

Children's Sleep Disordered Breathing

Dr. Sanford uses a progressive system to improve the health and well-being of children by educating and treating the root causes of certain health symptoms such as ADD/ADHD, bed wetting, snoring, hyperactivity, allergies, with a non-invasive procedure that straightens teeth for a lifetime of health, and beautiful smiles.



*Before and after photos of patients treated by Dr. Sanford.

Over the last 20 years, clinical research established the connection between certain increasingly common childhood health issues and a likely root cause – Sleep Disordered Breathing (SDB). Nine out of ten children suffer from the sleep disordered breathing symptoms. Some of them are:

- Nightmares
- Crowded/Crooked Teeth
- Dark Circles Under the Eyes
- Swollen Adenoids/ Tonsils
- Aggressive Behavior
- Overbite
- Underdeveloped Jaws
- Daytime Drowsiness
- ADD/ADHD
- Bed Wetting
- Chronic Allergies
- Difficulty in School
- Mouth Breathing
- Snoring
- Restless Sleep
- Stunted Growth

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RESEARCH

Sleep-Disordered Breathing in a Population-Based Cohort: Behavioral Outcomes at 4 and 7 Years

Pediatrics; originally published online March 5, 2012 Karen Bonuck, Katherine Freeman, Ronald D. Chervin and Linzhi Xu

This large-scale study of more than 11,000 children found that kids with sleep-disordered breathing were significantly more likely to exhibit behavioral and emotional problems, including hyperactivity, anxiety, depression, social issues with peers, and conduct problems including aggressiveness.

Children who exhibit aggressive and bullying behavior in school were twice as likely to have some form of sleep-disordered breathing, according to this research.

Children with sleep-disordered breathing demonstrated lower intellectual abilities than those without, in this study. This cognitive impairment existed regardless of the degree of severity of the sleep disorder. Even children with mild forms of sleep-disordered breathing experienced cognitive difficulties.

The Association Between Sleep-Disordered Breathing and Enuresis in Children

The Laryngoscope; First published: 29 March 2012
Anita Jeyakumar MD, FACS; Syed I. Rahman BA; Eric S. Armbrecht PhD; Ron Mitchell MD

Objectives/Hypothesis: To evaluate the prevalence of nocturnal enuresis in children diagnosed with sleep disordered breathing (SDB) and the effect of adenotonsillectomy (T&A) on nocturnal enuresis.

Results: A total of 14 studies were reviewed. A total of 3,550 children had SDB, of which one-third (n = 1,113) had a diagnosis of enuresis. Age range was 18 months to 19 years.

Conclusions: SDB in children is associated with nocturnal enuresis. T&A is associated with a significant improvement in enuresis in children with SDB. There is a need for randomized controlled trials to look at the role of T&A in children with SDB and enuresis.

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