

What Is Airway Orthodontics?

Airway orthodontics is a forward-thinking approach to orthodontic care that supports the oral contributions to healthy breathing, proper tongue posture, and natural growth. When the jaws and airway structures develop as they should, people are able to breathe through their nose with ease, sleep more soundly, and thrive with better energy and focus.

Rather than just straightening teeth, airway orthodontics nurtures whole-body health by creating the space people need for strong breathing foundations and lifelong well-being.

Signs That a Person May Benefit from Airway Orthodontics

Family members often notice little things before anyone else—clues that someone may not be getting the deep breaths and restful sleep they deserve. If you see any of these signs, your loved one may benefit from airway-focused orthodontic care:

- Mouth breathing or difficulty breathing through the nose
- Snoring, restless sleep, or frequent night waking
- Seasonal allergies or ongoing nasal congestion
- Crowded teeth, crossbites, or a narrow upper jaw
- Speech concerns or low tongue posture
- Daytime fatigue, difficulty focusing, or hyperactivity

By recognizing these signs, you can be on a path toward better health and possibly avoid the need for more complex treatment later on.

How Airway-Focused Orthodontics Works

Unlike traditional orthodontics that often involves extractions, headgear, class 2 elastics or other retractive mechanics, airway-focused orthodontics is designed to **open, expand, and guide growth** in a way that supports both a healthy smile and a healthy airway.

Expanding the Jaw for Better Breathing

Physiological expansion creates more room for the tongue and airway, supporting natural nasal breathing. With gentle, age-appropriate techniques, expansion can help the oral contributions to breathing by:

- Improving airflow and reduce snoring or sleep-disordered breathing
- Support proper tongue function and posture

- Help avoid unnecessary extractions and invasive treatments
- Deliver the best results when started early, while bones are still developing

Guiding Balanced Facial Growth

Facial development is closely tied to breathing patterns. Children who breathe primarily through their noses typically develop forward, wide, balanced faces with room for all their teeth. Airway orthodontics helps guide this healthy growth by:

- Promoting nasal breathing over mouth breathing
- Supporting forward and outward/lateral jaw development
- Creating symmetry and balance for both health and appearance

A Non-Retractive Approach

One of the guiding principles of airway orthodontics is to work **with growth, not against it**. Traditional or conventional orthodontics tends to be retractive in nature because removing teeth, using headgear to restrict forward growth, using class 2 elastics, distalizing appliances and techniques or other retractive mechanics that pull the upper jaw down and back may reduce the tongue space and airway space.

Instead of removing teeth, using headgear or pulling teeth backward, we focus on treatments that expand, strengthen, and align naturally. This includes:

- Growth-supporting appliances
- Myofunctional therapy to strengthen tongue and facial muscles
- Techniques that encourage natural jaw alignment and airway space

The positive effects of airway orthodontics ripple through every area of a person's life. By treating the oral contribution of structural and breathing challenges, we help people experience:

- **Stronger breathing and better oxygen intake** – Leading to greater health and vitality
- **Deeper, more restful sleep** – Improving the airway to increase the potential for deeper and more stable sleep cycles
- **Natural jaw and facial growth** – Supporting a balanced profile and healthy bite
- **Protection against TMJ strain and orthodontic relapse** – Creating long-term stability
- **Enhanced focus, energy, and behavior** – Because people who breathe well and sleep well thrive in school, sports, and daily life

Airway orthodontics is more than just straightening teeth—it's about helping people reach their full potential by giving them the gift of better breathing, better sleep, and better health.

1. HISTORY OF ORTHODONTICS AND DESCRIPTION OF TREATMENT

This treatment may involve removable or fixed orthopedic/orthodontic appliances (e.g., Tanner Airway Appliances, Vivos appliances, Richardson appliances, ALF, Biobloc, Myobrace, Schwartz, forward facial growth devices, braces, aligners and others) all aimed at guiding forward, upward and lateral jaw development according to custom and individualized treatment, enhancing posture and addressing craniofacial structural imbalances.

Below is a brief history of orthodontics:

-Most people don't realize that orthodontics has a long and dramatic history. In 1789 Pierre Fauchard described a metal arch to expand and align teeth. In 1819 Christophe-Francois Delabarre introduced a wire crib to align teeth. In the late 1800's Farrar and Kingsley began to systematize appliances and diagnosis.

