

# An invitation to forge a diagnostic-therapeutic alliance in the restoration of occlusal-postural balance

## Abstract

It is common for postural problems to be diagnosed and treated from any specialty related to general orthopedics, but very distant from Stomatology, especially dentomaxillofacial orthopedics. Ignoring the fact that the strong association between occlusal problems and body posture has been tactically demonstrated, which goes beyond mere clinical impressions and subjective convictions. That is why we find ourselves with patients who, after palliative treatments and physiotherapy, cannot recover; by dismissing malocclusion as cause or effect. The subject has set a trend in the academic field, arousing a lot of interest, but there is much to be done. The segmented approach to the human body and specialties still persists. Despite the efforts, there is still some confusion due to the great diversity of protocols that are not fully agreed upon and methodological errors. The epicenter of our actions is the patient and we owe ourselves to them, therefore a diagnostic-therapeutic Alliance is essential for the restoration of the Occluso-postural balance. But it is not only desirable, but also vital that an innovative cooperation strategy be implemented between disciplines related to general and dentomaxillofacial orthopedics, that adapts to their needs, with a more open, pragmatic and holistic vision, that breaks with this behavior segmented.

**Keywords:** occlusion, body posture, posturology, malocclusion, dentomaxillofacial orthopedics

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**Yaniris Figueroa Céspedes**

Department of Orthodontics, "Enrique Sainz Casado" Dental Clinic, Cuba

**Correspondence:** Yaniris Figueroa Céspedes. First Degree Specialist in Comprehensive General Stomatology. Master in Emergency Care. First degree specialist in Orthodontics. Faculty of Dentistry Raúl González Sánchez. Havana. Cuba, Tel +53 53825530, Email yanirisfigueroa@infomed.sld.cu yanirisfigueroacespede@yahoo.es

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## Short communication

It is common for postural problems to be diagnosed and treated in the context of any specialty related to general orthopedics, but very distant from Stomatology, especially dentomaxillofacial orthopedics. Overlooking the fact that the strong association between occlusal problems and body posture has been tactically demonstrated, from the clinic to the academy, going beyond mere clinical impressions and subjective convictions. That is why we find patients who, after individualized palliative treatments, either through prescription drugs (anti-inflammatories, analgesics or antidepressants, etc.) or undergoing several sessions of analytical and symptomatic physiotherapy or osteopathy, fail to fully recover; because they have dismissed a possible cause or effect: Malocclusion.<sup>1,2</sup>

If the etiology of the problem is not meticulously investigated, the symptoms recur and soon after cause the individual to become ill, presenting acute and chronic symptoms.<sup>3</sup> Some confusion surrounds professionals when it comes to determining where (postural sensors: eyes, mouth and feet) is the primary imbalance and what is the most appropriate therapy for its restoration. These alterations perpetuated over time are accompanied to a greater or lesser extent by adaptive compensation for the imbalance.<sup>4,5</sup>

The strong occlusal-postural connection supports the need for the related disciplines of general orthopedics and dentofacial orthopedics to work cooperatively for early diagnosis and increased treatment efficacy of these patients. So, when suggesting an orthopedic or orthodontic consultation after the examinations have discovered certain indicative characteristics of occluso-postural alteration. Orthodontists should consult and/or refer the orthopedist and vice versa, so that timely treatment of these alterations can begin.<sup>6-8</sup>

The subject has set a trend in the academic field, arousing a lot of interest, however, there is much to be done. The segmented focus of the human body and of medical knowledge in individual specialties

still persists. Two obstacles that highlight the need for a true global vision of the individual and to practice medicine that is increasingly integrative and didactic.<sup>4,7</sup>

The doors are opened to a change of Paradigm from the prevention, diagnosis and stomatological treatments, especially in the field of Orthodontics and Dentofacial Orthopedics. It is well known that the starting point should be prevention in patients in active growth, where it is vital to anticipate risk factors that help to avoid possible injuries in the future adult, and thus achieve harmonious growth and development.<sup>3-5</sup> Despite the efforts, there is still some confusion due to the great diversity of protocols that are not fully agreed upon and methodological errors. Speaking the same therapeutic diagnostic language is still a challenge.

The epicenter of our actions is the patient and we owe it to them, therefore a diagnostic-therapeutic Alliance for the restoration of the Occluso-postural balance is very convenient, and more than all opportune. But it is not only desirable, but also vital that an innovative cooperation strategy be implemented between disciplines related to general and dentomaxillofacial orthopedics, that adapts to their needs, with a more open, pragmatic and holistic vision, that breaks with this behavior segmented.

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## Conflicts of interest

The authors declare no conflicts of interest.

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