

Name Fawad Ahmad.

ID 13784.

Program BS D.T.
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Department AHS

Subject Orthodontics

assignment → ~~Mam Salma~~
viva.

Instructor Mam Salma. Ishag.

Date

~~Fawad Ahmad~~

❖❖ Parafunctional Habits: ❖❖

- A parafunctional habit is the habitual exercise of a body part in a way that is other than the most common use of that body part.

The term is most commonly used by dentist, maxillofacial specialist, orthodontist, as refer to parafunctional uses of the mouth, tongue and jaw.

- The term oral parafunctional habit is used to describe any abnormal behaviour of functioning of the oral structure and associated muscle.

Abnormal behaviours commonly include, ("bruxism) clenching, excessive gum chewing, Lip Nail biting or Non Nutritive sucking.

❖❖ Various Habits ❖❖

- Thumb sucking
- Tongue thrusting.
- Mouth breathing
- Bruxism
- Nail biting.
- Lip biting.

(1) Thumb Sucking ❖❖

- It is defined as placement of the thumb or one or more fingers and varying as depth into the mouth.

- This habit which persists as considered normal age of "3" and half to "4" years.

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Diagnosis:

- Intra oral Examination
- Presence of clean Nail and callus on The fingers.
- child's emotional status should be assessed.
- should be question on The duration of The Habits.

Management:

- Parent should be counseled to provide The child with adequate love and affection.
- Parent and dentist should be seek to motivate The child.

(2) Tongue Thrusting Habits

It is defined as the condition in which the tongue makes contact with any teeth anterior to the molars during swallowing.

•• Clinical Feature

Extraoral

- Lip posture
- mandibular movements
- speech

••• Intraoral:

- Tongue posture
- Tongue movements
- malocclusion on maxilla,

❖❖ Diagnosis

❖ History :- Determine swallow pattern of parents to check for hereditary etiological factors.

They regarding to information of respiratory infection, sucking habits.

Finally past and present information regarding to overall habits, in interest, motivation, of patient should be noted.

❖❖ Examination

• Patient seated upright

• A little water is placed in mouth and patient is asked to swallow it.

3 :: Mouth Breathing Habits ::

- Mouth breathing is Habitual respiration through the mouth instead of the nose.

:: Clinical Features ::

- Facial appearance of child with mouth breathing habits as termed as Adenoid Facies.
- Short upped lip.
- Increase incidence of caries.
- Chronic marginal gingivitis.
- Palatal vault is high.
- Nose tipped superiorly.

:: Diagnosis "History" ::

- The parents can be questioned whether the child adopt frequent lip apart posture,
- frequent occurrence of tonsillitis allergic rhinitis.

Management

- The gingivae of the mouth breathers should be restored to normal health by coating.

- Nasal or pharyngeal obstruction has been diagnosed then removal of the cause is done by surgery.

- Physical Exercise
- Lip exercise

- Oral ~~Screen~~ Screen.

(4)

Bruxism

- Bruxism is Habitual grinding of teeth when the individual is not chewing or swallowing.

(5) Lip Habits

- Habits involve The manipulation of lip and perioral structural or termed as lip Habits.
- The etiology as malocclusal, Habits, emotional stress,
- Lip biting.

(6) Nail biting

- It is most common habits in children
- It is sign of internal tension.

Clinical Feature

- crowding, Rotation,
- Alteration of incisal edge or incisor
- inflammation of Nail beds.