-In **1860**, a New York dentist named **Dr. Emerson C. Angell** introduced a bold idea: gently **expanding the upper jaw** by separating the midpalatal suture using a screw-type appliance. He successfully widened the arch of a 14-year-old boy and published his results in *Dental Cosmos*. This was the **first known case of rapid maxillary expansion**. But instead of being celebrated, Angell's work was ridiculed, discredited and **rejected by the dental establishment**.

-The concept of modifying the bones of the face was considered too radical at the time, and his technique was labeled as unscientific. As a result, his method faded from mainstream practice, and Angell was largely **discredited during his lifetime**. However, his work paved the way for progress. **(Today, over 165 years later, dentists and orthodontists widely embrace lateral expansion as a safe, effective, and transformative treatment that supports not just dental alignment, but overall health and well-being.)** A big thanks to Dr. Emerson Angell and others who followed him.

- **Dr. Edward A. Bogue** who practiced in the late 1800's and early 1900's was one of the founders of the International Association for Dental Research in 1920. He published numerous articles and **recommended treating children early, even before any permanent teeth started to come in**. The American Academy of Orthodontics has recommended children be evaluated at age 7 which was considered too late by Dr. Bogue.

- In the late 1800's, **Dr. Edward H. Angle**, known as the "father of modern orthodontics," rose to prominence. **Dr. Angle** began shaping orthodontics into a formal specialty by the **1880s** and **founded the first school of orthodontics** and the **first orthodontic society in 1899**. Angle developed the malocclusion classification and developed the edgewise appliances to align teeth within their natural arch form and was **strongly opposed to extraction and retraction**. He believed that ideal occlusion was the goal. His philosophies gained widespread support, becoming the foundation of conventional orthodontics. Dr. Angle passed away in 1930.

- **Dr. Weston A. Price** traveled the globe in the 1920's and 1930's and published *Nutrition and Physical*

Degeneration: A Comparison of Primitive and Modern Diets and Their Effects in 1939 relating diet to health, decay and jaw development.

- In the 1940's, **Dr. Charles Tweed** rose to prominence systematizing premolar extraction therapy. He received one of the orthodontic specialties highest awards (Albert H. Ketcham Memorial Award) in 1960 and was widely recognized as one of the most influential clinicians after Dr. Angle. In 1966 he published a 2 volume textbook titled *Clinical Orthodontics* and **his extraction and retraction philosophy shaped orthodontics and his methods are still prominent today**. At that time very difficult wire bending was the way orthodontists moved teeth and the space created by extracting teeth made the process much easier and more predictable. Nevertheless, he helped push Angell's and Bogue's expansion approaches into obscurity. In that climate, expansion ideas remained sidelined—until they were revived and validated in the **mid-20th century**,

- After becoming a dentist in 1953, **Dr. John Mew** authored over 100 publications and continues to advocate for forward development in orthodontics today. He published ***The Cause and Cure of Malocclusion*** (1981, revised in 2004), coined the term Orthotropics (meaning correct growth) and introduced the treatment philosophy in the late 1970's. Orthotropics is derived from the Greek to mean straight or correct direction of growth. Dr. John Mew had his dental license revoked in 2017 and his son Mike Mew, who continued his work, had his license revoked in 2024.

- **Dr. Larry Andrews** published the **Six Keys to Normal Occlusion** in 1972 which became the benchmark for orthodontics and is still followed today. This put the focus of orthodontics on six aspects of tooth positions and relationships. There was no consideration for airway health, TMJ health or where the jaws were located in the face because the focus was on the six keys: molar relationships, crown angulation, crown inclination, tooth rotations, tooth contacts and the bite.

- **Dr. John Witzig** published the three part series *The Clinical Management of Basic Maxillofacial Orthopedic Appliances* with Dr. Terrance J. Spahl in 1987, 1989 and 1991 and are the **foundational texts for functional orthodontics**. He emphasized the **importance of non-extraction orthodontics**.

