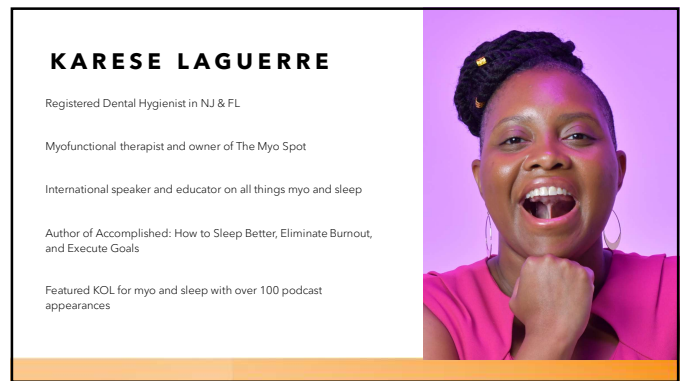




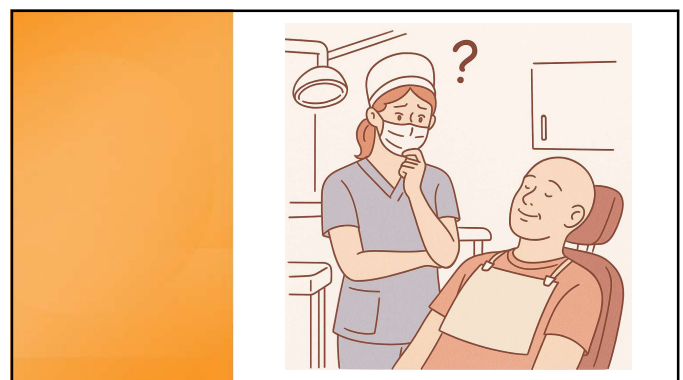
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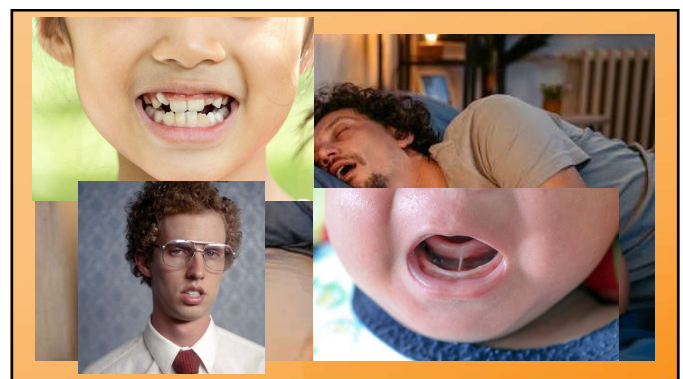
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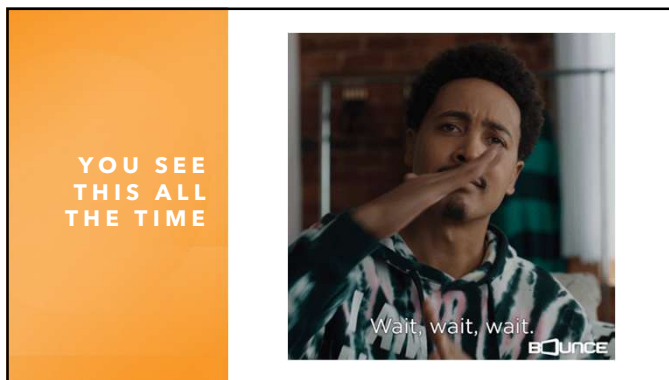
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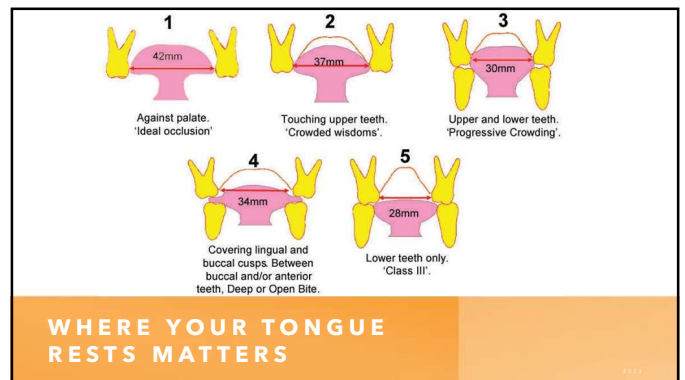
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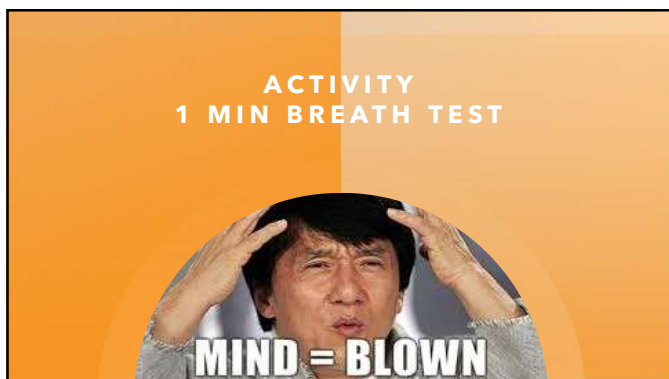
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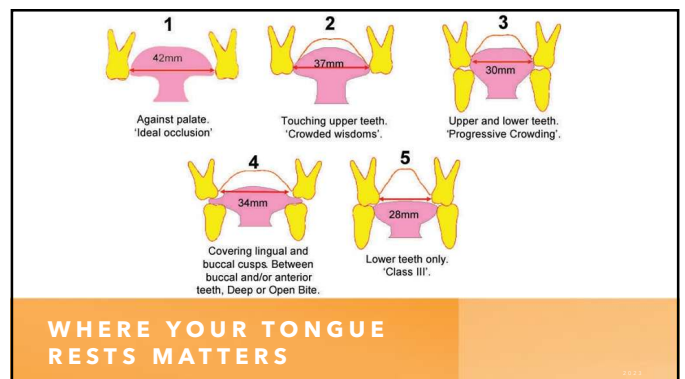
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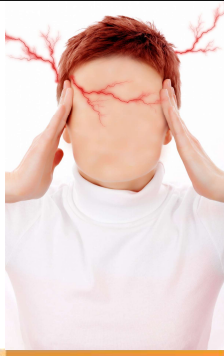
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17

