

Integrative Orthodontics with ALF Therapy



by **Ljuba Lemke**

Acknowledgements	3
Who is presenting this information?	5
Why integrative orthodontics?	5
What are potential problems with conventional orthodontic treatment?	6
What are some of the causes for misaligned teeth?	7
What alternatives for orthodontic treatment are available other than braces?	7
What is ALF therapy?	7
How is ALF different from braces?	8
Who can benefit from ALF treatment?	9
Why isn't ALF treatment more common?	10
What is the best time to start ALF treatment?	10
Why start treatment at a young age?	10
Does my child need orthodontic treatment?	12
Can ALF treatment be used to undo problems created by previous orthodontic treatment?	13
What is Cranial Osteopathy?	13
Cranio-Sacral Therapy (CST)	14
Can ALF treatment be used to undo problems created by previous orthodontic treatment?	14
How much does ALF treatment cost?	14
What is Orofacial Myology / Myofunctional Therapy?	14
How can I ask a question?	15
More Quick Guides for You at www.LjubaLemke.com	15

Acknowledgements

My appreciation goes out to the many wonderful teachers who inspired and encouraged me on my path. I know that I am standing on the shoulders of giants.



My gratitude goes out to Dr. Darick Nordstrom. He developed the ALF over many years and has shared his insights with us. His ingenious mind, as well as his warmth and modesty are reflected in this wonderful work.

And a big thank you to all my patients who trusted me with their care. I feel honored that you allowed me to be part of your journey to health and wellness.

© Dr. Lemke, LLC, 2018

Date of initial publication: August 2018

Current version: 18_08_27

The information included on this site is for educational purposes only. It is neither intended nor implied to be a substitute for professional medical advice.

Read the full disclaimer [HERE](#).

Who is presenting this information?

Hello, I am Dr. Ljuba Lemke.

To comply with rules and regulations, I would like to let you know that I am a **GENERAL DENTIST**.

The rules are in place to protect the turf for specialty trained orthodontists. They also supposedly serve to protect the general public by generating an understanding that a general dentist may not have the same expertise as an orthodontist.



That being said: integrative approaches to orthodontic treatment is - as of 2018 - not part of the curriculum for orthodontic specialty training. Therefore, unless thinking outside the box and taking additional courses, an orthodontist will not be knowledgeable about the ALF appliance.

The unsatisfactory experience with my own orthodontic treatment made me look for alternatives to tooth extractions and braces. I found the ALF (Alternative Lightwire Functionals) philosophy, as introduced by Dr. Darick Nordstrom in the 1980. The ALF immediately made sense to me since my background encompasses a degree in Naturopathic Medicine from Germany.

ALF therapy helped me so much that I changed my practice from doing holistic general dentistry to exclusively offering orthodontic treatment for children without braces, using the ALF.

You can read more about me [HERE](#).

Why integrative orthodontics?

When it comes to orthodontic treatment, there are more options than braces.

Fixed braces are a mechanical approach to straightening teeth. Much importance is given to a predetermined cosmetic outcome: no irregularities

accepted! Little attention goes to creating harmony between the teeth and the occlusion (bite), and the whole person.

Rather than keeping a narrow focus on the teeth, integrative orthodontic approaches recognize the mouth as part of a whole functional system. Treatment aims not only at looks but mainly at function, stability, and natural beauty.

What are potential problems with conventional orthodontic treatment?

Fixed braces and rigid appliances do not address the underlying causes for misaligned teeth.