- **Dr. Bill Hang** was initially training in traditional orthodontics and practiced conventional methods of permanent tooth extractions, headgear and retractive mechanics such as class 2 elastics. However, he observed this lead to narrow smiles, elongated faces and compromised facial profiles. After working with Dr. John Mew, In the 1980's, Dr. Hang **developed new ways to achieve forward facial growth in children and adults** and has published many articles of his cases and guiding principles. He coined the term Extraction Retraction Regret Syndrome (ERRS) to describe the adverse effects suffered by patients who underwent traditional extraction-based orthodontics including pain, sleep apnea, recessed profiles and emotional distress. In 2017 he co-published *Airway Centric TMJ Philosophy/Airway Centric Orthodontics* Ushers in the Post-Retraction World of Orthodontics with Dr. Michael Gelb which **calls for prioritizing airway health over the traditional occlusal focus of orthodontics**. They outline the **6 specific goals of Airway Centric Orthodontics and the 10 specific treatment protocols** that must be adhered to in order to produce Airway Centric orthodontic results.

- **Dr. Michael Gelb** published *Gasp: Airway Health – The Hidden Path to Wellness* (2016) and *Functional*

*Dental Medicine: **How Complete Health Dentistry is Revolutionizing America*** (2020) as well as co-founding The Foundation for Airway Health and The American Academy of Physiological Medicine and Dentistry. He has been a clinical professor at NYU College of Dentistry since 1989, directed the TMJ and Orofacial Pain Program for 12 years. He has also pioneered new airway centric treatments in the fields of sleep and orthodontics. He published the *Airway Centric TMJ Philosophy* in 2014 that **emphasizes non-extraction orthodontics for TMJ and Airway Health**.

- Information, articles and additional information from all of the above doctors can be found on the FAQ pages of www.airwaycenter.com.

The airway focused principles and philosophies are not yet accepted by good intentioned regulatory boards and/or traditionally trained orthodontists. In fact, some consider this type of treatment to be dangerous, experimental and unacceptable. As discussed above, some dentists have had their professional licenses limited by regulatory boards in the US, the UK, Canada and Australia.

This is a form of orthodontic treatment that is not considered part of the current mainstream, traditional or conventional standard of care and is instead the new and improved version of orthodontics that many expect to be the standard of care in the future.

While there are differences in perspective relating to what is harming patients, the autonomy or patients' rights to make an informed decision for their own care is important.

The 4 key principles of medical ethics are:

1. Autonomy: Respecting the patient's right to make decisions about their own healthcare.
2. Beneficence: The duty to act in the patient's best interest and promote their well-being.
3. Non-Maleficence: The duty to avoid harming patients.
4. Justice: Ensuring fair and equitable treatment of all patients.

Many well-intentioned regulatory boards charged with protecting the public, Orthodontic programs, orthodontists and dentists consider forward jaw development and Airway Center treatment to be violating the ethical standard of non-maleficence because they feel like this is unacceptable care.

The main concerns voiced by caring and passionate conventional orthodontists who have not been trained on this treatment or ever used this treatment with patients themselves is that the patient's bite will get worse during the jaw development phase of treatment and it may appear on an x-ray that the teeth are being pushed out of the bone because the remodeling process of the bone takes time. This could appear concerning if reviewed with an insufficient radiographic analysis and/or when the remodeling process has not been completed. Although the risk of this is low, this could be a concern if instructions are not followed and appropriate follow-up appointments are not kept.

Based on the ethical principle of autonomy, each patient has a right to choose the treatment they want.

Each person can do their own research and assert their right to choose the treatment they feel best.

You are not being treated for any sleep condition or any other medical condition, only the potential oral

contributions to them. This is a dental treatment for the teeth and jaws which may have beneficial health effects. There is no promise or guarantee of any benefit provided by this treatment and you should work with your primary care and other medical providers for any health concerns you have.

2. NON-STANDARD NATURE OF CARE

The treatment being provided is not part of traditional orthodontic training and is not accepted or recognized by other orthodontists, general dentists or regulatory boards.

3. PURPOSE OF TREATMENT

This treatment is being recommended based on published recommendations from airway centered dentists and orthodontists as well as clinical findings and the belief that it may improve jaw structures, the amount of space needed for teeth, breathing, sleep quality, jaw alignment, dental arch space, TMJ space and tongue space.

While some practitioners and researchers support this approach, it is not yet widely accepted or endorsed by major regulatory boards or academic institutions.

4. PROVIDER QUALIFICATIONS

I understand that my provider is a licensed general dentist and while this treatment is not taught in traditional dental schools, the provider has completed advanced training in this field through private coursework, continuing education programs and mentorships.

