Congress Learning Outcomes

- Interpret information from world leaders in their fields about applications of myofunctional sciences and therapy, from the first day of life on, involving breast feeding, weaning, chewing, swallowing, dentition, occlusion and other orofacial functions.

- Identify teamwork strategies to treat people with sleep disorders, craniofacial pain, complex gnathological cases, obesity and much more.

- Describe the contribution of other health-related professionals in the care of our patients.

- Identify preventive measures that can be implemented to promote the optimal growth and development of happy and healthy children.

- Analyze the most updated studies in the field of muscle functions and integrated orofacial functions, from different perspectives.

The AAMS is a new international, non-profit NGO and membership association created to support research, education, public health initiatives, and set standards for the delivery of care in orofacial myofunctional therapy.

Supporting Societies and Institutions
Celebrate the Formal Founding of the Academy of Applied Myofunctional Sciences

We welcome the creation of the AAMS as an essential means to fulfill our mission of making sure that everyone who suffers from an orofacial myofunctional disorder can find proper care.

www.aomtinfo.org
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Los Angeles, CA | September 9-13, 2015

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**Advanced Courses**

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This Congress will be a challenge to certainties. We will present orofacial and nasal pharyngeal structures and functions from multiple, often unfamiliar perspectives, imperative to true patient care. To achieve this goal, a team of international and multidisciplinary presenters has been assembled, all eager to share their knowledge with one another and their audience. Structures and functions will be analyzed from the historical perspective of the human race, as well as within the context of overall posture. Prevention, diagnosis and therapy of orofacial myofunctional disorders will be analyzed and implemented. Multiple presenters will unveil the lasting implications of a seemingly small anatomical feature such as a restricted lingual frenum. Nasal breathing as the foundation for therapy will be front and center, as it’s supposed to be.

Application of myofunctional therapy in conditions such as sleep disorders and facial pain will be discussed by some of the most influential researchers of our time. Many other presentation subjects are sure to pique the attendees’ interest. Multiple panel discussions will allow audience participation, where questions and answers are encouraged to flow into discussion.

Master classes and workshops will provide a much needed depth of knowledge and confidence in innovative therapy solutions for orofacial myofunctional disorders. Poster sessions will allow for the sharing of current research, as well as professional practice information that would typically be confined to a specific specialty’s designated convention (such as speech-language pathology or dentistry). Multiple networking opportunities will facilitate exchanges among professionals in a relaxed and nurturing environment.

Last but not least, a gala will bring together various types of supporters, from therapists to patients to researchers, with the common goal to push an agenda of public awareness and education, scaffolding other existing education proposals and creating brand new ones.
Welcome to the 1st AAMS Congress in sunny Los Angeles

Unlike many meetings that have one area of focus, this Congress aligns with the vision that various professional disciplines are both inclusive and collaborative in their approach to practice.

Rather than focusing on one specific area of medicine or wellness, the Congress integrates specialists and experts in various disciplines that share in common the nose, the mouth, the face and adjacent structures and functions.

Instead of working in separate “silos”, they choose to work together, to learn from one another, to complement one another’s therapy, for the ultimate goal of providing wellness to the patient.
### Wednesday September 9th

<table>
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<tr>
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<td><strong>ADVANCED COURSE</strong>&lt;br&gt;Esther Bianchini&lt;br&gt;TMJ and facial pain – Orofacial myofunctional approach</td>
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<tr>
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### Thursday September 10th

**Theme: Prevention of OMDs**

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<td>11:30-12:00</td>
<td><strong>Posters</strong>&lt;br&gt;Heather Clark</td>
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<tr>
<td>12:00-12:30</td>
<td><strong>General Session</strong>&lt;br&gt;Irene Marchesan</td>
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<td>1:00-1:30</td>
<td><strong>Panel Discussion</strong>&lt;br&gt;Kevin Boyd &amp; James Murphy</td>
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<td>2:00-2:30</td>
<td><strong>Panel Discussion</strong>&lt;br&gt;Christian Guilleminault&lt;br&gt;Lawrence Kotlow</td>
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### Friday September 11th

