Interrelation between orthodontics and phonoaudiology in the clinical decision-making of individuals with mouth breathing

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Objective: The purpose of this study was to investigate the decision making of orthodontists of Passo Fundo district - Rio Grande do Sul (RS)/Brazil, in the Orthodontics/Speech Therapy interdisciplinary treatment of mouth breathing individuals.

Methods: The present study is a quantitative approach and the design is descriptive, using as instrument data collection of a questionnaire sent to 22 orthodontists practicing in the above-mentioned district. The project was approved by the Ethics in Research Committee and all individuals signed a free informed consent.

Results: All professionals considered the inter-relation between Orthodontics and Speech Therapy necessary, but divergences were found in situations where an associated therapy may exist, considering that 54.5% trust the inter-relation to develop aspects associated to language, oral facial motricity and habits. In cases of associated treatment, the results obtained were considered satisfactory by 73.7% of professionals, even though they consider that only 6 to 20% of their patients collaborate with treatment.

Conclusion: In relation to decision-making in treatment of mouth breathing individuals, the orthodontists in Passo Fundo/RS agree that there is need for speech therapy. The full vision of the individual in a multidisciplinary team is of fundamental importance in the treatment of patients with mouth breathing syndrome.

Keywords: Mouth breathing. Orthodontics. Speech therapy.

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**Editor’s abstract**

Mouth breathing is characterized by a deviation of nasal breathing, and this is a disorder that affects the growth and development of the whole orofacial system. When it is constant, mouth breathing triggers a chain of events that affect the child’s development, and even the adults in their usual activities. Nowadays, it is known that the treatment of chronic mouth breathing requires an interdisciplinary approach, since it is impossible for only one professional to recover functional, pathological, structural, postural and emotional needs of patients with this syndrome.

Thus, the proposal of the authors of the present work was to verify the clinical decision-making by orthodontists from Passo Fundo/RS (Brazil) in the interrelationship with speech therapy in mouth breathers. The sample included 22 orthodontists, working in the city of Passo Fundo, according to the Regional Dental Council. The survey instrument applied to Orthodontists was a questionnaire with objective and subjective questions, in the first part it consisted of demographic data (gender, age, years after graduation, college, specialization in Orthodontics and professional performance). The second part consisted of questions concerning the interrelationship orthodontics/speech therapy, i.e., the data referring to the criteria regarding clinical decision-making of orthodontists. The data collected in the sample were submitted to statistical tests using the statistical software - SPSS 15.0. The results showed that all professionals consider necessary the interrelationship between orthodontics and speech therapy, but there was disagreement as to situations where there is the possibility of working together, whereas 54.5% rely on the inter-relationship to develop aspects related to language, orofacial motricity and habits.

In cases of interdisciplinary treatment, the results were considered satisfactory by 73.7% of professionals, although they consider that only 6-20% of their patients cooperate with the treatment. Thus, the authors conclude with this work that in relation to clinical decision-making on treatment of individuals with mouth breathing, all the respondent orthodontists of Passo Fundo-RS agreed that there is a need of relationship with speech therapists; the orthodontists in the city make the decision to treat their patients referring them to speech therapist and follow their treatment, but most of them feel the patients are not comfortable to perform the speech therapy.