTHODONTIC EXCELLENCE

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Abnormal Tongue Posture (Tongue Thrust)

One of the most important principles of orthodontic treatment is that teeth will move if subjected to a force for a significant portion of the day. The amount of force is not nearly as important as the length of time it is applied. Heavy forces such as chewing and biting do not move teeth because they occupy only a small amount of time each day.

For some individuals, the tongue is not positioned in the mouth correctly during the hundreds of times each day and night that swallowing takes place. Instead of going up against the roof of the mouth as it should, the tongue stays low and “thrusts” forward between the upper and lower teeth. In other individuals the tongue is held in a more forward position than normal. Finally, some patients posture their tongue between the upper and lower teeth rather than “inside” the dental arches. This constant force creates a space (open bite) between certain teeth, even when the very back teeth come together.

Because a “thrust” is a type of subconscious neuromuscular pattern rather than a “habit” like thumb sucking, it is very difficult to correct. In general, we believe in a three-fold “attack” on this problem:

1. Specific exercises....Tongue Posture Exercises ...see back of this handout
2. Dental appliances to block the tongue or to “remind” the tongue to go to a more normal position
3. Orthodontic appliances to physically move the teeth together with the hope that the tongue will then “find” a more normal place to position itself.

Although orthodontic corrections can still be done without “curing” a tongue thrust, stability and how ideal the final correction will be is dependent of how well we control this problem.

Abnormal Tongue Posture (Tongue Thrust)

1. **“Click”** Place the tip of the tongue in the upper front area of the roof of your mouth, press, and then bring it down forcefully to make a clicking or popping sound. Repeat this exercise as often as possible throughout the day. The tongue will begin to feel more comfortable resting on the palate, rather than between the front teeth.
2. **“Suck”** After practicing the first exercise, place the tongue as if to click , but instead suck air back into your throat. This pulls your tongue backward. Now swallow while pressing the tongue against the roof of your mouth, without allowing the tongue to thrust forward.
3. **“Squeeze”** This is where biting forces come into play. Swallow while biting your teeth together as hard a possible.
4. **“Swallow”** “Take any type of sugarless mint (lifesaver, etc.) and hold it on the roof of your mouth with your tongue. As it dissolves, try swallowing your saliva, keeping the mint against the roof of your mouth and holding the back teeth together while swallowing.

Try to perform the first three exercises 20 times each, at least 4 times a day

It also helps to exercise in front of a mirror, holding the lower lip down so the teeth and tongue are visible.

Another trick is to chew sugarless gum as much as possible

Remember this is a very difficult pattern to change. It will require repeating these exercises many times during the day for many weeks to have any chance of helping...have patience!