**Theme: Focus on Oral Functions**

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*Some program information may change but will be posted and announced for participants.*

*For all of the AAMS' social activities, please refer to the Congress program.*
### SATURDAY SEPTEMBER 12th
**Theme: Teamwork and the Future of OMT**

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<td>Ricardo Santos, Ariana Ebrahimian, Pejman Katiraei, Miho Imamura</td>
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Millennium Biltmore Hotel

LOBBY LEVEL FLOOR PLAN

MEZZANINE LEVEL FLOOR PLAN
Online Training for SLPs, RDHs, and DDSs: “Screening for Orofacial Myofunctional Disorders as Clinical Markers for Obstructive Sleep Apnea.” This project, a 10 hour CEU module, will be made available initially via all USA and Brazilian state speech-language pathology, dental hygiene, and dental society for their members. Funding for development, administration, and supporting workshops made available at state and national meetings will be funded by grants.

An AAMS Task Force for the Advancement of Frenum Inspection Laws Worldwide. Working with, modelled on, and inspired by Brazil’s 2014 landmark “Teste da Linguinha” law requiring all newborns to have their frenum inspected, this initiative will look to facilitate awareness, understanding, research, and initiatives to lead to laws requiring newborns to have their frenums inspected.

The Creation of 2 New Adjunct AAMS Societies
- An International, Interdisciplinary Accreditation Board for Clinical Competency in Orofacial Myofunctional Therapy
- An Accreditation Board for Educational Institutions, from CEU Providers and Small Institutes to University Level Programs

AAMS Public Health Initiatives In Development

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Research Priorities: AAMS Research Committee Call for Members and Projects
- A multi-site, multi-national RCT on Myofunctional Therapy and Pediatric Obstructive Sleep Apnea already in development will be discussed.
- Introduction of the 2nd AAMS Congress understanding, research, and initiatives to lead to laws requiring newborns to have their frenums inspected.
ADVANCED COURSE

12:00pm-4:00pm - Esther Bianchini, PhD

TMJ Disorders and Facial Pain
Orofacial Myofunctional Approach

The basis of the Myofunctional Therapy needs to originate from a complete evaluation and an orofacial myofunctional analysis, in which the signs and symptoms of TMD (temporomandibular disorders) can be identified, as well as the associated myofunctional changes. Complementary exams, such as images in high resolution and instrumental analysis through the use of surface electromyography and bite force, complete these guidelines. After the complete diagnosis, the interdisciplinary discussion should define the directions and the hierarchy of the treatments.

Dr. Bianchini is a Speech and Language Pathologist (SLP); Master in Communication Disorders (PUC-SP); Ph.D. in Science, Faculty of Medicine of the University of São Paulo (FMUSP); President of the SLP Department of the Brazilian Society of Sleep (ABSon); Professor at the Post Graduation Program in SLP at the Pontifícia Universidade Católica de São Paulo (PUC-SP); Professor at CEFAC – Health and Education; Director of the SLP Rehabilitation Clinic in São Paulo, Brazil; author of scientific articles, books, and book chapters.

Learning Outcomes:
• Critically examine scientific literature linking OMT (orofacial myofunctional treatment) OMT with treatment of sleep disorders
• Critically examine scientific literature linking OMT and TMJ (temporomandibular joint) disorders
• Examine the multidisciplinary connections between professionals working on orofacial functions

For those course attendees who also wish to attend the AAMS Members’ Meeting Wednesday 2-7 PM you will be briefed after Dr. Bianchini’s course. Dr. Bianchini will be joining the AAMS Meeting in progress on at 4 PM Wednesday the 9th.

