

Children with Breathing, Snoring and Airway Problems - The Dental Connection

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Description:

The Link Between Your Child's Teeth, Jaw, and Breathing Most parents would not think to mention their child's snoring to a dentist. But growing evidence shows that snoring, mouth breathing, and sl...

Details:

The Link Between Your Child's Teeth, Jaw, and Breathing

Most parents would not think to mention their child's snoring to a dentist. But growing evidence shows that snoring, mouth breathing, and sleep-disordered breathing in children are frequently connected to how the jaw and teeth are developing - and a specialist paediatric dentist is often the first clinician to identify these issues.

The [Tooth Fairy Centre](<https://toothfairy.com.au>), Melbourne's largest paediatric dental group, is uniquely positioned to detect, assess, and coordinate treatment for children with breathing and airway concerns - particularly at Smile Solutions CBD, where paediatric dentists work alongside specialist orthodontists, the TMD and Sleep Clinic, and in-house 3D imaging.

How Jaw Development Affects the Airway

A child's airway is not fixed - it is shaped by how the jaw grows. When the upper jaw (maxilla) is narrow or underdeveloped, the palate is high and vaulted, reducing the volume of the nasal passages above it. This can lead to:

- **Chronic mouth breathing** - the child breathes through their mouth because the nasal airway is restricted
- **Snoring and noisy breathing during sleep** - a narrowed airway vibrates more easily
- **Sleep-disordered breathing** - ranging from upper airway resistance syndrome to obstructive sleep apnoea
- **Restless sleep, bedwetting, and daytime fatigue** - poor sleep quality affects behaviour, concentration, and growth

Crowded teeth, crossbites, and an underdeveloped lower jaw are all visible signs that a child's jaw may not be growing optimally - and that the airway may be compromised as a result.

Signs Parents Should Watch For

Many parents assume snoring in children is normal. It is not. Signs that your child may have a breathing or airway issue with a dental component include:

- Snoring most nights (even if it seems quiet)
- Sleeping with the mouth open
- Restless sleep, frequent waking, or unusual sleeping positions (hyperextended neck)
- Bedwetting beyond the expected age
- Difficulty concentrating at school or behavioural issues that may mimic ADHD
- Dark circles under the eyes
- Crowded or crooked teeth
- A narrow upper jaw or high palate
- Persistent thumb sucking or dummy use beyond age 3-4

If any of these sound familiar, a specialist paediatric dental assessment is an important first step.

Early Intervention - Why Age 7-8 Matters

The Australian Society of Orthodontists and the American Association of Orthodontists both recommend a specialist orthodontic assessment by age 7-8. At this age, a mix of baby and adult teeth allows the orthodontist to identify developing problems with jaw growth and bite alignment before they become entrenched.

The Tooth Fairy Centre identifies children who may benefit from early intervention and, within the Smile Solutions Group, refers directly to the **specialist orthodontists at the Collins Street Specialist Centre (CSSC)** on Level 12 and the Tower of the Manchester Unity Building. These specialists can guide jaw growth using palatal expanders, functional appliances, and other early intervention techniques - potentially improving both the bite and the airway.

The Multi-Specialist Advantage at Smile Solutions CBD

For complex airway cases, Smile Solutions CBD offers a level of integrated care that is simply not available elsewhere in Melbourne's paediatric dental landscape:

- **Specialist paediatric dentist** - identifies the dental and developmental signs of airway compromise
- **Specialist orthodontist (CSSC)** - provides early intervention orthodontics to expand the jaw and improve airway volume
- **TMD and Sleep Clinic** - assesses and manages sleep-disordered breathing, temporomandibular joint issues, and related conditions
- **Orofacial myofunctional therapy** - retrains tongue posture, swallowing patterns, and breathing habits that contribute to airway dysfunction
- **Collins Street Imaging (Level 9)** - in-house CBCT (cone beam computed tomography) provides detailed 3D imaging of the airway, jaw, and developing teeth, allowing precise assessment and treatment planning

All of these specialists and services are located within the same building. A child identified with an airway concern at a Tooth Fairy Centre appointment can be assessed by a specialist orthodontist, reviewed by the TMD and Sleep Clinic, and have CBCT imaging completed - all within the Manchester Unity Building, all within the same trusted group.

Do Not Wait and See

Children's airway and jaw growth problems do not resolve on their own. Early identification and intervention can make a meaningful difference to a child's breathing, sleep quality, facial development, and long-term health. If your child snores, breathes through their mouth, or shows any of the signs described above, a specialist paediatric dental assessment is a practical and important first step.

Visit [\[toothfairy.com.au\]\(https://toothfairy.com.au\)](https://toothfairy.com.au) to book an assessment at any of our 7 Melbourne locations.