CLINICAL INDICATORS FOR SLEEP DISORDERED BREATHING AND OBSTRUCTIVE SLEEP APNEA (SDB/OSA)

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SOME SOURCES COURTESY OF DR. JIM BRONSON
1. TIGHT LINGUAL FRENUM (ANKYLOGLOSSIA)

Short anterior frenulum lead to abnormal feeding behavior and speech development.

Assessment of lingual frenulum lengths in skeletal malocclusion.


All children in study with untreated short frenulum had SDB. All had narrow high palate.

Pediatric sleep-disordered breathing: New evidence on its development.

2. HIGH NARROW PALATE

MAXILLARY MORPHOLOGY IN OBSTRUCTIVE SLEEP APNEA: A CEPHALOMETRIC AND MODEL STUDY.

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/15529500
SDB CAN BOTH RESULT FROM AND BE WORSEned BY NASAL OBSTRUCTION

THE NOSE AND SLEEP-DISORDERED BREATHING: WHAT WE KNOW AND WHAT WE DO NOT KNOW

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/14665515
3. UPPER AIRWAY RESTRICTION

CRANIOFACIAL AND UPPER AIRWAY MORPHOLOGY IN PEDIATRIC SLEEP-DISORDERED BREATHING AND CHANGES IN QUALITY OF LIFE WITH RAPID MAXILLARY EXPANSION

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/24286909

CRANIOFACIAL MORPHOLOGICAL CHARACTERISTICS IN CHILDREN WITH OBSTRUCTIVE SLEEP APNEA SYNDROME: A SYSTEMATIC REVIEW AND META-ANALYSIS

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/23449902
4. MOUTH BREATHING

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Primary snoring and obstructive sleep apnea are frequent findings in mouth breathing children.

Open-mouth breathing during sleep is a risk factor for obstructive sleep apnea (OSA) and is associated with increased disease severity and upper airway collapsibility.
5. ENLARGED TONSILS

IF NASAL BREATHING IS NOT RESTORED, DESPITE SHORT-TERM IMPROVEMENTS AFTER ADENOTONSILLECTOMY, CONTINUED USE OF THE ORAL BREATHING ROUTE MAY BE ASSOCIATED WITH ABNORMAL IMPACTS ON AIRWAY GROWTH AND POSSIBLY BLUNTED NEUROMUSCULAR RESPONSIVENESS OF AIRWAY TISSUES.

HTTP://WWW.LEARN AIRWAYDENTISTRY.COM/REFERENCES/OSA-ORAL-BREATHING-2014-PEDIATRICS-NEONATAL-BIOLOGY-001.PDF

OBSTRUCTIVE SLEEP APNEA IN INFANTS AND YOUNG CHILDREN

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/8714340
6. LONG FACE HEIGHT

CRANIOFACIAL AND UPPER AIRWAY MORPHOLOGY IN PEDIATRIC SLEEP-DISORDERED BREATHING AND CHANGES IN QUALITY OF LIFE WITH RAPID MAXILLARY EXPANSION
HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/24286909

CRANIOFACIAL MORPHOLOGICAL CHARACTERISTICS IN CHILDREN WITH OBSTRUCTIVE SLEEP APNEA SYNDROME: A SYSTEMATIC REVIEW AND META-ANALYSIS
HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/23449902
7. VERTICAL POSITION OF THE HYOID

HETEROGENEITY IN VERTICAL POSITIONING OF THE HYOID BONE IN RELATION TO GENIOGLOSSAL ACTIVITY IN MEN.

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/15264645
8. CROSSBITE AND OPEN BITE MALOCCLUSION

SLEEP-DISORDERED BREATHING AND ORTHODONTIC VARIABLES IN CHILDREN—PILOT STUDY

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/25242700
9. RETRUDED MAXILLA AND MANDIBLE

CRANIOFACIAL MORPHOLOGY IN PEDIATRIC PATIENTS WITH PERSISTENT OBSTRUCTIVE SLEEP APNEA WITH OR WITHOUT POSITIVE AIRWAY PRESSURE THERAPY: A CROSS-SECTIONAL CEPHALOMETRIC COMPARISON WITH CONTROLS

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/23810049
10. TEETH AGENESIS

IF THERE ARE MISSING TEETH, THERE IS ABNORMAL GROWTH OF THE FACE AND SECONDARY DECREASE OF SIZE OF UPPER AIRWAY

GUILLEMINAULT C, BORDEAUX, FRANCE, JANUARY 2016

PEDIATRIC SLEEP-DISORDERED BREATHING: NEW EVIDENCE ON ITS DEVELOPMENT

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/26500024
11. SCALLOPED TONGUE INDICATOR OF OSA

TONGUE SCALLOPING WAS ALSO ASSOCIATED WITH PATHOLOGIC POLYSOMNOGRAPHY DATE AND ABNORMAL MALLAMPATI GRADES

THE ASSOCIATION OF TONGUE SCALLOPING WITH OBSTRUCTIVE SLEEP APNEA AND RELATED SLEEP PATHOLOGY

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/16360522
12. GERD AT RISK FOR SLEEP APNEA

There is a significant association between disturbed sleep and GERD and this may be directional. Sleep disorders may induce GI disturbances, while GI symptoms also may provoke or worsen sleep derangements.

GASTROESOPHAGEAL REFLUX DISEASE AND SLEEP DISORDERS: EVIDENCE FOR A CAUSAL LINK AND THERAPEUTIC IMPLICATIONS

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2879818/
13. RESTRICTED FLOW AFTER WISDOM TEETH EXTRACTION

PEDIATRIC SLEEP-DISORDERED BREATHING: NEW EVIDENCE ON ITS DEVELOPMENT

HTTPS://WWW.NCBI.NLM.NIH.GOV/PUBMED/26500024