



[Angle Orthod.](#) 1979 Apr;49(2):98-103.

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Facial deformity: a preventable disease?

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By training, the orthodontist is uniquely qualified to be the primary monitor of facial growth. He should assess the mode of respiration at approximately two years of age and confer with the pediatrician, allergist and otolaryngologist to institute appropriate medical management of any developing problems. He must educate his colleagues in medicine and dentistry to recognize those conditions that can produce facial deformity. The primary care physician should appreciate that obstruction of the nasal airway is an important dysfunction. Medical and surgical intervention and, above all, good preventive management must be instituted to promote patency of the nasal airway. Allergy is a disease of modern man. It is possible that better prenatal care, breastfeeding, the avoidance of common allergens, and appropriate surgical and medical management to reduce the incidence of respiratory obstruction in growing children will result in fewer cases of cleft lip and palate and other craniofacial anomalies.

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