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Evaluation of a new concept of myofunctional therapy in children.

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This prospective study was designed to evaluate a new concept of myofunctional therapy in comparison with conventional myofunctional therapy. 45 children aged three to sixteen years in need of myofunctional therapy were randomly divided into two groups: 19 children were referred to myofunctional therapy in private practices in Hamburg and served as controls. The remaining 26 children were treated with face former therapy at the Department of Orthodontics by a medical assistant specializing in myofunctional therapy. The overall observation time was six months. Every three months an overall clinical assessment was performed at the Department of Orthodontics by a speech pathologist and an orthodontist, who documented the clinical situation. The clinical examination included measurement of lip strength, palatography to document the swallowing pattern, logopedic diagnosis, and an orthodontic examination with reference to a standardized diagnostic sheet. In all children's orofacial function could be improved. Children treated with the Face Former showed a statistically significant improvement in palatal tongue position during swallowing. They achieved stronger lip pressure within a shorter time than children who did not use the Face Former. However, at the end of the observation time there was no statistically significant difference in lip strength between the two groups. Habitual mouth closure was also achieved within a shorter time for children treated with the FaceFormer than children with myofunctional therapy. Face Former therapy seems to offer a good alternative to conventional myofunctional therapy. Longitudinal studies will follow to judge whether the established orofacial balance could be stabilized, i.e. the established physiological orofacial function becomes automatic.

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