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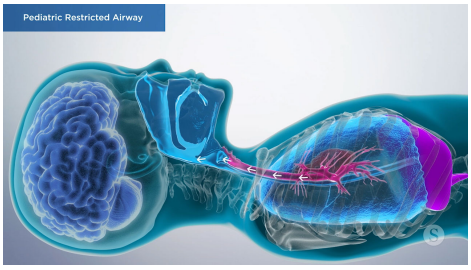
Pediatric Restricted Airway



Proper breathing is critical to the health and development of a growing child. Having an upper airway that lets oxygen flow freely into and out of the lungs is necessary for healthy development and overall well-being.

But, if a child's upper breathing passages are narrow or blocked, it makes breathing more difficult.

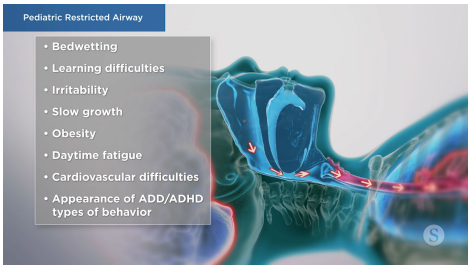
During sleep a lack of the necessary oxygen puts a strain on the heart and brain and may cause developmental complications.

Your dental provider plays a crucial role in identifying airway problems. They are often the first health professional to identify airway dysfunction because of the signs that can be observed within the mouth.

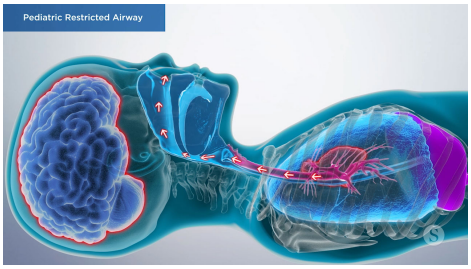
A child's airway may be restricted due to certain anatomic features, such as a small mouth or throat, overly large tonsils or adenoids or an elongated uvula and soft palate.

A blockage of the upper airway during sleep is often due to the relaxation of the tongue and soft palate moving to the back of the mouth.

Potential signs of a restricted airway include tooth grinding, tooth decay, crowded teeth, nasal issues, mouth breathing and snoring.



If left untreated, the constant strain placed on the heart and brain, coupled with poor sleep quality, can result in bedwetting, learning difficulties, irritability, slow growth, obesity, daytime fatigue, cardiovascular difficulties like high blood pressure, and even the appearance of ADD/ADHD types of behavior.



Given the potentially serious complications arising from restricted airflow, it is critical to work closely with your doctor to develop a treatment plan that meets the child's unique needs and improves their overall health, development and well-being.