

## Dental/Oral Health and Sleep Apnea

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Let's begin with the American Dental Association (ADA) definition of dentistry and oral health.

"The evaluation, diagnosis, prevention, and/or treatment (nonsurgical, surgical or related procedures) of diseases, disorders and/or conditions of the oral cavity, maxillofacial area and/or the adjacent and associated structures and their impact on the human body; provided by a dentist, within the scope of his/her education, training and experience, in accordance with the ethics of the profession and applicable law."

"Oral health is a functional, structural, aesthetic, physiologic and psychosocial state of well-being and is essential to an individual's general health and quality of life."

According to the National Institute of Dental and Craniofacial Research (NIDCR), "oral health" means much more than healthy teeth. The oral, dental, and craniofacial tissues, collectively known as the craniofacial complex, are tissues whose functions we often take for granted allow us to speak and smile; sigh and kiss; smell, taste, touch, chew, and swallow; cry out in pain; and convey a world of feelings and emotions through facial expressions. They also provide protection against microbial infections and environmental insults.

A Mayo Clinic proceeding states that, "Obstructive sleep apnea is a disorder in which a person frequently stops breathing during his or her sleep. It results from an obstruction of the upper airway during sleep that occurs because of inadequate motor tone of the tongue and/or airway dilator muscle."

Structures of the oral cavity include the tongue muscles, the tone of which, control the opening and obstruction potential of the airway, obviously, most crucial to one's General Health. Why does the NIDCR not include allowing us to breathe as a function of the tongue, an oral and craniofacial tissue or the Mayo Clinic proceeding not recognize it's the uniqueness of one's craniofacial anatomy's impact upon the motor **tone** of the tongue, thus the airway?

Dental anatomy of the Jaw-tongue-throat complex controls the airway, thus airflow and ease of breathing. A symptom of compromise of this while asleep is referred to as obstructive sleep apnea, while awake, the most critical, yet overlooked symptom of this is stress or the "stress response".

It is time for the dental profession to join with the medical profession to understand the intricacies of dental anatomy and its round-the-clock influence on the airway, thus our ability to thrive and survive.