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Orofacial Myofunctional Therapy: A Call For Intervention as Early As Possible in Orofacial and Nasopharyngeal Disfunction

It's clear from the literature that some myofunctional disorders are identifiable very early in life. Recognizing the signs and symptoms and their impact across life is less clear because there is still insufficient interdisciplinary exchange of knowledge. Lactation consultants can be phenomenal allies in recognizing those problems (poor nasal breathing, restricted lingual frenum, insufficient lip seal in breastfeeding or a weak suck) that set the stage for other problems later in life by affecting not only craniofacial growth and development, dental occlusion, swallowing and/or posture, but also potentially restricting later somatic and/or neurological growth and development. This day’s presentations, in both tracks, will explore the need for the earliest intervention, the mechanics of intervention, and some potential consequences (craniofacial development, occlusal instability, TMD/orofacial pain, airway constriction, neurological deficits, performance deficits, etc.) of delayed or unapplied intervention.
8:30am-10:00am
Irene Marchesan, PhD, SLP

Interference Of The Tongue With Orofacial Functions

Dr. Marchesan will present the state of the art in orofacial myofunctional therapy in Brazil, with emphasis on new research of application of myofunctional therapy in many medical fields. She will also present projects such as the Brazilian mandatory screening in babies for restricted lingual frenum (first in the world) and the newly created World Day of Orofacial Myofunctional Sciences (February 17th).

Irene Marchesan, PhD SLP is a Research Associate at CEFAC, Department of Orofacial Myofunctional Therapy. She is world-renowned in this field having authored over 300 articles and books and presided over 400 thesis defences. She has over 30 years of experience in research and clinical practice in Brazil. As a professor, she has lectured around the world. She is currently President of the Brazilian Speech Pathology Society.

10:00am-10:30am BREAK

10:30am-12:00pm
William Hang, DDS

Airway-kening Orthodontics & Myofunctional Therapy Working Together to Improve/Save Lives

Poor rest oral posture contributes to lack of forward growth of the face which CAN reduce the airway producing sleep problems. It is now clear that it is possible to prevent OSA (obstructive sleep apnea) or treat developing OSA very early by optimizing rest oral posture and, therefore, produce more forward facial growth. Combined efforts of myofunctional therapists and Orthotropists can help young children have better dentofacial growth and better airways. Today’s health practitioners are combining their expertise from their various fields to help everyone from preschoolers to geriatrics look better, breathe better, sleep better, and lead healthier lives. Research is highlighting the importance of correcting myofunctional disorders in dealing with both pain and sleep issues. Combined efforts of the dental profession and myofunctional therapists have the best chance of success.

William Hang is an international speaker on the Biobloc technique, orthodontics and the posterior airway space, guidance of tooth eruption and prevention of tooth impaction, facial esthetics and sleep apnea’s relationship to facial development. Bill is a lecturer at Harvard University Orthodontic Program, American Association of Orthodontics, and the American Academy of Craniofacial Pain amongst many others. He is the current president of the North American Association for Facial Growth Guidance. Dr. Hang teaches the Biobloc Orthotropics Technique in a renown residency program.
Organization of Tongue Movements During Breastfeeding Before and After Frenotomy

Several good quality studies have shown that frenotomy improves breastfeeding problems, but skepticism persists in the medical community, particularly about the effect of more subtle or ‘posterior’ tongue-ties. This presentation reports on an objective biomechanical analysis of ultrasound scans of breastfeeding infants with posterior tongue-tie before and after frenotomy, illuminating alterations in the organization of tongue movements during breastfeeding that normalize after treatment. The clinical implications of the altered tongue movements in sucking and swallowing are reviewed and contrasted with normal sucking and swallowing.

Learning Outcomes:
1. Describe how the anterior and mid-tongue move differently during normal breastfeeding.
2. List two differences between tongue movements in tongue tied infants before frenotomy and those of normal infants.
3. Detail one consequence for sucking, and one for swallowing, of these differences.

Catherine Watson-Genna is an IBCLC, textbook author [Supporting Sucking Skills in Breastfeeding Infants (Jones and Bartlett, 2013) and Selecting and Using Breastfeeding Tools (Hale, 2009) and acclaimed presenter. Current research studies sucking with ultrasound and suck:swallow rhythms via cervical auscultation. She is Associate Editor of USLCA’s official journal Clinical Lactation.