ORAL MYOFUNCTIONAL DISORDERS (OMD)

- An orofacial myofunctional disorder is an inability to utilize proper oral or facial muscle function. Characterized by over or under utilization of muscles when breathing, masticating (chewing) and/or swallowing.



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THIS MANIFESTS AS

Tight musculature

Lip incompetence

Unilateral mastication

Parafunctional habits

Tongue Thrust

TMJ dysfunction

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POSSIBLE HEALTH IMPACTS OF OMDs

Speech disorders

- Lisp
- Articulation problems

Gastrointestinal problems

- Aerophagia
- Reflux

Sleep breathing disorders

- Obstructive Sleep Apnea
- Upper Airway Resistance Syndrome
- Non-restorative sleep (restless sleep)

Psychological disorders

- Anxiety
- Depression

Orofacial Pain

20

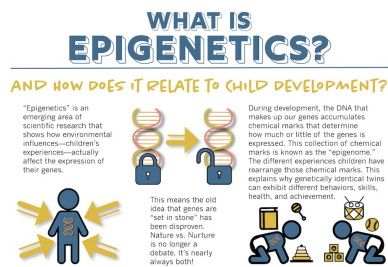
YOU MAY WONDER

HOW DID WE GET HERE?

21

EPIGENETICS

- Nutritive and Non-nutritive factors impact
 - Oral rest posture
 - Oral function
- Oral function and soft tissue pressures impact the bone development of the craniofacial structure and position of the dentition



22

INFLUENCING FACTORS

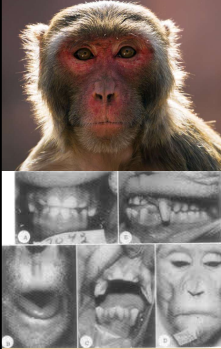
Nature

- Genetics
- Pregnancy & Birth
- Tethered oral tissues
- Muscle tone
- Observed/learned habits
- Environment
- Climate/Allergies

Nurture

- Breastfeeding
- Bottle feeding
- Sippy cup use
- Pacifier use
- Thumb sucking duration
- Chewing habits
- Mouth breathing
- Diet/Allergies

23

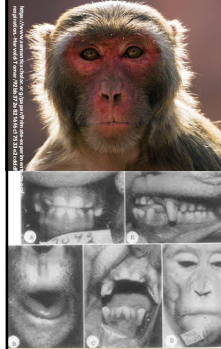


DENTAL AND DEVELOPMENTAL CHANGES

- "Oral respiration associated with obstruction of the nasal airway is a common finding among patients seeking orthodontic treatment. The primate experiments reported here are part of a series designed to test some of the current hypotheses regarding the relationship between mouth breathing and dental malocclusions, that is, between deviations in orofacial muscle recruitment and jaw morphogenesis. Mouth-breathing was developed in the animals of this experiment by obstruction of the nasal passages with silicon nose plugs. The experiments showed that the monkeys adapted to nasal obstruction in different ways. In general, the experimental animals maintained an open mouth. Some increased the oral airway rhythmically, while others maintained the mandible in a lower position with or without protruding the tongue. All experimental animals gradually acquired a facial appearance and dental occlusion different from those of the control animals."

<https://www.semanticscholar.org/paper/Primate-experiments-on-mouth-breathing-Dechow-1982/264-272-413-1982/00006600-8900-3233>

