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Myofunctional orthodontics: The future for preventing, intercepting and treating malocclusions

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Course description: The reason orthodontics is delivered mostly in permanent dentition and largely a cosmetic procedure is that we have been focusing on malocclusion as the problem to solve, much like we focus on any facial deformity that needs "correcting". However, a shift in focus that looks at malocclusion as a symptom of imbalances elsewhere in the face, starting at an early age, will bring another perspective to the general and pediatric dentists to foreseeing malocclusions. By looking at the sources of imbalance we get a better picture of the etiology of malocclusion and a framework for treating it. In that way, malocclusions could be prevented and intercepted at an early age. We will explore the past, present, and possible future of early interventions as seen from this different point of view. This course will provoke you to think differently about diagnosis and treatment planning, especially as the goals of dentistry and medicine begin to merge.

Course goals: To present insights on craniofacial growth and development and put myofunctional thinking in diagnosis and treatment planning on the cutting edge of early intervention of malocclusions.

Course objectives: To Produce a Shift in Perspective: Just as Heisenberg taught us to look at light in two different ways, this lecture will illustrate a second, distinct way for the general and pediatric dentists to look at malocclusion.

To Understand the Etiology of Malocclusion: The etiology of malocclusion is largely epigenetic. This lecture discusses what we are missing in our current concepts of "Growth and Development" and how a new understanding lets us vision malocclusion in a completely different way.

To Envision the Mouth as Part of the Body: As our concept of malocclusion widens, so do our areas of concern and our scope of practice. This lecture will discuss some of the "big picture" health concerns related to the smaller issue of malocclusion. We will talk about what is behind the etiology of malocclusion, how a healthy airway is of major concern, and how our discipline interconnects with many other healthcare specialties.

To Understand and Apply Myofunctional Orthodontics: Diagnosis depends on our ability to see what's there. In this lecture we will learn how to "read" the body, the face, the skull, and the teeth in order to see the imbalances behind the malocclusion. Once the diagnosis becomes clear, the goals of treatment make sense. MFO treatment focuses on reversing the damage caused by poor function, improving oral-muscular function, and avoiding further damage, real prevention and interception.

Biography

German Ramirez graduated in 1986, obtaining his D.D.S. degree from the Javeriana University in Colombia. Afterwards, he completed a Pediatric Dentistry Diploma in Mexico. Dr. Ramirez interest includes guiding craniofacial growth and development in children. Thus, he trained in treating bite problems in Brazil and completed a Doctoral degree (PhD) in Oral Biology in Australia.

Beside his extensive experience treating children, Dr. Ramirez has been an academic in USA and Canada. He became a fellow of the Royal College of Dentist of Canada in 2012 and recently moved to Ontario, where he practice, while continue associated with the Faculty of Dentistry, University of Manitoba in Winnipeg, Canada. He is also a fellow of the Royal College of Dental Surgeons of Ontario and a member of the Ontario Dental Association and the American Academy of Pediatric Dentistry.

He is a member of the editorial board of the Journal of Dentistry and Oral Health and the Journal of Orthodontic Science and Practice. He is the author of the book "Early Treatment of Malocclusions: Prevention and Interception in Primary Dentition", as well as co-author of the book "The Trainer System: A myofunctional approach to treat malocclusions". He investigates on Craniofacial Growth and Development, the Patho-Physiology of Functional Disorders in the Cranio-Cervico-Mandibular system and how the craniofacial structures are modified by functional appliances.

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