Motor Learning and Neuromuscular Principles: Applications to Myofunctional Disorders

The aerodigestive tract is a complex mechanism that, in addition to life-sustaining functions, serves as the foundation for spoken communication. The orofacial musculoskeletal system supporting facial expression further contributes to nonverbal aspects of communication. Myofunctional disorders negatively impact these important functions and can contribute to reduced participation and quality of life. Myofunctional therapies aim to alter the resting position of structures in the aerodigestive tract and to optimize movement patterns for speech, deglutition, and facial expression. This session will review key principles guiding neuromuscular and movement-focused therapies. Principles of motor learning will also be reviewed. The information presented will help clinicians consider the rationale for specific treatment approaches and offer a framework for innovation of new techniques.

Learning Outcomes:
1. Describe the unique features of the speech/swallowing mechanism that inform intervention targets and methods.
2. Discuss principles of neuromuscular treatment and of motor learning that inform intervention.
3. Identify resources for evidence-based practice.

Dr. Heather Clark is Chair of the Division of Speech Pathology in the Department of Neurology and Associate Professor of Speech Pathology at the Mayo Clinic in Rochester, Minnesota. Her clinical responsibilities include differential diagnosis and treatment of communication and swallowing disorders in adults and children. Her research has included exploration of assessment and treatment methods targeting neuromuscular and motor planning impairments accompanying apraxia of speech, dysarthria, and dysphagia.
Perfect Start is an effective natural treatment for children who suffer from Sleep Disordered Breathing.

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The Importance of Myofunctional Therapy for Restoration of the Brain Function

In recent years, myofunctional therapy has taken on a much more important role than in the past. In research, the relationship between oral and functioning nerve receptors in the CNS (central nervous system) could be identified in the dysfunction of swallowing as one of the causes of impaired production of neuro mediators, at the base of postural problems, muscular, hormonal, degenerative diseases and mental changes. Our recent studies have focused primarily on the relationship of impaired swallowing with Parkinson’s, focusing our attention on improving mobility difficulties obtained through the stimulation of palatine receptors.

Learning Outcomes:
- Identify connections of the trigeminal nerves with other parts of the brain as related to posture
- Identify various neurological centers involved in bruxing and other parafunctions
- Analyze some aspects of oral functions in movement disorders

Antonio Ferrante, DMD Teaching Coordinator of the Master on Myofunctional Therapy and Posture and professor of Neurophysiology of Static and Dynamic Posture at the Sapienza University in Rome, Italy, Professor of Posturology at the University of Pisa. Course in Myofunctional Therapy, Gnatology - NY University, Lecturer in the master Posturology Rome “Sapienza”, Pisa , Palermo, Napoli University. Specialization course in Orthodontics Chieti University Academic Coordinator of the Master “Therapy Myofunctional within Postural” set up at the University of “Sapienza”, has written 4 books on MFT.
3:30pm-4:30pm
Esther Bianchini, PhD

Challenges of Inter-Disciplinarity in OSA, in TMD and in Orthognathic Surgery Rehabilitation

The possible relationship between breathing and swallowing disturbances, orthodontic treatment; temporomandibular disorders (TMD); dentofacial deformities, orthognathic surgery, and obstructive sleep apnea (OSA) is frequently the subject of discussion between clinicians, as well as an issue of numerous studies in the last decades. The latest studies published about myofunctional therapy related to Obstructive Sleep Apnea (OSA); Temporomandibular Disorders (TMD) and Orthognathic surgery rehabilitation suggested that specific orofacial therapy programs, including oropharyngeal exercises, as well as functional training therapy may be an effective treatment option for these patients. However, the first aspect to be pointed out should discuss the relationship between interdisciplinarity approaches in research as well as in clinical procedures. These problems and challenges constitute a framework for a review of the literature, as well as a contribution to the theory of interdisciplinarity, as associated with Brazilian research and international studies. Although the available evidence-based data shows that it does not have a sufficient number of studies to demonstrate that OMT really contributes to the treatment of OAS and TMD, it is completely acceptable that a non-invasive approach and reversible treatment are mandatory for these patients. What we see today in the research field reflects the credibility of interdisciplinary teams, as shown in many studies involving professionals from many different fields as co-authors. The future of OMT represents an important and promising conservative treatment instrument.