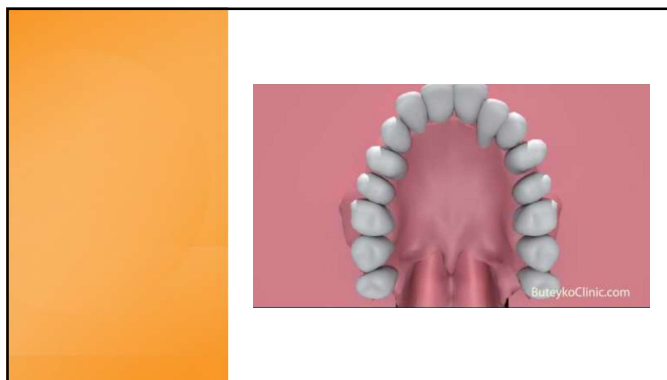
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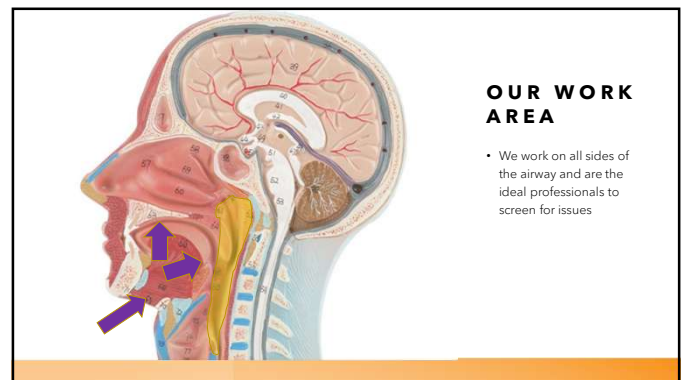
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RDH AIRWAY SUPERPOWERS

- Tactile Awareness
- Visual Acuity
- Orthodontic Knowledge
- Early Identification
- Frequent Touch Points

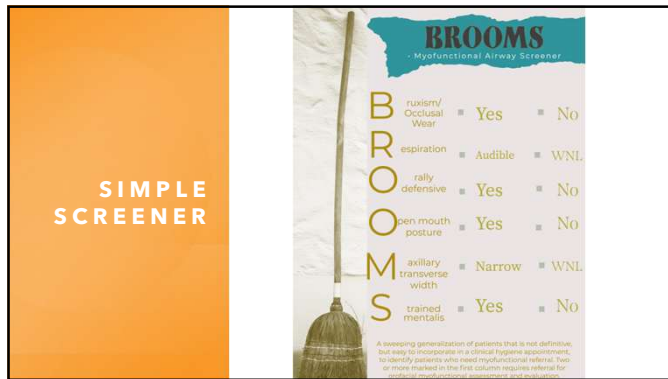


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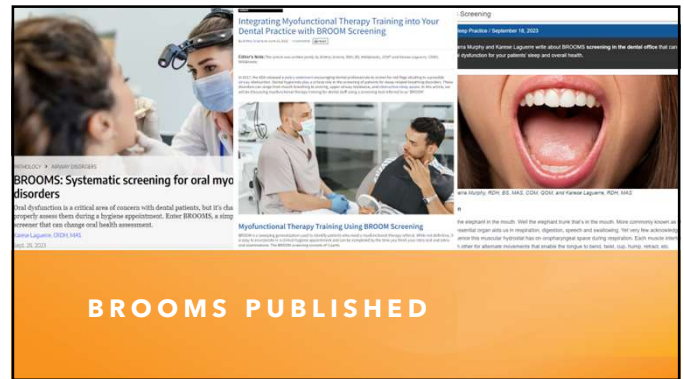
IDENTIFYING THE RED FLAGS



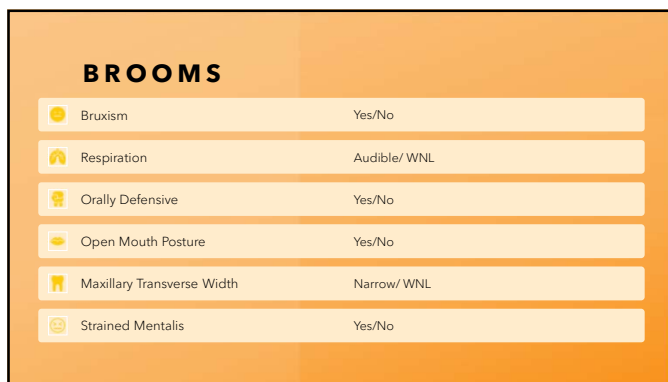
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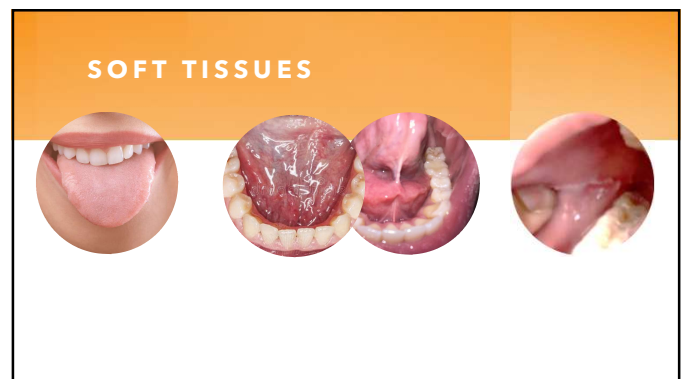
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SMILE - INTRA ORAL		
Letter	Step	What to Look For
S	Soft Tissues	Tongue: scalloped edges, thrusting, frenulum restriction Floor of mouth: tight or elevated Buccal mucosa: linea alba, cheek biting
M	Mobility & Muscle Strength	Tongue mobility: elevate, lateralize, protrude Lip strength: seal at rest, purse and release Soft palate: elevation on "ah"
I	Intraoral Posture	Lip competence: closed at rest vs. open mouth posture Tongue rest posture: against palate or low in mouth Jaw rest posture: dentition closed at rest or apart
L	Levels & Palatal Arch	Arch shape: high-arched or narrow palate Oral classifications: tonsillar hypertrophy, uvula size
E	Evaluate Occlusion & Dentition	Bite classification: Class I, II, III Deep/open bite, crossbites, crowding