5. RISKS AND POTENTIAL COMPLICATIONS AND LIMITATIONS

I understand that this treatment, like any procedure, involves certain risks, including but not limited to:

- Tooth movement that may result in bite changes such as open bite, overjet - Asymmetries or occlusal misalignment
- Tipping of teeth, flaring, rotation or temporary open bites
- TMJ discomfort or facial muscle soreness
- Root resorption or enamel damage
- Discomfort, soreness, or pressure
- Lack of improvement, relapse or the need for additional phases or repeating treatment - Potential delay or interference with conventional orthodontic or surgical treatment - Unknown long-term outcomes due to limited published studies
- Financial cost without insurance reimbursement
- Appliance breakage or loosening

- Speech, dry mouth or functional changes
- Aesthetic dissatisfaction
- Allergic reactions
- No guaranteed outcomes
- Other unknown or unexpected risks that may present themselves during treatment

These risks may differ from or exceed those of conventional treatment options.

6. PATIENT RESPONSIBILITIES

- Wear appliances as prescribed
- Maintain oral hygiene
- Attend follow-ups
- Report issues promptly
- Follow all instructions
- Get regular cleanings

7. TREATMENT DURATION AND COMPLIANCE

Treatment duration may vary depending on compliance, biological response, oral habits, or health-related complications. Additional fees apply for extended treatment or appliance replacements.

8. ALTERNATIVES TO TREATMENT

Alternatives to this treatment include:

- No treatment
- Conventional orthodontic treatment using fixed braces or aligners
- Conventional orthodontic treatment with extractions, head gear and/or class 2 elastics - Surgical interventions such as MSE, MARPE, MMA, Inspire, UPPP, LAUP, RFA and others - Referral to a board-certified orthodontist or other specialists

- For sleep: a CPAP machine, Dental Sleep Appliance, Tongue suction devices, customized sleep pillows, medications, sleep hygiene and many other options.

- Myofunctional therapy or a medical referral to ENT or other provider.

9. OFF-LABEL USE DISCLOSURE

The appliances or techniques being used may be applied in an off-label manner, meaning they are not specifically approved by the FDA for this purpose. I acknowledge and accept this.

10. NO GUARANTEE OF RESULTS

While the provider has recommended this treatment in good faith, there is no promise or guarantee of success of any kind, and results may vary depending on individual response, growth patterns, and compliance.

11. TRANSFER OF TREATMENT

Transferring to another provider may result in altered treatment, increased costs, or extended time. The new provider may not continue this treatment philosophy.

12. USE OF RECORDS

We use records for treatment coordination, education and professional documentation. Identifying information will remain confidential unless otherwise authorized.

13. MEDICAL DISCLOSURES

We need you to disclose all relevant medical history, trauma, medications and health conditions that may affect your treatment. Smoking has an adverse effect on the health of teeth and gums and is not recommended.

14. FINANCIAL RESPONSIBILITY

This treatment may not be covered by insurance and you are responsible for all associated fees.

15. VOLUNTARY CONSENT

It is important you understand the nature of the treatment, potential risks, benefits, and alternatives.

16. RIGHT TO DECLINE OR DISCONTINUE

You can freely choose to proceed with this treatment and may withdraw consent at any time.

Additional Information:

1. This is the new and improved version of orthodontics not the traditional standard of care orthodontics. You can go to an orthodontist if you would like traditional standard of care orthodontics.
2. During the appliance segments of treatment the bite does not get aligned. The bite usually becomes worse during the bone development

and appliance segments of treatment. Teeth will be aligned as needed with aligners or braces after appliance treatment is complete.

3. The remodeling of the upper and lower jaws takes time. There are various ways of stimulating a change in shape of the jaws. There are surgical and nonsurgical options in making these changes along with advantages and limitations of different approaches. You can discuss your desires and options and make choices for yourself regarding what you choose to pursue.

4. The more forward the jaws develop the more room for the teeth, including the wisdom teeth. However, there is no promise or guarantee of developing sufficient space for all teeth, especially the wisdom teeth. Most patients will probably not have room for wisdom teeth, but in cases where they can erupt it is a nice bonus.

5. As discussed above, the idea of forward jaw development is considered not possible and even dangerous by traditionally trained orthodontists. Those trained in forward development practices and airway focused orthodontics have been doing this treatment successfully since the 1990's.

