



PRIME Dental concepts

The manner in which our teeth hit each other has a strong relationship to function of both the masticatory (chewing) system and the postural musculoskeletal system. The alignment of the teeth and how the teeth fit (occlusion) and feel to us can have a high impact on overall function of the neck, trunk, arm, and leg movement. Patterned chewing, swallowing, and speech are directly related to learned positions of the mouth and face that are directly linked to the dental occlusion. This “normal” pattern of tooth fit and feel can direct our brain to hold onto these patterns (good or bad) and more than likely can contribute to faulty and imbalanced posture. Abnormal neck rotation and body asymmetry becomes difficult to manage when this happens as the position of the neck and head is being directly influenced by the fit and feel of the teeth. If these occlusal patterns are not corrected our behavior on what we do is directed by and through our occlusion and not through our feet, spine and overall postural supportive muscle, making long term change or management difficult at best. Increased functional or behavioral demands that are placed on those of us who have poor occlusion patterns may create patterns of migraines, headaches, neck tension, dizziness and/or facial pain to name a few issues.

Abnormal tooth position and patterned contact from the opposing teeth can result in the enhancement or development of head, neck and body instability and postural imbalance that becomes reliant on tooth occlusion. If the fit and feel of the teeth is not properly identified or correctly used, on a daily basis, normal references for stabilization of the head and neck are challenged and our tendency to develop bad postural movement patterns and strategies take place. These bad patterns then become well established, unfortunately, over time as normal. These habits reinforce the need to rely on other parts of our body to compensate for head and neck forward, backward and side to side movement. These compensating areas can include the back muscles, the anterior and lateral neck muscles and the anterior hip muscles.

Patients who are accepted in our PRIME program will be placed in a position where the head, neck and trunk muscles can relax when they are in positions where they should be relaxed. This is done utilizing other sensory systems including the visual system through PRI Vision and floor up support from shoes and/or orthotics. This relaxed state, which has been coined neutrality through the Postural Restoration Institute®, will allow the body to relearn how to move in a more efficient manner. A specific mouth appliance will be fabricated to reduce any poor patterned fit and feel of teeth once the patient is placed in this more relaxed position to allow it to stay that way by eliminating poor contact and feel and encouraging proper fit and feel. Once the body cannot and does not depend on the poor occlusion for stability, postural and movement patterns can more effectively be relearned through specific activities and exercises. The mouth appliance will be specifically fabricated to fit on the bottom teeth when the neck and head is placed in the appropriate position to help with regaining forward, backward and lateral function of the head and mandible or jaw bone. This new orientation of tooth fit and feel then will allow the patient to find and feel more appropriate references from the visual, abdominal, foot and breathing systems. Once this more appropriate pattern of fit and feel of teeth is appreciated by the patient and postural stability is regained, the teeth may need assistance from a dentist or an orthodontist to position the teeth into a better position that matches this new head and neck position of rest. This may be the long term strategy needed to maximize postural stability

Postural Restoration™ Dental Occlusion and intervention therefore, is aimed at providing the best neurologic sensory input the patient can achieve for good postural and upright function without relying on occlusion that is related to painful patterned function. This powerful neurologic input from the teeth can allow a person to sense and regain control of body position when using the ground to move forward or when their arms or legs are swinging forward; without overusing the neck, back and nervous system to compensate for poor alignment that is reinforced or created by poor tooth contact and poor tooth position.