

The Silent Epidemic:

How Modern Living is Breeding Disease and Health Issues in Our Children



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THE SILENT GLOBAL EPIDEMIC OF CHILDREN'S AIRWAY DISORDERS

There is a silent health epidemic weaving its way throughout the lives of the children of the world. Sleep issues, an inability to focus or concentrate, lack of energy, depression, small mouths with crowded teeth, and weakened immune systems are all symptoms that can be traced back to childhood airway disorders. If caught and treated early in children, pain, suffering, and long-term health issues such as ADHD, depressions, high-blood pressure, and heart attacks can be avoided in adults.

Why are our children experiencing these signs and symptoms? One of the main reasons has to with our modern lifestyles. Life in industrialized societies is constantly on the go, fueled by processed foods and eating on the run, and a general lack of sleep. This perfect storm has allowed the decline of our mouths, teeth, posture, and airways.

Studies have shown that the primitive skulls of our human ancestry have larger mouths and well-aligned teeth. Unlike what we see today, they had plenty of room for their teeth to fit, ample space for their tongue, and it is believed that, due to this, they had less issues with airway disorders.

Another huge factor fueling the growth of this epidemic is lack of education and communication between parents, pediatricians, and pediatric dentists. That's why Children's Airway First Foundation was created. We are on a mission to educate parents and pediatric professionals and to ensure all children have access to screening, evaluation, and treatment before the age of six.

THREE CONTRIBUTING FACTORS IMPACTING CHILDHOOD AIRWAY DISORDERS

Nursing and Eating



Bottle-feeding in infants causes a higher rate of malocclusion, which can lead to breathing and sleeping issues as a child grows.

To help prevent or lower the risk, it is recommended that children nurse for a minimum of six months, or longer, if possible, before they are introduced to bottle-feeding. This will allow time for the baby's palate to form properly and will improve the child's muscles in the mouth and tongue.

Once your baby is ready for solid foods, it is recommended that you avoid commercial baby food and introduce your baby to natural foods that will encourage the use of their mouth and tongue muscles as well as the act of chewing.

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Breathing & Sleeping



Children with airway disorders often have sleep issues such as apnea, snoring, bed wetting, and extreme restlessness. A lack of sleep can damage brain neurons, particularly those in the cortex region.

A lack of oxygen during sleep can interfere with the body's restorative process and cause chemical and cellular imbalances that can lead to ADHD, inattentiveness, learning dyabilities, allergies, asthma, and auto-immune and inflammatory diseases.

Additionally, lack of sleep can cause a 10-point reduction in a child's IQ.

Children need "good sleep" each night. Good sleep means quiet, uninterrupted sleep for the recommended number of hours.

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Holistic Approach



Whole body health depends on a good night's sleep, healthy eating, and regular exercise. This holistic approach to healthy bodies should also be applied to healthy mouths for children.

A holistic approach to mouth development will include proper nursing and weaning, avoidance of pacifiers and thumb-sucking, ensuring children get real food that they chew thoroughly before swallowing, and getting enough sleep. It also requires a team effort between pediatricians and pediatric dentists.

It is unusual for pediatric professionals to collaborate on wellness check-ups for children. However, if dentists and pediatricians began to work together, many childhood airway disorders could be prevented.

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Nursing and Eating (Continued):

To encourage proper palate development of a high V-shape, it is recommended that children avoid the use of pacifiers or thumb-sucking to seek comfort. Helping your child self-sooth without the use of either practice at an early age, will help your child's mental and physical health development.



For a child's eating development, the practice of "baby-led weaning" (nursing for a minimum of six months and allowing a child to start eating solid foods once they begin to reach for them) is an ancient practice that has proven itself. This method allows children to develop their muscles through chewing and is more likely to aid in the prevention of malocclusion.

Ensure your child eats real food versus fast food or processed food. Genetics only accounts for 25-30% of your child's health, so fuel the other 70-75% with natural foods loaded with vitamins and nutrients.

Additionally, teach your children to chew every bite 20-30 times. Not only does this exercise the muscles in your child's mouth, but it also ensures their body will be able to extract the optimal amount of nutrients during the digestion process.

Other actionable steps parents can take to prevent health issues include:

- Avoiding junk food to strengthen teeth and bones and prevent sleep issues and health issues such as diabetes.
- Monitor the development of your child's epiglottis to ensure that your child's airway remains open and prevent Obstructive Sleep Beathing.
- Reduce your child's exposure to environmental toxins and prolonged stress.
- Do not remove a child's teeth for orthodontic treatment as pulling teeth can cause the jaw to recede and your child's away to become constricted.