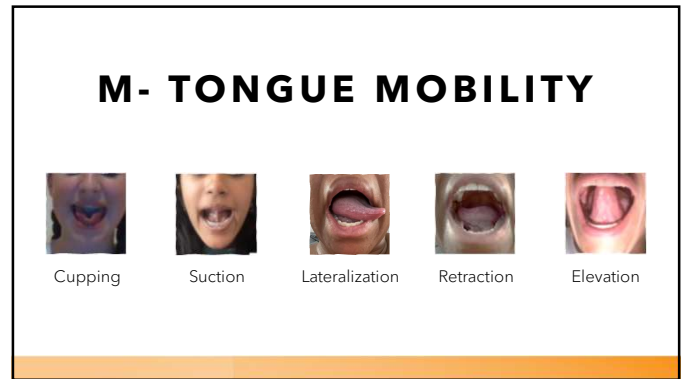
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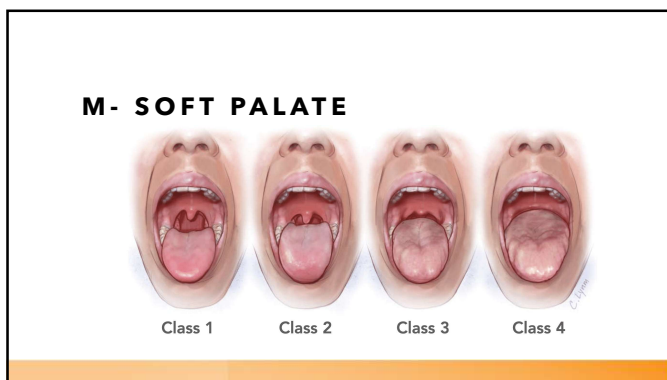
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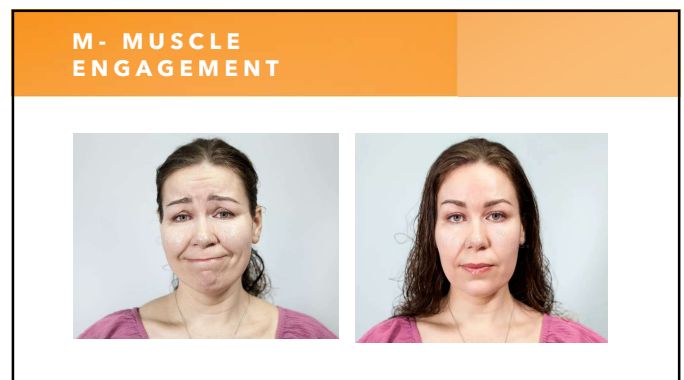
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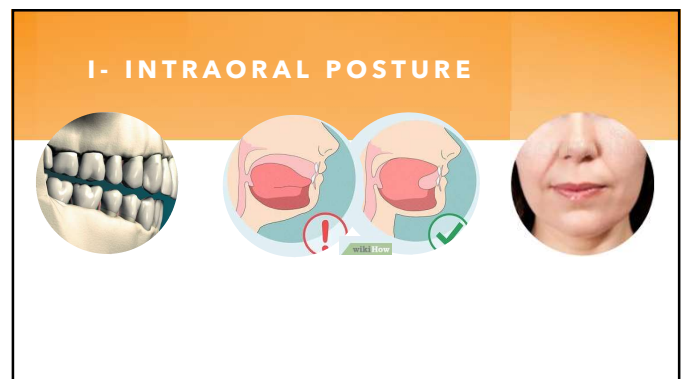
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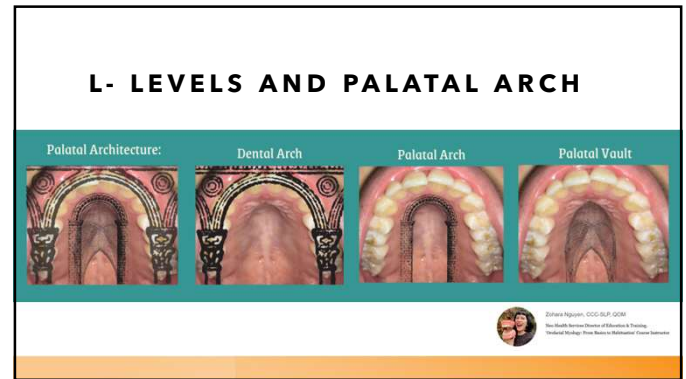
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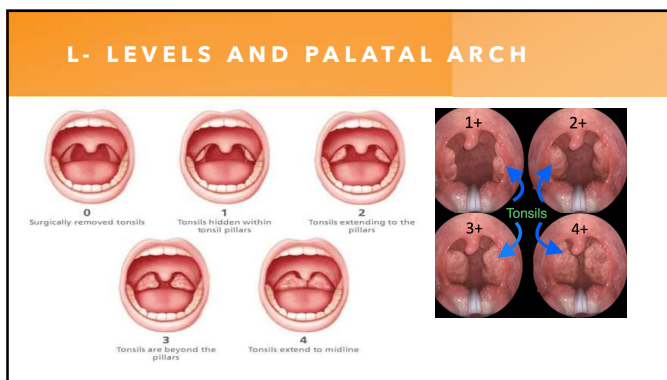
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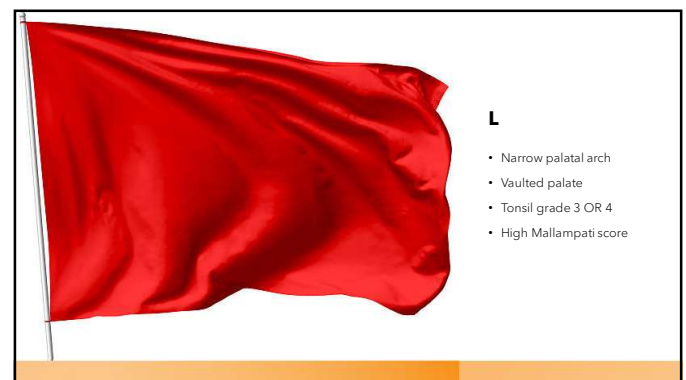
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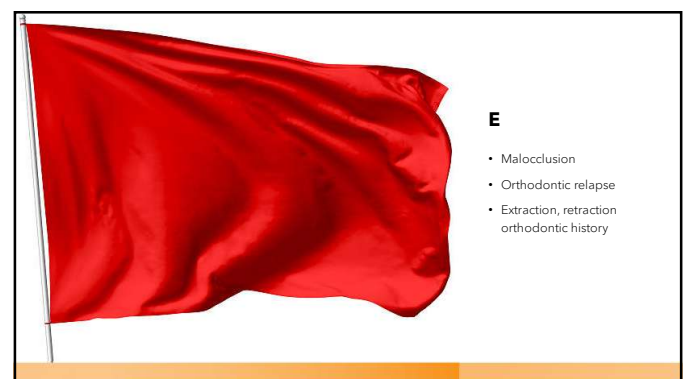
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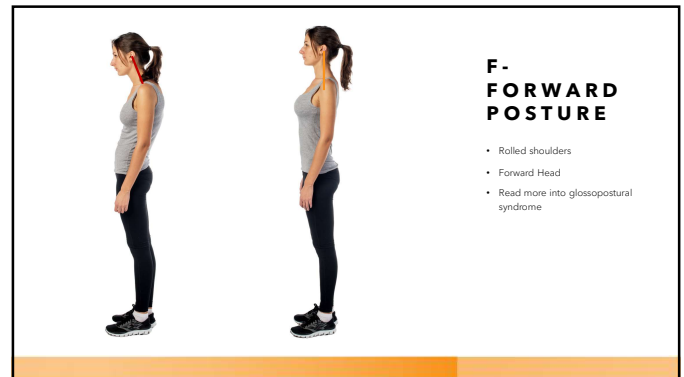


