Therapy kills thumb sucking habit

By SUZIE ROLLINS

What do some thumb suckers, people with broken jaws, teens in braces and denture wearers have in common?

They may have problems swallowing, which forces their tongues to pus against their teeth, causing the teeth to

But it's not necessary to live with the problem, according to Christine Ste-vens, because therapy can alleviate the problem.

"Tve treated patients from 5 years old to 56 years old," she says. "I can help them retrain their weak facial muscles and alleviate their mouth breathing problems, as long as they aren't medical problems."

aren't medical problems."

Ms. Stevens is a "myo-functional" therapist, one who works with facial muscles and deviate swallows. She sees 15-20-patients a day in Troy and Dearborn, helping them to develop an awarpness and correct their swallowing problems.

Obvious syn ptoms are full, weak lips appearing flabby; constantly particulation, and the state of the swallow in the state of the swallow in the swallow

THUMB SUCKERS between the ages

On the child's first visit to therapy, Ms. Stevens talks to him and deter-mines if he is serious about breaking

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'If the child accepts help he can stop sucking his thumb within 10 days.

— Christine Stevens, myo-functional therapist

his habit. She explains why it's necessary to stop thumb sucking and sends the patient home with a book about the bad habit. When the child returns for the second visit, they discuss the book.

"If the child hasn't read the book, I send him home and tell him to come back when he is motivated to change," Ms. Stevens explains. "I have to get them to admit the problem and then we can correct it."

Positive reinforcement and motiva-tions are the keys to correcting the habit, she says, and parents are asked to take an active role. Ms. Stevens says to take an active role. Ms. Stevens says she works on a reward system, letting the children hang their pictures on her office wall, and giving them gift certificates and ice cream.

"They all make posters about quit-ting thumb sucking and I put them all on a big bulletin board in my office," she adds.

sne adds.

INTENSIVE THERAPY — two sessions a week — lasts for three months.

Then seven months of scattered appointments are devoted to maintenance therapy. The cost of the one-hour diagnostic visit is \$25 and fees are determined by each case.

School-aged patients are treated af-ter school because she doesn't like

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them to miss their regular and extra-curricular activities to come for therapy "I want their therapy to be a regu-lar part of their life, not a chore."

People who have had broken jaws seek Ms. Stevens' help, so they can open and close their mouths without aggravating the side opposite the break.

"I help them train their muscles to compensate for the break or fracture," she says. "Anything is possible with motivation and strength."

Denture wearers are forever com-plaining about their dentures slipping and clicking together, she says. They constantly try new gripping glues to no avail

"Ninety percent of the cases are not denture problems but rather it's the tongue that is pushing against the teeth. Through muscle therapy, we can correct the problem."

Orthodontists refer a large majority of cases to Ms. Stevens. She says many teenagers with braces can have a deviate swallow and not know it. Once their braces can removed, and their tongues resume pressing against their teeth, the ceth can move back to their original out-of-line positions if the problem hasn't been corrected.

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"I work as a helper to the orthodomistist. I work with the patient before, during and after his braces to retrain his muscles," she explains.

There are only about 10,000 myo-functional therapists in the country, Ms. Stevens says. In addition to orthodomists, she gets referrals from dentists, oral surgeons, pediatricians and speech therapists.

Ms. Stevens is certified speech therapist who loves children and enjoys helping them on an individual basis.

The control of the control of

That was five years ago. Now, Ms. Stevens attends classes two months a year, to keep up on new techniques and equipment.

"I try to establish the new conscious habit I instilled in the patient to a sub-conscious training that they use in home and school. I gear my training to everyday living situations."

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As a myo-functional therapist, Ms. Stevens helps thumb suckers, broken-jaw victims, teens in braces and denture wearers alleviate their swallowing problems. (Staff photo by Charlie Kidd)



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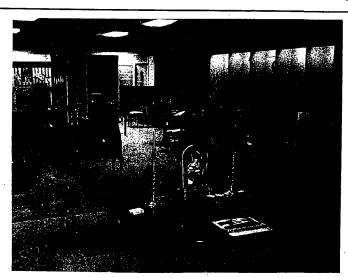
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