Breathing and Sleeping (Continued):

The amount of sleep needed each day by a child depends on their age. It is recommended that infants get 12-17 hours of sleep, toddlers and preschoolers 10-14 hours of sleep, primary school-aged children 9-12 hours, and teenagers 8-10 hours of sleep within a 24-hour period.

A child with poor sleep quality at night will exhibit symptoms such as:

- Difficulty getting up at a certain time in the morning.
- Complaining of headaches in the morning.
- Showing signs of exhaustion such as bags and dark circles under their eyes.
- Needing extra naps or extended nap time during the day.

When your child does not receive the right amount of sleep each night, they become venerable to a variety of medical issues and concerns. Without the proper amount of sleep, their tumor-killing cells become suppressed; their vaccines become less effective; they become venerable to viruses and infections; and, often become prone to auto-immune disorders.

There are over 90 diagnosable sleep disorders. One such class of sleep disorders is sleep-disordered breathing (SDB), which can affect kids' brains, hearts, blood pressure, growth, appetites, tooth, and jaw development.

Obstructive sleep breathing (OSB) is another class of sleep disorders that is often overlooked in children. The obstructions could be caused by tonsils, adenoids, or even a child's tongue. Children with OSBs often snore at night, tend to be mouth breathers, and are often labeled as being 'tongue-tied.'

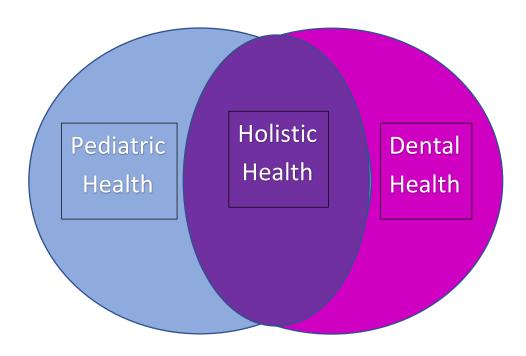




Holistic Approach (Continued):

Parents will often discuss issues their children are having with their pediatricians; however, in many instances, if this information were also shared with their pediatric dentist, symptoms leading to childhood airway disorders could be identified and treated.

When pediatric professionals who are educated on children's airway disorders signs and symptoms work together and a holistic approach to a child's overall wellness, both body and mouth, are taken, unnecessary procedures such as the removal of teeth can be avoided and treatments such as jaw realignment can take place. A holistic approach to a child's body and mouth health can minimize potential negative long-term health effects and maximize a happier, healthier childhood for all children.



EYE-OPENING STATISTICS AND FACTS SURROUNDING CHILDREN'S AIRWAY DISORDERS

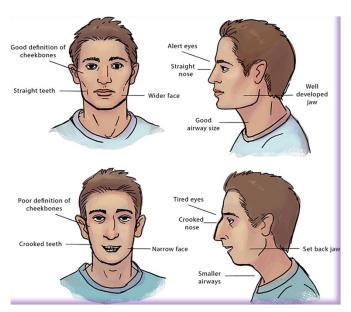
- Approximately 1/5 of the population deals with a malocclusion and of that, 15% are sever enough to impact function
 - Crooked teeth are a sign of poor jaw development and malocclusion
 - Those with malocclusions are often mouth-breathers
- Over 350 million children worldwide suffer from preventable compromised airways.
- 92% of Westernized people have malocclusion.
- According to the World Health Organization, tooth decay affects 60-90% of school-aged children living in industrialized countries. One of the biggest contributing factors to this decay is the food we eat.
- Around 25% of all children experience some type of sleep problem, and around 12% present snoring and sleep apnea. In contrast, sleep complaints in children with ADHD have been reported in 55% of cases. Children undergoing evaluation for ADHD should routinely be screened for sleep disorders.
- A survey by the National Sleep Foundation found 18-19% of children suffer from sleep-disordered breathing. Many of these children are mouth breathers.
- Between 32% and 35% of ADHD teens will drop out of school before graduation, compared to only 15% of teens who don't have a disorder.
- Young adults between the ages of 23 and 32 are 11 times more likely to be unemployed and earn about \$2 less per hour on average as compared to adults without ADHD.
- Today, in the United States, eleven million children under the age of 15 have it. There are 250 million in Asia and 1.9 million in the U.K., 700,000 in Australia, etc. It is little known, but it can lower your child's IQ by 10 points. It can give your child a hypoxic brain injury and result in systemic damage to the entire body. Ninety-five percent of children are never diagnosed. Many suffer from chronic anxiety, depression, brain fog, and even ADHD.
- 95% of children with Obstructive Sleep Apnea (OSA) are never diagnosed.
- Kids with OSA are five times more likely to be diagnosed with ADHD.
- At least 12-14% of children have some form of Sleep Disorder Breathing (SBD). Snoring and mouth breathing are two primary indications of SBD.