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FACE - EXTRA ORAL

Letter	Step	What to Look For
F	Forward Posture	• Forward head: ears and shoulders not in alignment • Shoulder tension or rounding
A	Airway Observation	• Nasal vs mouth: breathing mode • Audible breathing: is breathing labored or audible • Nasal flaring: does the nostril collapse during inhalation or flare out during exhalation
C	Circumoral Musculature	• Mentalis strain: dimpling or tension along chin • Masseter tension: tight or prominence • Temporal tension
E	Eyes and Face	• Venous pooling: dark circles under eyes • Facial symmetry

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A- AIRWAY OBSERVATION



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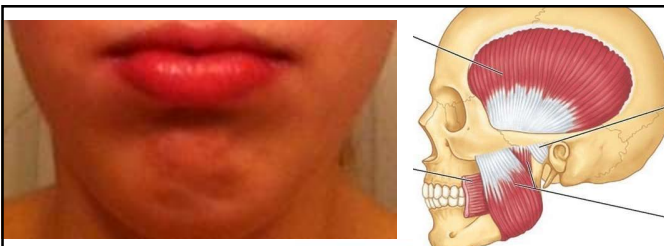
A- AIRWAY OBSERVATION



PHOTO CREDIT: DR. KAMRAN JAFRI

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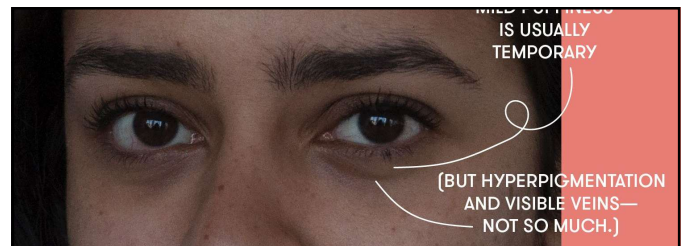
C- CIRCUMORAL MUSCULATURE