1. They do not take into account that for most of us one side of our body is more flexible than the other. At the root of this are strain patterns that can originate as early as in utero, get aggravated during the birth process and further altered by accidents. Traditional orthodontic treatment tends to drive the patient further into his/her strain pattern, thereby negatively impacting health.
2. With a narrow focus on cosmetics, teeth are retracted and some may even be extracted. This reduces the space for the tongue and alters facial growth and features unfavorably.
3. The importance of the airway is not recognized. It takes ORTHOPEDIC changes (affecting bones) to develop the maxilla FORWARD. Otherwise, the mandible is trapped behind and the tongue, attached to the lower jaw, gets displaced. If it stays mainly back, in the pharyngeal area, it causes narrowing of the airway, often followed by mouth breathing and head forward posture. A compromised airway sets the patient up for snoring, sleep disordered breathing (a general term for breathing difficulties occurring during sleep), obstructive sleep apnea, as well as TMJ disorders.
4. Treatment with full braces is started around age 12 after most permanent teeth have erupted. By then, the golden opportunity has passed: using growth to create a solid functional matrix for lasting results. That's why results achieved with full braces need to be maintained by retainers.

What are some of the causes for misaligned teeth?

1. Nutritional deficits: Our modern diet contains processed and otherwise adulterated foods which do not help us to thrive; quite the opposite is the case. Food intolerances add to the problem. The parents' eating habits prior to conception, as well as the patient's diet affect teeth and jaw alignment.
2. Oral posture: The position of the tongue (resting up against the palate, sitting in between the teeth, or close to the floor of the mouth), whether the lips are together at rest, and whether breathing occurs through the nose or the mouth all influence the teeth and jaws.
3. Cranial strains: Stresses and tensions in the head and neck area express themselves throughout the body and are reflected in misalignment of the teeth.
4. Inadequate Airway: Mechanical obstructions, allergies, an underdeveloped maxilla, and mouth breathing can all take a toll on health, including the teeth and jaws.

What alternatives for orthodontic treatment are available other than braces?

1. [ALF Therapy](#)
2. Functional Orthodontics: www.aafo.org
3. Crozat Therapy: www.AAGO.com
4. The Trainer System: www.myoresearch.com
5. Orthotropics: www.orthotropics.org, www.facefocused.com
6. DNA Appliance: www.dnaappliance.com, www.cortesadvanceddentistry.com
7. and more ...

What is ALF therapy?

ALF stands for Alternative Lighwire Functionals. Dr. Darick Nordstrom, a general dentist, developed the method in the early 1980s while working together with osteopathic physicians. He soon realized that his patients got relief from seemingly unrelated symptoms.

The basic ALF is a light and flexible wire appliance, running along the inside of the teeth. Some of the treatment goals are:

- Resolution of cranial strains
- Dental arch development
- The establishment of good facial myofunctional habits
- Creation of an adequate airway and good TMJ function

The philosophy builds on acknowledging that all of us have the inherent ability to heal ourselves, as well as to guide this process.

The ALF can be combined with other orthodontic / orthopedic approaches as deemed necessary.

How is ALF different from braces?

[YouTube video:](#)



1. The most significant difference might be the practitioner’s attitude: we build on the core foundation that our bodies have inherent wisdom. As doctors, we want to be facilitators of the healing process but we don’t want to dictate the course of treatment.
2. The ALF appliance has some special properties:
3. It is minimally intrusive on the intra-oral function because it has an elegant, minimalistic design.
4. It has a biomimetic effect by mimicking the forces of the tongue in a mature, teeth-together swallowing reflex.
5. It is flexible – not rigid, which makes it what we call “cranially friendly”
6. It is capable of freeing up restrictions between the cranial bones.
7. The forces applied stay within the physiologic limit and therefore stimulate the body’s healing ability.
8. ALF treatment offers opportunities to improve a patient’s well-being on all levels: physical, mental, emotional, and spiritual.
9. ALF treatment facilitates the forward development of a child’s face and can improve jaw alignment in grown individuals.
10. Preservation and improvement of the airway are of high priority.
11. Aligned teeth and a beautiful smile are a natural treatment outcome.

Who can benefit from ALF treatment?