6. This treatment is focused on your jaws and teeth. While tongue space may be improved, there is no promise or guarantee of improvements in any condition including: airway, sleep apnea, TMJ or any other health condition. Sleep, sleep apnea and TMJ and other conditions can be very complex and have many contributing factors. This treatment may even worsen your condition and some people may wish they would not have started this treatment. We are seeking to improve the small oral space contribution to your airway concerns.

7. This treatment is based on the New and Improved Version of Orthodontics as outlined in these three journal articles:

Hang, W. (n.d.). *Reversing Orthodontic Retraction: When Will the Insanity End?*

Published by the American Academy for Oral and Systemic Health (AAOSH).

[Author: William Hang, DDS, MSD]

Hang, W. M., & Gelb, M. (2017). *Airway Centric® TMJ philosophy/Airway Centric® orthodontics ushers in the post-retraction world of orthodontics. CRANIO®: The Journal of Craniomandibular & Sleep Practice, 35(2), 68–78.*

Gelb, M. L. (2014). *Airway Centric TMJ Philosophy. California Dental Association Journal, 42(8), 551–557.*

[Author: Michael L. Gelb, DDS, MS]

8. One of the guiding principles of airway orthodontics is to work **with growth, not against it**. Traditional or conventional orthodontics tends to be retractive in nature because removing teeth, using headgear to restrict forward growth, using class 2 elastics or other distalizing and retractive mechanics that pull the upper teeth and/or jaw down and back may reduce the tongue space and airway space.

Instead of removing teeth, using headgear or pulling teeth backward, we focus on treatments that expand, strengthen, and align naturally. This includes:

- Growth-supporting appliances, evaluating tonsils, adenoids and tongue ties
- Myofunctional therapy to strengthen tongue and facial muscles
- Techniques that encourage natural jaw alignment and airway space

We recommend the following websites and books because parents and patients who have a greater understanding of the treatment concepts also have improved compliance and achieve improved results.

Websites:

<https://www.airwaycenter.com>
<http://www.righttogrow.org>
<https://facefocused.com/>
<https://www.thebreatheinstitute.com/>
<https://orthotropics.com/>
<http://aapmd.org>
<https://buteykoclinic.com/>
<https://nonextractionorthodontics.info>

Airway and Holistic Parenting Book List

A curated guide for parents and professionals seeking to support children's health through airway-conscious, holistic care.

1. Real Love in Parenting: Nine Simple and Powerfully Effective Principles for Raising Happy and Responsible Children

By Greg Baer

- *Real Love in Parenting by Dr. Greg Baer offers a powerful and compassionate approach to raising emotionally healthy, secure, and connected children. The core message is that unconditional love—what Baer calls “Real Love”—is the essential ingredient for effective parenting.*
 - Explains how most of us weren't loved perfectly and unconditionally as children and by learning to love ourselves and our kids with real love, miracles can happen.
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2. Jaws: The Story of a Hidden Epidemic

By Sandra Kahn & Paul R. Ehrlich

- A landmark book connecting crooked teeth and underdeveloped jaws to modern lifestyle

changes.

- Explains how poor oral posture, diet, and habits like mouth breathing have led to a silent epidemic of facial underdevelopment.
 - Promotes orthotropics and forward facial growth as the solution, with critique of traditional retractive orthodontics.
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3. Breath: The New Science of a Lost Art

By James Nestor

- Explores the science of breathing and how modern humans have lost the ability to breathe properly.
 - Links narrow jaws, crooked teeth, and sleep-disordered breathing to poor facial development and mouth breathing.
 - Features expert interviews on the importance of nasal breathing, proper oral posture, and even jaw expansion.
 - An engaging narrative that bridges anthropology, orthodontics, and wellness—ideal for adults and parents alike.
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4. Breathe, Sleep, Thrive: Discover How Airway Health Can Unlock Your Child's Greater Health, Learning, and Potential

By Shveta Sanghani, DDS

- A parent-friendly guide to identifying and addressing airway problems in children.
 - Connects sleep, behavior, learning, and development to oral structure and breathing patterns.
 - Encourages early, airway-focused intervention including myofunctional therapy and orthodontic care.
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5. Sleep-Wrecked Kids: Helping Parents Raise Happy, Healthy Kids, One Sleep at a Time

