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How Bad is Thumb Sucking for My Child?

By Sandra Holtzman, MS,CCC-SLP,COM

Should I be worried about it?

Thumb and finger sucking habits are of great concern to parents and professionals. There are some who tell parents to "just forget about thumb sucking," to "wait and see," or to try some over-the-counter nasty tasting substance to shock the child out of the habit. Among the professionals who deal with sucking habits on a daily basis, such as specially trained speech pathologists and dental professionals, we do find agreement. Sandra R. Holtzman, MS, CCC-SLP, COM, is among a select few professionals worldwide that are certified orofacial myologists. She explains, "The amount of harm to the speech, teeth and overall health is related to the frequency, intensity and duration of the sucking habit."

How does this happen?

Clear pronunciation begins and ends from the resting place of the tongue, lips and jaw. They act as the home base for good precise speech production. When a thumb is inserted into the mouth frequently or for long periods of time, then the tongue and lips and jaw will work "around the intruder" and develop new, incorrect resting positions.

How does this affect the speech?

Since the home base is where many speech sounds are produced, having an incorrect home base can lead to such speech problems as lisping, differences in voice quality, various articulation disorders, and overall mumbling and imprecise pronunciation. For example, if the child rests his tongue too far forward and down in the mouth (in order to make room for the thumb), then he is likely to begin and end his sentences from that forward, down location. He will not be able to move his tongue, jaw, and lips rapidly and independently from place to place to achieve crisp speech articulation.

Is there a certain age beyond which the habit is more detrimental?

Beyond the age of three or four years, there is a much greater chance that damage will occur to structures within the oral cavity from a sucking habit, interfering with dental occlusion as well as speech. If the thumb is in the mouth for long periods of time, then the growth of certain teeth might be affected, leading to malocclusion. Often, children who grow up sucking their thumbs tend to create a space between the teeth, called an "open bite." This further affects speech production since the teeth cannot close together to make certain sounds. Many malocclusions require "braces" for orthodontic intervention. Even the less severe malocclusions may affect the way that food is chewed and swallowed. This can lead to digestive disturbances from swallowing un-chewed pieces of food or swallowing too much air while eating. Also, the child might not be able to achieve good lip closure.

Why is lip closure important?

As far as speech is concerned, the lips must close adequately in order to produce words containing the B, P, M, and many vowel sounds. If the child wants to say, "I bought a bunny", and it sounds like "I ought a unny", this could lead to confusion for listeners and frustration for the child. Sometimes the lack of lip closure is associated with a mouth-breathing habit, also.

What's wrong with a mouth breathing habit?

At one time or another, we have all had congestion or a bad cold that forces us to breathe through our mouths instead of our noses. For most of us, it is very uncomfortable and unnatural. When a child is used to having his thumb filling the space inside of his mouth for prolonged periods of time, he might keep the mouth hanging open even when he removes his thumb. From that position, he naturally tends to breathe through his mouth instead of his nose.

Why is nose-breathing better?

The nose has protective barriers to filter and "air condition" the air we breathe. It moistens the air; it brings it to acceptable

temperatures on the way to the lungs, and helps to keep out unwanted germs, decreasing the likelihood of upper airway infections, middle ear infections, colds and more. It also gives the child a much better appearance when his mouth is closed.

Can it affect a child's self-esteem?

Kaylie came to the clinic to learn how to pronounce certain sounds. She had trouble learning new words and her parents thought it was due to the change from her native language to English. While taking her case history, it was determined that she had a thumb sucking habit. Her parents reported that she didn't have friends because other children could not understand what she said. As a result, Kaylie usually stayed in a corner sucking her thumb, which lowered her self-esteem even more. After implementing a positive 10 day program to eliminate the sucking habit and beginning a therapy regimen to correct her tongue position and other muscle issues, she was able to articulate her sounds and she began to interact successfully with her classmates.

What are other consequences of thumb-sucking?

Joey, four years old, was known as a little terror. Not too many kids have been kicked out of two preschools by the age of four! He was a smiling, sweet boy with a devilish look about him, making him somehow irresistible in spite of his history! He was evaluated and treated in his home. He had frequently missed going to school due to colds, ear infections, and other respiratory illnesses. He was an ardent thumb sucker as well as an active little boy. Because he was seen for therapy in his home, there was ample opportunity to observe him interacting with his cat and dog, and even playing outdoors. Joey, thumb inside the mouth, busied himself by picking up a dirty rubber ball and throwing it to the dog...then he sat in his sandbox for awhile, thumb in mouth....a thumb covered with germs galore by then! These types of activities were repeated over and over throughout his day....touching "germy" items, thumb inside mouth, touching more dirty toys...and sucking thumb some more. Unplugging The Thumb program was initiated

because most of his speech problems were directly related to his sucking habit and the resulting malposition tongue, lips, and jaw. No one ever expected the extent of the positive changes that occurred. Joey's behavior improved tremendously and his self-esteem soared from his success in having conquered his sucking habit. He was enrolled in a new preschool and functioned well. He responded positively to speech therapy and progressed quickly. But it was approximately 6 months later that his parents realized that he had not had any respiratory infections, ear infections or colds. In short, if we remember that a thumb or finger is often attached to a little girl or boy who plays with dirty outdoor toys, forgets to wash after potty, crawls around on floors, etc., then it is no surprise to us that eliminating the sucking habit will be very beneficial!

How can I help my child quit a sucking habit?

Responsible parents must be cautious when they are going to choose a way to help their child get rid of a bad habit. The best way to help children quit is by giving them the tools to make the decision by themselves while we act as their support system.

Here are 3 Steps to help you choose a successful method:

1. Consider only those programs that offer unstressful solutions.
2. Become a "partner" with the child so you accomplish the goal as a "team."
3. Use a method that employs a positive approach at all times and is fun for both of you.



Step number 3 is the key element. There are many scattered approaches, but there are very few child-oriented, organized programs available.

To learn more:
www.UnpluggingTheThumb.com