SIGNS AND SYMPTOMS

Identifying an airway disorder can be easy if you understand the signs and symptoms. Ask yourself the following:

- Does your child sleep through the night?
- How many times does your child chew each bite or mouthful before swallowing?
- Does your child almost always have a stuffy nose?
- Does your child have a "worried" expression when swallowing?
- Does your child sleep with an open mouth?

Dentists can use facial alignment to help identify possible issues. Poorly defined cheekbones, crooked teeth, an elongated or narrow face, and a set-back jaw are all indicators of an airway disorder.



Crooked teeth can be a signal of a more serious problem, such as a poorly developed jaw. Malocclusion is often accompanied by mouth breathing, which is another sign of an airway disorder.

In fact, mouth breathing, malocclusion, and sleep disturbance are often found together in children with misdiagnosed airway disorders.

Signs of Airway Obstruction

- Mouth breathing
- Open or slack-mouthed posture
- Snoring or noisy sleep
- Night terrors
- Bed-wetting
- Chronic nasal discharge/runny nose
- Dark circles or allergic "black eyes"
- Tossing, turning, thrashing and restless sleep
- Messy sheets and blankets
- Nail-biting
- Crooked teeth
- Frequent earaches
- Falling asleep in school
- Awakening feeling un-refreshed

GASP Airway Health: The Hidden Path to Wellness, by Dr. Michael Gelb and Dr. Howard Hindin



CONCLUSION: HOPE FOR THE FUTURE

It's time to put an end to this epidemic! The way this can be accomplished is through the education of parents, pediatricians, and pediatric dentists on importance of seeing children before the age of six, how to spot the warning signs and symptoms preventative measures that should be taken with all newborns and young children, and treatment options for children.

Preventative Actions to Take:

- Nurse for at least a year and exclusively for six months. During this time, avoid bottle feeding, even if it is breast milk, if possible.
- Avoid using a pacifier until weaning is complete.
- Avoid most commercial 'baby foods' and wean onto foods that require chewing to exercise your baby's jaw muscles (monitor for choking).
- Teach children to close their mouths and breathe through their nose.
- Teach your child to chew their food (20-30 chews per bite) and to swallow their food with their mouth closed.
- Monitor your child's sleeping habits from birth. Look for signs of sleep apnea or disturbed slumber.
- Teach your child the importance of proper posture and limit slouching and head forward positioning.
- Let *BOTH* your pediatrician and pediatric dentist know immediately if you witness signs of disturbed sleep, continual mouth breathing, or inability to focus on your child.

Here are just a few actions parents can do immediately to protect children from oral issues and possible airway disorders:

- Breastfeed for at least a year and do not use a pacifier until weaning is complete.
- Wean onto foods that require chewing (watch for choking).
- Monitor your child's sleeping habits for mouth breathing and signs of restless sleep.
- Work on your child or infant's posture.
- Teach them to chew gum with their mouths closed.
- See your pediatrician immediately if you detect any signs or symptoms of an airway disorder.

OUR MISSION

CAFF is dedicated to supporting professional research, education, training, and breakthrough diagnostic tools for screening, evaluating, and treating children with airway disorders before the age of six to prevent systemic damage to their brains and bodies.

Through education, training, and support programs for both parents and medical professionals, CAFF is driven to end the global epidemic of children's airway disorders.

Education is the first step to helping your child. CAFF has pulled together a continually growing online library of resources that will help parents, pediatricians, and pediatric dentists to better understand children's airway disorders and complications, guidance on treatment options, and community support.

The online library contains resource types such as book recommendations, current research findings and updates, blogs, and newsletters to help you stay current on the latest findings, and videos and podcasts from some of the country's top medical professionals specializing in children's airway disorders.



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