What is the OMFT course about?
Who would benefit from OMFT treatment?
Which professionals does the course address?

Notice where your tongue is right at this moment ... Is it low in the mouth? Is the promotion between your front teeth?

Does the tip push on the backside of your front teeth?

Does it rest in the palate and touch the back of your front teeth at the same time?

If one of the above statements fits your tongue, then you will benefit from OMFT treatment.

This because the tongue is a very important element that controls many processes in your mouth regarding placement of saliva, fluid and food in terms of chewing and swallowing as well as speech. The tongue has a direct impact on your face shape and posture, your sleep - even your jaws and your overall health.

Is there tension in the neck muscles, chewing- and throat muscles or even pain for example In the jaw joint (TMJ), then these problems can also origin from the tongue.

Perhaps this is the first time you experience that there can be a context on such a broad perspective?!

Do you want to know more about how to tackle the problems for your patients / clients, then the OMFT course is something for you! Now you may think the course is not aimed at your profession...

OMFT is an interdisciplinary approach, typically aimed at ENT doctors, dentists, dentists, dental technicians, speech therapists, osteopaths, chiropractors, physiotherapists and occupational therapists.

OMFT (Oro MyoFunctional Therapy) - also known as neuromuscular rehabilitation of the oral facial muscles - promotes the stability of the face, tongue, throat and jaws.

Oro MyoFunctional Disorders (OMD - Oro MyoFunctional Disease or Tongue Thrust) are disorders of the face, mouth, lips or jaw.

OMD can directly and / or indirectly give rise to some of the following problems: problematic breastfeeding, difficulty breathing, chewing and swallowing problems, problematic growth pattern of jaw and face, speech problems, sleep apnea, mouth breathing, TMJ issues, reduced oral hygiene, increased amount of calcified plaques and caries, failed orthodontic treatment - where the effect disappears after discontinuation of active treatment.

One of the most common causes of OMD is a tongue tie.

Usually the resting position of the tongue is always in the palate (where the entire surface of the tongue touches the palate)

The tongue thus helps to shape the palate while at the same time holding the head.

At normal resting position, the tongue helps protect the respiratory tract: As you breathe through the nose, the air is filtered, heated and moistened, thus reaching the lungs purified and with proper temperature and humidity.

A low resting position can cause many problems: generally poorer well-being, palate is narrower due to the absence of the tongue and the tooth position is also changed, the air is cleansed by tonsils and adenoids due to mouth breathing and narrow nose cavities - which pose a risk of enlarged adenoids and tonsils.

Mouth breathing causes poorer quality of sleep, because the blood is less oxygenated when breathing through the mouth. Mouth breathing can also cause pressure in the middle ear, risk of middle ear infection, snoring and even apnea periods.

An incorrect resting position of the tongue can adversely affect the development of the oral cavity. The lack of movement of the tongue can make it difficult for the tongue to move the food to the gums / cheeks, so that the food can be chewed properly. The tongue may also have difficulty positioning the food properly for swallowing and the swallow pattern can be disrupted.

The present (industrial) eating habits have meant that food is generally more processed and softer, thereby developing less muscle power in the chewing muscles. The lack of development of jaw and chewing muscles and the wrong placement of the tongue may lead to incorrect teeth, which in turn can cause jaw problems. OMFT treatment and exercises can strengthen the muscles and over time improve the jaw and tooth position.

MyoFunctional disorders can develop throughout life and can be treated for just as long - but the greatest effect is achieved by early intervention - from approx. 4 years.

You can read more about the course here:

https://www.lebahn.dk/omft-2018/

Participant skills after the course:

- Ability to diagnose whether there is a worrying myo-functional problem
- Ability to measure lip strength using a force scale
- Make the rest of the tongue after swallowing visible by means of Payne Paste
- Able to diagnose which classification of tight tongue band the patient has after Kotlow's classification. Whether or not to refer to surgical correction
- Ability to follow a protocol for the exercises of a patient
- Learn all the exercises that are necessary for the protocol
- Learn to see the difference between a skeletal and a functional problem
- Learn when to refer to an orthodontist for palate expansion
- Learn to work with orthodontists, as well as the need for and value of this collaboration
- Learn to use a protocol that is required for correct images necessary for treatment and patient records
- Learn when to use a trainer (a device to help correct the rest of the tongue and to swallow properly, as well as to prepare)