

Osteopathy In The Cranial Field AND Dentistry

Osteopathy and Dentistry

The relationship of osteopathy and dentistry was first considered in the 1940s when the founder of the Cranial Concept, W. G. Sutherland D.O., began experiencing problems after a difficult dental extraction. Dr. Sutherland was able to relate what he palpated in his own head with the mechanics of extractions and devise a treatment. His colleagues then began to introduce the ideas of OCF to their dental associates.

Dr. Sutherland stressed the concepts of Osteopathy, including that the body is a unit and that all parts function in the context of the whole. Even the teeth are not separate, from the rest of the body. Dentists who understand this whole body relationship and are willing to work with your Osteopathic physician are said to follow the concepts of dental orthopedics as opposed to orthodontics.

Dental Orthopedics and Orthodontics

Almost everyone has heard of orthodontics, but very few have heard of dental orthopedics - an even better approach.

The difference lies in the underlying philosophy and principles used to treat developmental and biomechanical problems of the face. Dental orthopedics utilizes the concept of "function" an approach much closer to the principles of Osteopathy.

Most orthodontic or dental orthopedic problems occur due to inadequate development of oral volume. The mouth needs to be large enough to allow the tongue to fit. If there is inadequate space for the tongue, the face cannot develop to its optimal dimensions and the tongue cannot work properly. Improper mechanical function of the tongue will ultimately result in teeth that do not fit properly, malocclusion.

Typical orthodontic treatment utilizes braces, introducing compressive forces which can often make the situation worse. Braces do not create the needed space, but just move or cant the teeth out to make them look straighter. This cosmetic result

Orthodontics	Dental Orthopedics
The dentist decides the length of treatment- generally 2 years (works at the dentist's pace)	The body decide the length of treatment (works at the body's pace)
Works with the idea that the dentist knows what is best and decides when and where everything should go	Works with the idea that the body knows what is best and it decides when and where everything should go
Uses large forces over a short period of time to generally move teeth in the bone.	Uses small forces over a long period of time to assist and make space for the body to change.
Moves the teeth in the bone primarily	Allows new bone to grow so teeth are in proper adult relationship
Not very concerned with proper swallowing function	Develops proper swallowing function
Looks mostly at the tooth position	Looks at the whole body and its relationship with the teeth
Airway assessment is not part of evaluation and treatment	Airway assessment is an important part of evaluation and treatment

may appear to be better than doing nothing, however, it has been found to interfere with proper function.

A purely cosmetic approach can actually detract from the general health, especially if teeth are extracted in the process. It is well known that extracting teeth and using brackets and wires (braces) often creates TMJ problems as these individuals mature (85% according to one study).

A number of orthodontists have switched to the Dental Orthopedic approach as it is more physiologically sound and is "osteopathically friendly."

Orthodontists often use palatal expanders to increase the space in the mouth. Though the idea is sound, the execution is limited by the types of devices commonly available. Their limitations in design and application simply cannot properly deal with the subtle complexities of oral function.

Palatal expanders apply large amounts of force over a short period of time, which tends to increase the asymmetry in the mouth and face. Though these devices can expand the back of the palate, they have little effect on the front, which is the most important part of healthy oral function.

These large forces very often create further structural problems, affecting not only the face, but the rest of the head and body as well. ENT problems, difficulty concentrating, and scoliosis, have been observed to occur with commonly used orthodontic devices. While Your orthodontist is certainly trying to help, understanding the systemic affects of orthodontic treatment is not part of their regular education.

Remember that working on the teeth affects the jaw, the rest of the head, and the remainder of the body. One of the tenets of osteopathy recognizes that the body is a unit on all levels and anything that affects one area affects the whole. This is just as true in dealing with dental problems as with any other type of health problem.

A Better Approach

From a functional point of view, the proper approach entails optimizing facial function, which includes chewing, swallowing, and breathing. Through this approach oral volume is increased and dental malocclusions are corrected.

We begin with proper osteopathic evaluation of the structure function relationship of the teeth and face with the rest of the body. Following this evaluation a myofunctional therapist and/or a functional dentist may need to further evaluate the patient.

The therapeutic modalities that may be prescribed include osteopathic treatment (usually first), myofunctional therapy, and the use of advanced lightwire functional (ALF) dental appliances.

The dentist will work with functional light wire appliances that stimulate growth and development of the face as nature intended.

The myofunctional therapist will evaluate proper use of the mouth with regard to breathing, chewing, and swallowing.

The osteopathic physician ensures that both the myofunctional therapy and the dental appliance can maximize their therapeutic forces, allowing treatment to proceed smoothly and with as few obstructions as possible.

Osteopathic treatment will optimize full range of motion of all tissue. Restoring normal motion is essential because many of us to have encountered some type of trauma to the face or head.

Trauma to the head, face, and many times the rest of the body can compromise the effectiveness of any dental treatment. Fortunately the osteopathic physician can diagnosis and treat the trauma efficiently.

Osteopathic treatment is generally continued throughout the whole process, and is usually reduced to once a month or less after the initial set of visits, in order to continue to support the ALF and/or the myofunctional treatment.

Successful treatment of course requires proper compliance.

When should I get my child examined and treated?

The earlier in a child's life that treatment begins, the better.

Though actual pathology may not present until much later, dental malocclusions can often be diagnosed as young as 2 years old. These problems can be addressed at any age, however, the optimal time to begin treatment should occur during the rapid growth of the individual (before 12 years old for girls and 14 years old for boys).

Nutrition is also important, as poor diet interferes with bone growth. Also, bone metabolism slows with age. The older an individual gets, the longer treatment time may be necessary.

The longer a malocclusion is present, the greater the degree of facial dysfunction. Because facial growth and development is intimately related to total body biomechanical function, children can

be saved from a lifetime of problems if treatment begins early.

If it is not managed optimally, many more long-term problems may persist throughout life.

The cause of "Orthodontic" problems?

There are many causes of "orthodontic" problems. Most commonly, these problems are created after the age of 2 years, when the tongue cannot contact the roof of the mouth while swallowing. Significant factors might include prolonged nursing, bottles, thumb/finger sucking, sippy cups, pacifiers, nail biting, mouth breathing, etc.

What type of problems is this good for?

The most common types of dental related problems that DOs can help are:

"Orthodontic problems" including malocclusion, crossbite, overbite, underbite, and open bite. Other problems might include TMJ syndrome, tongue thrust, pain or problems following dental work, snoring, sleep apnea, airway narrowing, facial pain, etc.

What are the advantages of using Osteopathic treatment with dental work

Osteopathic treatment can be extremely useful in maintaining health, treating injury, and preventing potentially life long problems. Please keep in mind that this multidisciplinary approach is relatively new and that there are a limited number of practitioners available. Consult your physician.



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