## Rev Belge Med Dent. 1994;49(4):9-17.Links

## [Could facial growth be influenced by neuromuscular therapy? Should one propose respiratory therapy or is it preferable to do nothing?]

[Article in French]

## Tourné L.

For at least a century, controversy has existed in the dental and medical fields regarding the level of significance to be ascribed to a predominantly oral breathing pattern on craniofacial growth and development. One school of thought holds that severely limited nasal breathing produces physiologic postural changes in the head and neck, which would have a direct effect on craniofacial growth, leading to the so-called Long Face Syndrome or Adenoid Facies. This point of view implies that significant growth changes can be obtained by therapeutically altering the oro-facial neuro-muscular behaviour of the patient. The purpose of this paper is to critically analyze the clinical and experimental evidence regarding this controversy. Based on our present state of knowledge, one can't but conclude that neuro-muscular therapy or reeducation as a sole therapeutic measure is only of limited clinical importance.

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