



MYOBRACES



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Myobrases

When children are aged five, it frequently becomes evident that they have crooked teeth and poor jaw development. Often, the problem is attributed to genetics, but we now know these issues are most likely due to other causes.

What Can Cause Crooked Teeth?

Modern research indicates many orthodontic problems are due to poor myofunctional habits. These are habits such as thumb or finger sucking, mouth breathing and tongue thrusting. Asthma, an open mouth posture and allergies can contribute to poor jaw and facial development.

Poor jaw development reduces available space for optimal tooth eruption. Teeth are more likely to come through crooked and overcrowded, a problem known as malocclusion.

Traditionally, orthodontic treatment for malocclusion is delayed until a child is aged twelve and has most or all their permanent teeth. Adult teeth are larger than a child's primary or milk teeth and are less able to fit correctly into a jaw that has not developed properly. Treatment focuses on straightening these teeth but does not address the underlying problem of incorrect jaw development, and often, healthy permanent teeth are extracted to create more room in the jaw.



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Why Choose Myobrace Treatment?

Myobrace is a preventive orthodontic treatment suitable for children aged three to fifteen. Instead of waiting until a child's permanent teeth are in place, we can focus on correcting the underlying causes of malocclusion. Often, tooth extraction is unnecessary, and there may be no need for your child to wear braces. The Myobrace System is used in more than one hundred countries, providing a more natural way to straighten teeth.



Treatment typically takes place in 4 stages

How Does Myobrace Work?

Myobrace is a system that uses a series of removable oral appliances that are worn for as little as one or two hours each day and during sleep. The appliances correct myofunctional habits, teaching children how to breathe properly through their nose, how to swallow correctly and position their tongue properly in the mouth.

Myobrace appliances exert light forces, helping to widen the arch and aligning the teeth and jaws. Additionally, we will give your child specific activities to do twice daily while wearing their Myobrace appliances. These activities consist of breathing, swallowing, tongue and cheek and lip exercises.

Stage 1 - Correcting Oral Habits

During Stage One, your child learns how to breathe correctly through their nose, how to swallow properly and to keep their lips together when not speaking or eating. Their tongue is retrained, so it rests naturally on the roof of the mouth. These corrected habits enable better jaw growth development, creating more room for teeth to come through in the right positions, and can eliminate the need for braces during their teens.

Stage 2 - Developing the Arch

During Stage Two, we provide appliances to widen the upper arch if needed, creating more space for the tongue and teeth. The exact appliance used depends on the age of your child. Younger children can use the Myolay, a device used in conjunction with their Myobrace. Older children may use a Biobloc or the Farrell Bent Wire System to create a wider arch.

Stage 3 - Aligning Teeth

Myobrace for Teens is an appliance used when the last permanent teeth are erupting. Although the appliances are removable, they must be worn day and night for optimal results. If further tooth alignment is required, we can provide braces, but the treatment time will most likely be much shorter.

Stage 4 - Retaining the Results

Once your child has completed their Myobrace treatment, we focus on retaining good oral habits, often preventing the need to wear a retainer required after traditional orthodontic treatment.

Because Myobrace treats the underlying problems causing malocclusion, it can provide more stable results, allowing for better oral health. Poor oral habits are corrected; your child benefits from improved occlusion and broader, healthier smiles.

