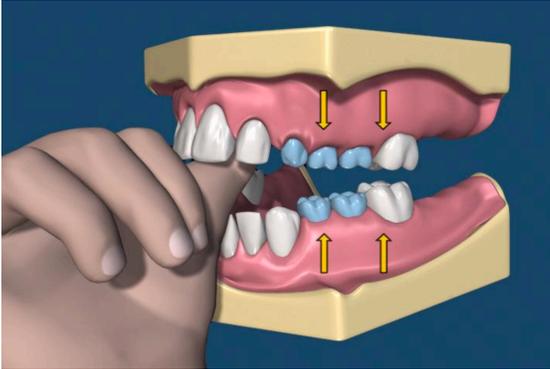
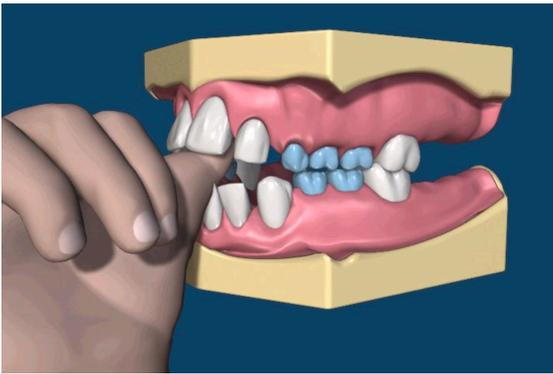


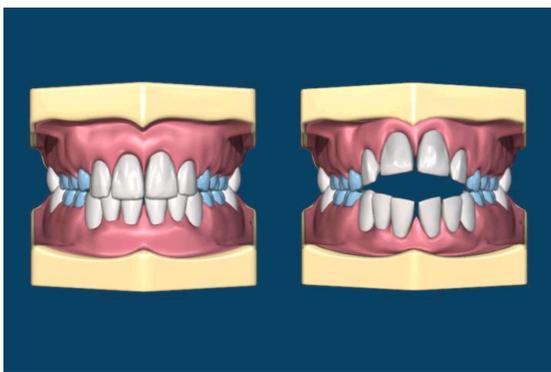
Thumb Sucking



Thumb sucking can force the front teeth apart and allow the back teeth to grow together, causing an open bite.



The open bite provides a comfortable resting spot for the thumb and continues to reinforce the sucking habit.



Before (left) and after (right). The effects of thumb sucking. The space between the front teeth is called an open bite.

The Effects of Thumb Sucking

How soon should I worry about thumb sucking?

When the permanent teeth begin to erupt or grow into the mouth, any interference with their natural course of development can cause shifting in tooth and jaw alignment. Most patients can expect their front teeth to erupt around age 7. If your child has a thumb or finger sucking habit at this age, the American Association of Orthodontists recommends you see an orthodontic specialist for an evaluation.

What are my options to correct the habit?

Sometimes positive reinforcement and commitment to quitting will resolve the problem. In other situations, referral to an orofacial myologist (like a physical therapist for the mouth) can help your child quit the habit without braces. As a final option, orthodontic treatment including a habit appliance can be used to break the habit and prevent the unwanted side effects from thumb or finger sucking.

What are the benefits of correcting the problem early?

When a thumb or finger habit causes shifting in the alignment of the teeth and jaws, correction cannot happen soon enough. Early detection by your dentist and early referral to an orthodontist can prevent significant treatment later in life, sometimes allowing patients to avoid jaw surgery. If in doubt, schedule a consultation with Dr. Burleson to determine if your child can benefit from early treatment.

A Final Word on Thumb Sucking by Dr. B

As a “rule of thumb” (pun intended), young children with baby teeth (only) can sometimes be monitored for negative side effects on the teeth and jaws, but might not require orthodontic treatment. In this “watch and wait” period, your child might outgrow the habit and not require orthodontic treatment. You should consult with your pediatrician, however, as there are serious bacterial and viral infections that can be more common when a child’s hands are in and out of the mouth. Start early and seek the advice from your pediatrician and orofacial myologist on the best ways to “kick the habit” as quickly as possible.