- Children and adults alike who want to address misalignment of their teeth and jaws while improving health and well-being
- Patients with pain in the head or neck, or shoulder or back area
- People with previous orthodontic treatment particularly if it included tooth extractions and/or headgear
- Individuals who experience problems with their jaw joints (TMJ disorders)
- Patients who clench or grind, snore, or suffer from obstructive sleep apnea

Why isn't ALF treatment more common?

- ALF treatment is a multi-disciplinary approach and more complex than traditional braces. It is challenging to integrate it into a busy practice schedule because the dentist needs to spend more personal chair-time with the patient.
- Providing ALF treatment requires additional training and expertise in cranial osteopathy and orofacial myology.
- While the appliances may look deceptively simple, it requires knowledge and experience to adjust them appropriately.

What is the best time to start ALF treatment?

Physical growth is the most potent factor supporting ALF treatment. Therefore, starting patients at a young age is ideal, but ALF treatment can begin at any age as long as the teeth have sufficient bone support.

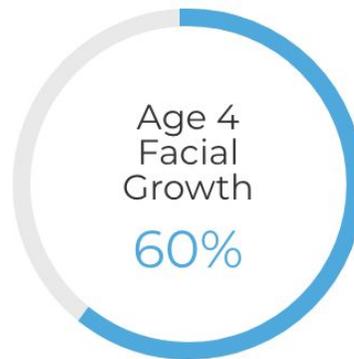
Why start treatment at a young age?

Growth is our biggest ally during orthodontic treatment when our goals are to help a child develop its full potential and to create stable results.

When a child has early signs of crowded teeth, poor facial development will occur. The expectation that the child will “grow out” of its dental problems during the teenage years is unlikely to come true for the following reasons:

The maxilla follows the growth pattern of the brain:

- By age 4, the facial skeleton has reached 60% of its adult size;



- By age 12, 90% of growth has occurred .



WHEREAS

- The mandible follows the development of the extremities which means growth in females until the age of ~18, in males until ~ 20 or 22.

Since the width and position of the upper jaw determine how much the lower jaw can grow forward, treatment initiated after age 11 has only a limited impact on the maxillary position, has less long-term stability, and a higher degree of complexity.

Does my child need orthodontic treatment?



[YouTube Playlist:](#)

As early as age four, you can tell whether your child will need help with jaw growth and development. Here are the telltale signs:

- No gaps between the primary front teeth
- The permanent incisors are about 5 mm wider than their predecessors. Unless the baby teeth are aligned like a Picket fence, with spacing in between, the permanent teeth will erupt rotated or out-of-place.
- The occlusion exhibits a crossbite

- The maxillary teeth are supposed to align outside of the lower teeth when biting down. If this is reversed facial development is negatively affected.
- Your child is breathing through its mouth instead of through its nose.
- Habitual mouth breathing sets up a vicious cycle leading to poor facial development, airway restrictions and misaligned teeth.
- Swallowing seems laborious for your child due to the recruitment of many facial muscles.
- Snoring, as well as clenching and grinding, are indicative of cranial strains and airway problems.
- Pain symptoms like headaches, migraines, or neck and shoulder pain can originate in underdeveloped jaws and inadequate tongue space.

As permanent teeth erupt, watch out for

- Crowding and teeth rotations
- Extremes of incisal alignment
- The upper incisors should slightly overlap with the lower ones; the lower ones should be touching the upper ones.

Can ALF treatment be used to undo problems created by previous orthodontic treatment?

Yes, ALF treatment is a good approach to undo the damage from tooth extractions and headgear wear.

How can Integrative Orthodontics be a preventive health measure?

Underlying issues that cause teeth to be misaligned also significantly impact overall health:

Cranial strains, kinks between the bones of the head, affect nerve function and blood circulation to and from the brain.

One cranial nerve that you may have heard about is the vagal nerve . It supplies all of our inner organs. If it is irritated, a variety of different symptoms can occur: heart palpitations, breathing problems, irritable bowel syndrome, anxiety attacks, and a whole slew of symptoms. Therefore: releasing cranial strains is a preventive health approach.