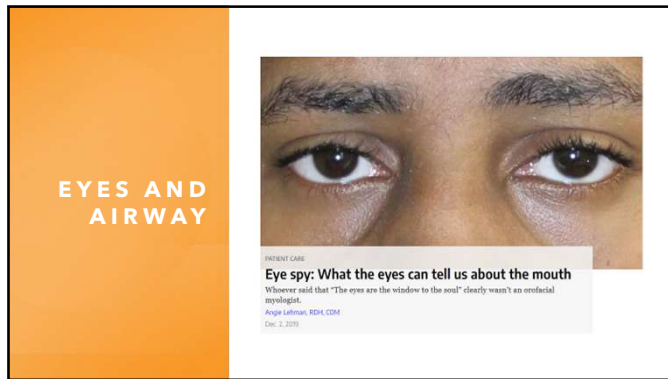
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E- EYES AND FACE

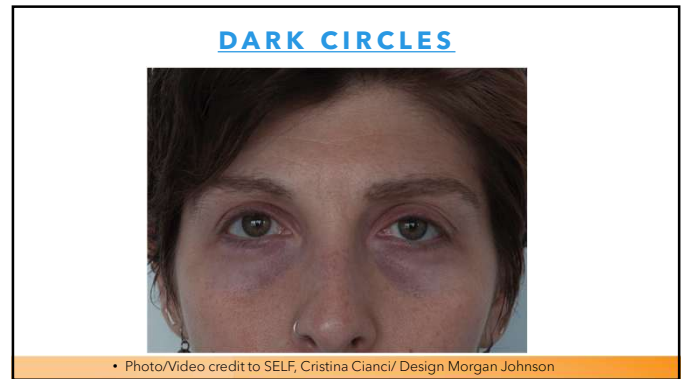
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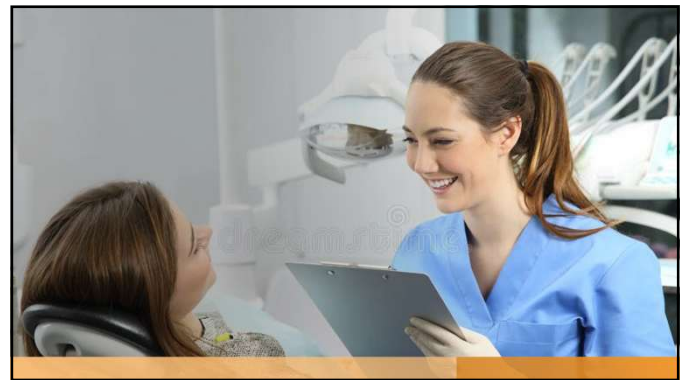
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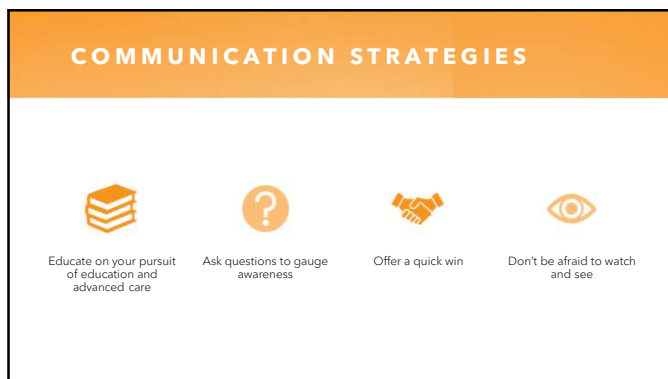
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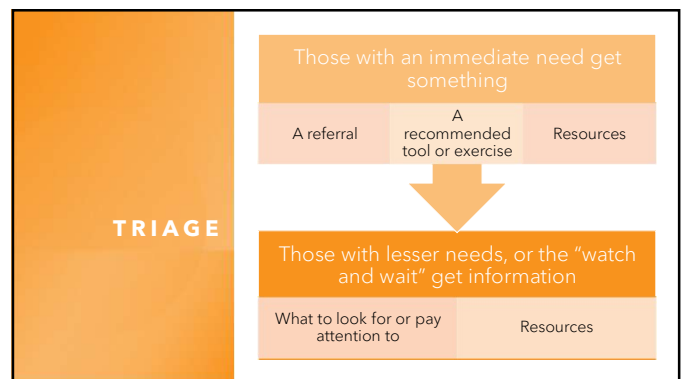
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KEYS TO COACHING

- Active listening (no interrupting or judging)
- Empathy (see their perspective)
- Curiosity (seek to know more, dive deeper)
- Effective Communication



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QUICK WINS



65

MATCHING NASAL HYGIENE PRODUCTS WITH PATIENT TEMPERAMENT & TOLERANCE

Patient Type	Recommendation
Low maintenance, wants quick relief	Nasal inhalers (NetiStik, Olbas, Moxe)
Detail-oriented, willing to follow a routine	Saline irrigation with xylitol (Xlear, NeilMed)
Sensitive to nasal products	SONU band, humidifier, steam therapy
Prone to congestion, needs stronger relief	Hypertonic saline rinse, ClearUP microcurrent therapy
Struggles with dry sinuses/nosebleeds	Aloe based gel (Ayr)

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SLEEP HYGIENE COACHING

- Back to basics, it's all about breathing
- Focus on how you currently sleep
 - Posture
 - Breathing mode
 - Environment



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SMART SLEEP DETECTION

- The FDA has authorized these features as "over-the-counter devices" to assess the risk of sleep apnea, meaning they are available for general use without a prescription.
- The approval allows these devices to monitor breathing patterns and other physiological data during sleep to identify potential signs of OSA.
- The data collected can be used to alert users to potential sleep apnea issues and encourage them to seek professional medical advice.



