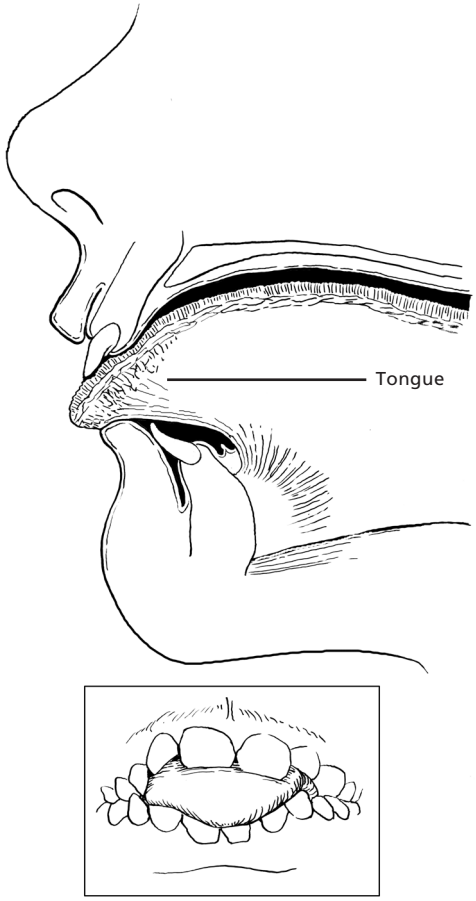
Let's Talk About...

Tongue thrust disorder



What is a tongue thrust?

A tongue thrust is when the tongue pushes against or between the teeth while your child is at rest, swallowing, or talking. The child does not use the muscles of the mouth, lips, jaw, or face correctly. Speech therapists call this an **orofacial myofunctional disorder** (or-oh-FAY-she-awl my-oh-FUNK-shen-nal dis-order) or **OMD**. The most common OMD is tongue thrust. This can cause dental and speech problems.

Most infants push their tongues forward to swallow. Most children change to a normal swallow by age six. If this change does not happen, the tongue pushes against the teeth as the child swallows. This habit is hard to change without help from a professional.

What causes a tongue thrust disorder?

Speech therapists think a tongue thrust may happen because of the following:

- Long-term thumb or finger sucking
- Long-term cheek or nail biting
- Long-term tooth clenching or grinding
- Other family members have had this, too
- Physical or structure differences of the lips, tongue, cheek, or jaw
- Nerve or development difficulties

What are the signs of a tongue thrust?

If your child has a tongue thrust disorder, he may have one or more of these:

- High palate (high roof of the mouth)
- Speech problems
- Tongue rests in the wrong position
- Open lips when in a resting position
- Prolonged sucking habit
- Food chewing problem
- Having or needing orthodontic treatment

Who should treat my child and when should my child be treated?

A speech therapist, who specializes in treating children, should help treat tongue thrust.

Your child may begin treatment at about eight years of age. The treatment's success of depends on you

and your child's motivation to follow exercises at home. Please note: Your child must stop thumb or finger sucking before beginning treatment.

What treatments will my child receive?

Your child will have an evaluation from a speech therapist. The therapist will work with you to set up a treatment plan. Usually, the treatment is ten 30-minute sessions. Sessions are scheduled every week or every other week. After that, there are two 30-minute follow-up sessions in the next three to four months. While in treatment, your child will learn the proper mouth resting position and how to swallow saliva, liquids, and solid foods correctly. Your child will receive activities and exercises each week to complete at home. The key to learning correct habits is doing the activities and exercises .

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