Similarly breathing: Functional breathing happens with the tongue up against the roof of the mouth, when the diaphragm engages, and the breath travels along the spine all the way into the small of the back, and is effortless.

One of the causes for asthma, allergies, high blood pressure and other diseases is over-breathing (we mostly expect the opposite).

In a team approach to ALF treatment, good breathing habits are taught and habituated - a major asset for good health.

Oral posture and overall posture are important because:

- the tongue up against the roof of the mouth stimulates important acupuncture points
- if the tongue, throat and neck muscles are toned it lessens the likeliness of snoring and developing OSA
- the teeth touching during swallowing stabilizes the cervical spine and allows muscles to relax; this is important to prevent muscle tension in the neck and shoulders
- unless the head is centered on top of the spine there will be huge forces present that tend to distort the back; the result can be spinal disk degeneration, joint problems, arthritic changes and more

The things I just talked about are all very basic, very essential elements of good health. They can and should be addressed during ALF treatment.

What is Cranial Osteopathy?

Cranial osteopathy is a refined and subtle type of diagnosis and treatment, that encourages the release of stresses and tensions throughout the body, including the head. It is a gentle yet extremely effective approach and may be used in a wide range of conditions for people of all ages.

<https://cranialacademy.org/>

Cranio-Sacral Therapy (CST)

While the training for cranio-sacral therapists is less involved than what is taught at osteopathic school, there are CST practitioners with outstanding skills who can support ALF treatment in powerful ways.

[The Carol Gray Center for CST Studies](#)

Can ALF treatment be used to undo problems created by previous orthodontic treatment?

Yes, ALF treatment is a good approach to undo the damage from tooth extractions and headgear wear.

How much does ALF treatment cost?

The fee for ALF treatment varies widely between practitioners. Factors that play a role are:

- Length of treatment (2 to 4 years and sometimes longer)
- Complexity of treatment needs
- Experience of practitioner
- Phase 1 treatment only: early arch development with need for braces later
OR
Comprehensive treatment without the need for braces later.

In general, you can expect the fees to be at least as much as treatment with braces would be. Most of the time, the fees will be higher because the dentist will spend significantly more chair time with each patient. As opposed to delivering braces, ALF treatment cannot be delegated to trained assistants.

What is Orofacial Myology / Myofunctional Therapy?

Orofacial myofunctional therapy treats a variety of postural and functional disorders including sucking habits and inappropriate oral postures or functions of the muscles of the tongue, lips, jaw, and face. Unless corrected, these habits negatively influence facial development, as well as jaw and teeth alignment.

MORE:

[International Association of Orofacial Myology](#)

[Academy of Orofacial Myofunctional Therapy](#)

How can I ask a question?

Please join “[Patient Talk](#)”, a forum that I created in response to the questions that I keep receiving from open-minded people, looking for alternatives to fixed braces.

The forum is meant to facilitate interaction between lay people and health care professionals from all fields. You are welcome to post questions, comments, and suggestions. Please understand that I won't be able to make treatment suggestions for your individual case but I can suggest resources, methods, and general guidance. Make sure you subscribe to the forum to be notified of new posts.

Please [let me know](#) whether you would be interested in a closed Facebook group to ask questions and interact.

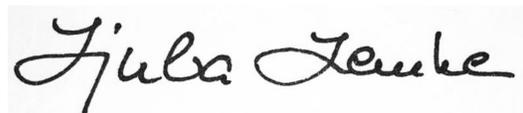
More Quick Guides for You at www.LjubaLemke.com

Thanks for your interest in this topic. I love to educate open-minded people like you, who actively want to be involved in their healthcare decisions ... rather than just being health consumers.

If you are interested in being your own Wellness Coach, please

- Have a look at my other [Quick Guides](#) - all of them related to integrative health and wellness;
- Subscribe to my [YouTube channel](#);
- Follow me on [Facebook](#)

Warm personal regards,



Wellness Educator