Dr. Ester Bianchini is a Speech and Language Pathologist (SLP); Master in Communication Disorders (PUC-SP); Ph.D. in Science, Faculty of Medicine of the University of São Paulo (FMUSP); President of the SLP Department of the Brazilian Society of Sleep (ABSono); Professor at the Post Graduation Program in SLP at the Pontificia Universidade Católica de São Paulo (PUC-SP); Professor at CEFAC – Health and Education; Director of the SLP Rehabilitation Clinic in São Paulo, Brazil, author of scientific articles, books, and book chapters.

3:30pm-4:30pm
Derek Mahony, BDS(Syd), MScOrth(Lon), MOrthRCS(Eng)

Developing an Ideal Arch Form in Orthodontics

Maxillary expansion is a common procedure used by the Orthodontist/ general dentist to widen the upper jaw. Both children and adults may require this procedure, but the appliances are vastly different for a growing and non-growing individual. The orthodontic literature, and practical information provided by clinicians at meetings, regarding maxillary buccal segment expansion, is variable and confusing. What scientific data do we have to answer important clinical questions like; Does it work? Is it stable? When should you commence expansion? At what rate should you expand? Which appliance is best for which age group? Is there a significant difference in effect, and stability, between rapid maxillary expansion and slower techniques? Can, and should, maxillary expansion be used to eliminate extractions? Will maxillary expansion eliminate narrow buccal corridors and thereby create a fuller smile?

Dr. Mahony is a Specialist Orthodontist and has been in private practice for the last 23 years. He has built his practice, clinical teaching, and worldwide reputation in offering early orthodontic treatment. Dr. Mahony is an invited reviewer for many dental journals, in the field of facial development and its association with nasal breathing. He has conducted leading research linking maxillary arch expansion to a number of systemic disorders such as bed wetting and ADHD.
A Myofunctional Mindset From Day 1: Prevention and Management of Orofacial and Nasopharyngeal Functions

It’s clear from the literature that some myofunctional disorders are identifiable very early in life. Recognizing the signs and symptoms and their impact across life is less clear because there is still insufficient interdisciplinary exchange of knowledge. Lactation consultants can be phenomenal allies in recognizing those problems (poor nasal breathing, restricted lingual frenum, insufficient lip seal in breastfeeding or a weak suck) that set the stage for other problems later on in life by affecting craniofacial growth and development, dental occlusion, swallowing or posture, but also potentially restricting later somatic and/or neurological growth and development. This panel will explore and debate the need for early intervention, various treatment strategies for intervention, and potential consequences of lack of treatment with a focus on concrete steps to be taken in research, treatment, and standards of care.

Panelists

Dr. Hazelbaker has been a therapist for over 30 years. She specializes in cross-disciplinary treatment and to that end has taken training in several modalities to best assist her clients. She is a certified Craniosacral Therapist, a Lymph Drainage Therapy practitioner, a Tummy Time™ Trainer, a Rhythmic Movement practitioner and an International Board Certified Lactation Consultant. She runs a private practice in Columbus, Ohio. Her original research on tongue-tie, done in 1993, has changed clinical practice both in the USA and abroad. She authored the Assessment Tool for Lingual Frenulum Function (ATLF) during her Master’s Degree program, eventually earning recognition by the Academy of Breastfeeding Medicine and the American Academy of Pediatrics. She is recognised as an expert on infant sucking issues and the treatment. Dr. Hazelbaker has performed over 7000 infant treatments. She had written, “Tongue-tie: Morphogenesis”, and “Impact, Assessment and Treatment.”