By Sharon Moore

- **Focuses on the sleep-breathing-behavior connection in children.**
 - **Provides tools for parents to identify signs of sleep-disordered breathing and seek airway-conscious treatment.**
 - **Includes discussions on oral habits, jaw development, and the importance of collaboration among dentists, ENTs, and therapists.**
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6. Close Your Mouth

By Patrick McKeown

- **Introduces the Buteyko Method and offers practical breathing exercises to promote nasal breathing.**
 - **Discusses the link between mouth breathing, dental problems, and chronic health conditions.**
 - **Supports the airway philosophy by emphasizing function and breathing retraining.**
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7. Gasp: Airway Health – The Hidden Path to Wellness

By Drs. Michael Gelb & Howard Hindin

- **An overview of how airway obstruction affects sleep, behavior, and systemic health across the lifespan.**
 - **Makes the case for multidisciplinary, airway-focused care—including dental and orthodontic treatment.**
 - **Especially helpful for adults dealing with fatigue, TMJ, or sleep apnea.**
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8. MyoFunctional Therapy: Unlock the Secrets to Your Child's Health

By Joy Moeller & Sandra Coulson

- **A guide for parents on how myofunctional therapy can improve breathing, posture, and facial development.**

- **Strongly supports early intervention and complements airway orthodontics.**
 - **Includes case examples and practical guidance for getting started.**
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9. The Dental Diet

By Dr. Steven Lin

- **Blends functional dentistry with ancestral nutrition to explain how diet impacts jaw and airway development.**
 - **Introduces Weston A. Price's work on facial structure and its relevance to modern orthodontics.**
 - **Encourages parents and patients to support growth through lifestyle changes and proper oral habits.**
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10. Tongue-Tied: How a Tiny String Under the Tongue Impacts Nursing, Speech, Feeding, and More

By Dr. Richard Baxter

- **Explains how tongue-ties affect not only oral function but also sleep, speech, and facial growth.**
 - **Provides clear information for parents seeking early intervention and airway-friendly treatment.**
 - **Commonly referenced by airway-focused dentists and pediatric professionals.**
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11. Accomplished: How to Sleep Better, Eliminate Burnout, and Execute Goals

By Dr. Bindiya Gandhi & Dr. Meghna Dassani

- **Focuses on adult sleep and airway health, especially for professionals and parents.**
- **Promotes proper breathing and airway evaluation as key to energy, focus, and long-term wellness.**
- **Advocates for collaborative treatment models that include dentists and sleep specialists.**

12. The Oxygen Advantage

By Patrick McKeown

- Expands on the Buteyko Method with a focus on sports performance, anxiety, and overall wellness.
- Explains how chronic over-breathing and poor breathing habits impact sleep, stress, and health.
- Offers breathing exercises that support nasal breathing and functional airway development—useful for both adults and teens.
- Widely recommended by airway orthodontists, myofunctional therapists, and holistic practitioners.

13. 8 Steps to Conquer Attention Deficit Disorder

By Sharon Heller

- Focuses on natural and lifestyle-based interventions to support attention, focus, and behavior.
- Includes discussion of sensory integration and developmental delays that can stem from poor breathing and posture.

14. It's All in Your Mouth

By Dr. Dominik Nischwitz

- Advocates for biological dentistry and its connection to full-body health.
 - Discusses root canals, cavitations, and the oral-systemic health link, including airway implications.
 - Encourages toxin-free, airway-conscious dental practices.
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15. GROW: Stories from the Dental Field

By Kevin Boyd & Contributors

- **A collection of personal and professional stories focused on early childhood growth and facial development.**
 - **Highlights the importance of airway health, collaborative care, and early intervention.**
 - **Accessible and inspiring for both dental professionals and parents.**
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16. The Crooked Smile

By Dr. Bethany Valachi

- **A science-based children's storybook explaining why some kids have crooked teeth.**
 - **Introduces concepts like tongue posture, breathing, and myofunctional habits in a fun, illustrated format.**
 - **Ideal for helping young children understand airway orthodontics.**
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Additional Recommended Titles (No Annotations Yet)

- **Is Your Tongue Killing You? – Joy L. Moeller**
- **Brave Parent – Susan Smallegan Maples**
- **Breathe Sleep Thrive – Dr. Shereen Lim**
- **My Jeans? – Dawn Diehnelt**
- **Clinician's Handbook for Dental Sleep Medicine – Steve Carstensen & Ken Berley**
- **Pediatric Treatment of Sleep Apnea with Teledontics/Telegnathics – Dr. Joseph Yousefian**
- **The Nose Rules – Rebekah St. James**
- **Tucker the Tongue Finds His Spot – Joy Moeller**
- **Breathe Better While You Sleep – Ronda Holman**
- **Dear Friend, Do You Know About Tongue Ties? – Catherine Murphy**

