

AN ANATOMICAL EXPLANATION OF THE REASONS WHY LIP RESISTANCE EXERCISES ARE EFFECTIVE:

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The length of the philtrum (and upper lip) is important to measure initially, and at the end of therapy, when resistance exercises have been used to obtain lip closure at rest for a presenting problem is lip incompetence. The musculature of the lips presents a unique anatomical situation for applying myofunctional therapy techniques involving muscle resistance. As is well known, resistance exercises result in the shortening and fattening of skeletal muscle fibers. Adding "stretching" exercises to therapy exercises for the anterior oral sphincter can result in lengthening the upper lip (and philtrum).

How does this occur? The Button Pull (Battle Buttons, Snarls, etc.) exercises, for example, strengthen the muscle fibers of the orbicularis oris, while stretching exercises applied downward with gloved fingers inserted up to the upper limit of the labial vestibule, up to the base of the nose, create vertical resistance against the horizontal fibers of the oral sphincter. The resistance applied within the oral sphincter itself, both horizontal and vertical, combines to achieve a lengthening result for the philtrum. The unique anatomy involved within the orbicularis oris sphincter, in the absence of any bony connections, involves the bulk of musculature directed horizontally across the upper and lower lip areas. The resulting shortening of muscle fibers within the sphincter then helps to elongate the upper lip as stretching exercises pull perpendicular to the horizontally-directed orbicularis oris musculature. Thus, the perpendicular (vertical) resistance pull against the horizontal fibers of the anterior oral sphincter result in shortening and fattening of muscle fibers within the orbicularis oris sphincter, and the philtrum is elongated as a result of such resistance exercises.

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To measure initially, and at the end of therapy