68

5-6 MAY BE THE STANDARD

- Yetish, Gandhi, et al. "Natural sleep and its seasonal variations in three pre-industrial societies." *Current Biology*, vol. 25, no. 21, Nov. 2015, pp. 2862-2868, <https://doi.org/10.1016/j.cub.2015.09.046>.



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SLEEP HYGIENE COACHING

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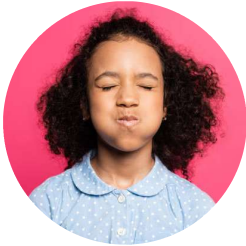




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EXERCISES

- Monkey Mouth (TMJ or extended for lip seal)
- Quiet breathing with tongue depressor (PDR, TMJ)
- Uvula Trampoline (Snoring)



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RESOURCES

- Books
 - *Breath: The New Science of a Lost Art* by James Nestor - Easy to read, engaging, and reinforces the importance of nasal breathing.
 - *Sleep Wrecked Kids* by Sharon Moore - A must-read for parents looking to understand airway health in children.
 - *Airway is Life: Waking up to Your Family's Sleep Crisis* by Meghna Dassani - Ideal for parents who are looking to understand how their struggles and their kids are detrimental.
 - *Accomplished: How to Sleep Better, Eliminate Burnout, and Execute Goals* by Karesse Laguerre- A short and easy read that supports all the content here and your coaching plans



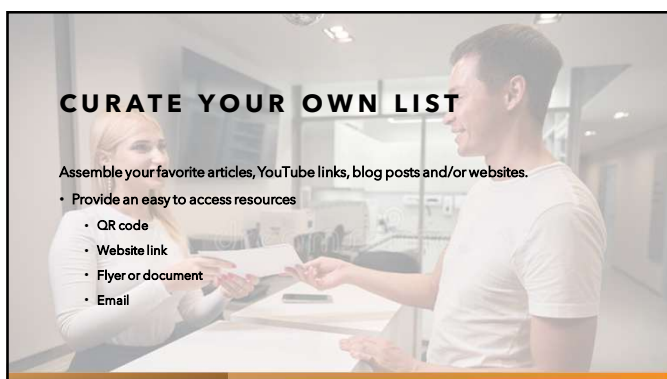



73

CURATE YOUR OWN LIST

Assemble your favorite articles, YouTube links, blog posts and/or websites.

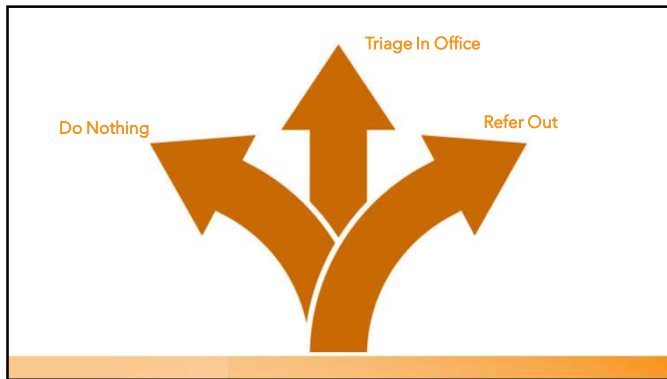
- Provide an easy to access resources
 - QR code
 - Website link
 - Flyer or document
 - Email



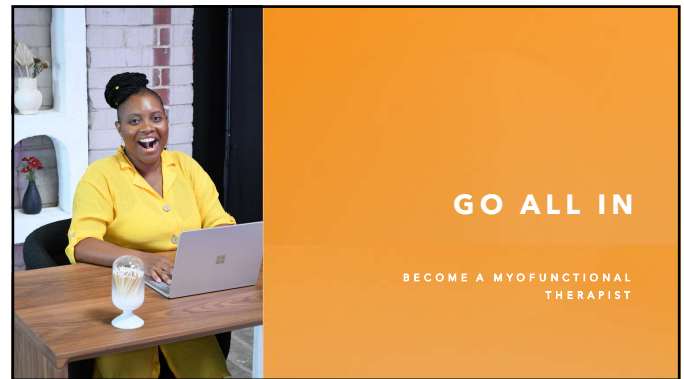
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AIRWAY HYGIENIST VS MYOFUNCTIONAL THERAPIST

Airway Hygienist	Myofunctional Therapist
- Intervenes with abbreviated programs focused on targeted muscular engagement and strengthening - Refers out for complex care and rehabilitative care for orofacial dysfunction - Works within clinical hygiene and licensure	- Implements full programs to eliminate oral dysfunction - Establishes proper oral resting posture - Has to work independently of the RDH license - Works with complex cases on rehabilitative care and surgical prep

78

GOALS

- Proper Oral Resting Posture
 - Nothing else is guaranteed
- Tongue Up
- Lips Closed
- Nasal Breathing

79

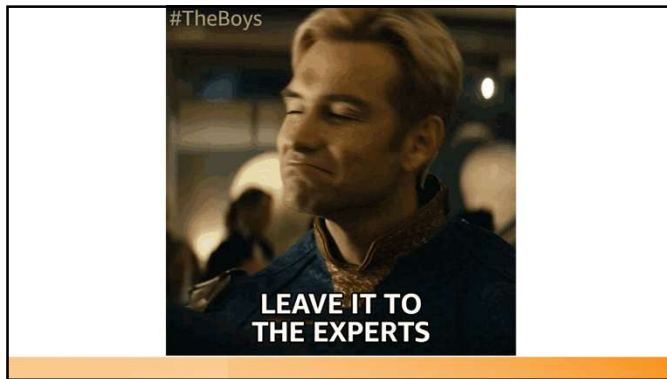


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WHAT CAN AN AIRWAY HYGIENIST DO?