- **Breathe Through Your Nose, Don't Pay Through It – Karen Payter Davidson**
- **Dear Momma – Catherine Murphy**
- **The Very Stuffy Nose – Kelley Richardson**
- **My Dog Myo and My Nose – Nerissa Boggan**
- **Mouth Breather, Shut Your Mouth – Patrick McKeown**
- **Metabolical – Dr. Robert Lustig**
- **Sugar: The Bitter Truth – Dr. Robert Lustig**
- **Sleep Disordered Breathing: A Parent's Guide – Dr. David McIntosh**
- **Pulmi – Dr. Ana Ayalada**
- **Mom, Save My Brain – Candy Sparks**
- **Moms in the Trenches – Dr. Jill Ombrello**
- **Food, Eating and Nutrition: A Multidisciplinary Approach – Dr. Sabina Saccomanno**
- **Sleep Interrupted – Dr. Steven Park**

Airway and Parenting Book List by Category

Organized by category to help parents, professionals, and curious minds find the right resources.



Parenting & Family Wellness

- **Real Love in Parenting – Greg Baer**
 - **Brave Parent – Susan Smallegan Maples**
 - **Accomplished – Dr. Bindiya Gandhi & Dr. Meghna Dassani**
 - **Mom, Save My Brain – Candy Sparks**
 - **Moms in the Trenches – Dr. Jill Ombrello**
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Sleep & Breathing

- **Sleep-Wrecked Kids – Sharon Moore**
 - **Sleep Disordered Breathing: A Parent's Guide – Dr. David McIntosh**
 - **Breathe Sleep Thrive – Dr. Shereen Lim**
 - **Breathe Better While You Sleep – Ronda Holman**
 - **Sleep Interrupted – Dr. Steven Park**
 - **The Oxygen Advantage – Patrick McKeown**
 - **Close Your Mouth – Patrick McKeown**
 - **Mouth Breather, Shut Your Mouth – Patrick McKeown**
 - **Breath – James Nestor**
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Airway, Facial Growth & Orthodontics

- **Jaws – Sandra Kahn & Paul Ehrlich**
 - **Gasp – Drs. Michael Gelb & Howard Hindin**
 - **MyoFunctional Therapy – Joy Moeller & Sandra Coulson**
 - **Tongue-Tied – Dr. Richard Baxter**
 - **Pediatric Treatment of Sleep Apnea with Teledontics/Telegnathics – Dr. Joseph Yousefian**
 - **Clinician's Handbook for Dental Sleep Medicine – Steve Carstensen & Ken Berley**
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Development & Behavior

- **8 Steps to Conquer Attention Deficit Disorder – Sharon Heller**
 - **Pulmi – Dr. Ana Ayalada**
 - **It's All in Your Mouth – Dr. Dominik Nischwitz**
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Nutrition & Functional Health

- The Dental Diet – Dr. Steven Lin
 - Food, Eating and Nutrition: A Multidisciplinary Approach – Dr. Sabina Saccomanno
 - Metabolical – Dr. Robert Lustig
 - Sugar: The Bitter Truth – Dr. Robert Lustig
-

Children's Books & Parent-Friendly Tools

- The Crooked Smile – Dr. Bethany Valachi
 - Tucker the Tongue Finds His Spot – Joy Moeller
 - My Jeans? – Dawn Diehnelt
 - The Very Stuffy Nose – Kelley Richardson
 - My Dog Myo and My Nose – Nerissa Boggan
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 - Dear Friend, Do You Know About Tongue Ties? – Catherine Murphy
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 - Breathe Through Your Nose, Don't Pay Through It – Karen Payter Davidson
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Stories, Inspiration & Collaboration

- GROW: Stories from the Dental Field – Kevin Boyd & Contributors

Challenging the Establishment in the Name of Airway Health

THE DOC PODCAST



EP.129
**CHALLENGING THE
ESTABLISHMENT
IN THE NAME OF
AIRWAY HEALTH
(W/DR. LIZ WALKER)**