- Nasal Hygiene Protocols and Coaching
- Sleep Hygiene Protocols and Coaching
- Pediatric Mini-Myo Program
- TMJ Muscular Support Program
- Vagal Tone Program
- Breathwork Program
- Orofacial Aesthetic Program
- Orofacial Muscular Stretching and Strengthening Program

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WHERE ARE WE?

- **AAPMD** (American Academy of Physiological Medicine and Dentistry)
- **IAOM** (International Association of Orofacial Myology)
- **AOMT** (Academy of Orofacial Myofunctional Therapy)
- **IAAH** (International Association of Airway Hygienists)
- **Google: Myofunctional Therapist near me**



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HYGIENE IS EVOLVING

“
Knowing is not enough;
we must apply.
Willing is not enough;
we must do.
”

Johann Wolfgang von Goethe

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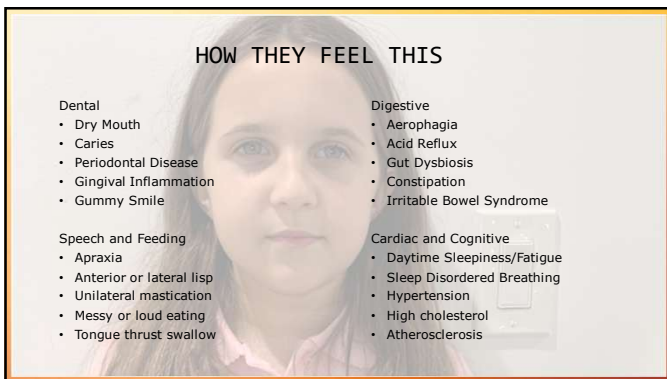
HOW YOU SEE THIS



Extraoral • Allergic shiners • Facial asymmetry • Midface deficiency • Long facial growth • Gummy Smile	Habits • Tongue Thrust • Cheek biting • Lip biting, licking • Bruxism • Thumb sucking
Intraoral • Crowded Teeth • Malocclusion • Vaulted Palate • Scalloped Tongue • Enlarged Tonsils	Behavior • Anxious • Hyperactive Gag • Mouth breathing • Orally Defensive

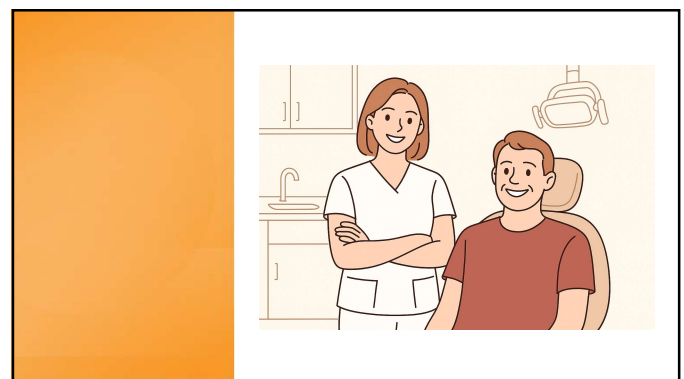
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HOW THEY FEEL THIS

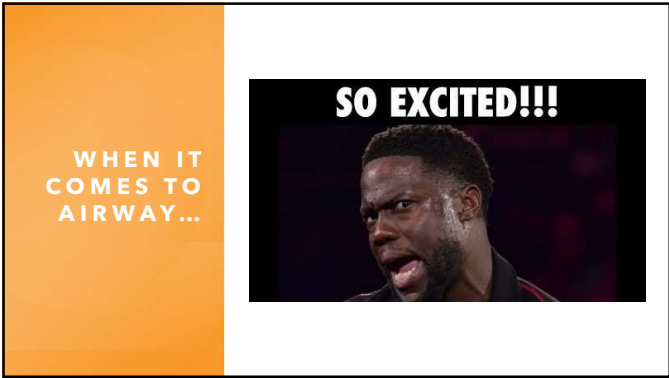


Dental • Dry Mouth • Caries • Periodontal Disease • Gingival Inflammation • Gummy Smile	Digestive • Aerophagia • Acid Reflux • Gut Dysbiosis • Constipation • Irritable Bowel Syndrome
Speech and Feeding • Apraxia • Anterior or lateral lisp • Unilateral mastication • Messy or loud eating • Tongue thrust swallow	Cardiac and Cognitive • Daytime Sleepiness/Fatigue • Sleep Disordered Breathing • Hypertension • High cholesterol • Atherosclerosis

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