Dr. Jagomägi is head of the ortho program at University of Tartu founding co-president of our AAMS federated Scandinavian society, the Nordic Association for Myofunctional Therapy and has a dental director of clinics that combine sleep medicine, orthodontic intervention, ENT, and myofunctional therapy. She currently works at the University of Tartu for the department of Stomatology, where she is the Associate Professor and researcher as well as the head of the Orthodontic Postgraduate Training. Dr. Jagomägi is also with the Tartu University Hospital, Clinic of Stomatology, orthodontist. Ortodontiakeskus OÜ, orthodontist and Head of the clinic (private practice).

Orthodontic Consequences of Lack of Early Intervention: Towards a New Standard and Definition of Orthodontic Care

Much of the orthodontic community standards of care worldwide vary in age ranges of intervention from 7-14. There is an emerging body of literature, however, that holds combined intervention, including myofunctional therapy from an early age, as critical for optimal patient health. A panel of leading international orthodontists experienced in an allied approach including myofunctional therapy will join the panel to debate means to create new standards for orthodontic care. What is needed to affect real change in curriculum, protocols, and standards?

Panelists

Dr. Jagomägi

Moderator:
Marc Moeller

Learning Outcomes:
Link various disorders in children and adults to signs and symptoms present already post-natally

Compare the skill sets of various professionals in preventing myofunctional disorders whenever possible

Implement common strategies to promote a child’s normal growth and development
**Program:**

5:30pm-7:00pm

5:30 Meet and greet
6:30 Welcome toast

— Tribute to Pamela Marshalla by Diane Bahr

— Tribute to Bill and Julie Zickefoose by Licia Paskay and Joy Moeller

— US Presentation of the World Orofacial Myofunctional Sciences Day (February 17th) and kick-off of the Year of Better Breathing by Franklin Susanibar and Irene Marchesan

— Surprise!

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Friday, Sept 11th
Theme: Focus on Oral Functions

8:00am-12:00pm Symposium
Frenulum Restriction: Consequences, and Calls for New Standards in Intervention

Frenum restriction, and its resolution through inspection protocols has rightly gained more attention, doubling research studies in the last 5 years from the previous 150 to well over 300. The recent passage of a “Frenum Inspection Law/Teste da Linguina” in Brazil for all newborns has created an unprecedented awareness on the need for intervention and the consequences (feeding difficulties, altered craniofacial growth, posture problems, obstructive sleep apnea, etc.) of leaving ankyloglossia unaddressed. However, still there is no inter-disciplinary consensus around inspections, resolutions, and occurring co-morbidities. The morning presentations will address these issues.

8:00am-9:00am
Giovanni Olivi, MD, DDS & Maria D. Genovese, MD, DDS

Relationship Between Ankyloglossia, Anatomical and Functional Alterations and Body Posture

This lecture will consider the early diagnosis of ankyloglossia to intercept and prevent the development of all the successive functional and anatomical alterations. Focus will also be given for late diagnosis and therapy when tongue-tie is already associated with orthodontic and postural problems. Different laser technologies using minimally invasive techniques will be presented showing healing and follow-up. The diagnosis of ankyloglossia will be discussed. Anatomical items, functional and clinical criteria for surgical indications will be presented. Many times, the presence of Ankyloglossia escapes early diagnosis and the altered posture and function of the tongue is associated with different clinical manifestations. The lecturers will review the relationship between lingual posture, splanchnocranial growth and development, orthodontic malocclusion and body posture. Myofunctional therapy is a fundamental step in the rehabilitation of lingual-oral function. The therapy must precede the lingual frenum surgery and immediately follow the intervention. The tongue must be trained and educated to assume a different and correct posture and function.

Giovanni Olivi is a Professor of Conservative Dentistry and Endodontics in the Degree Course in Dentistry and Master in "Laser Dentistry" at the University of Genoa. He graduated with honors in Medicine and Surgery at the University "La Sapienza" of Rome. He obtained a Master of the American Academy of Laser Dentistry in Las Vegas, NV. Speaker in more than 150 international conferences, scientific advisor to several magazines, author of numerous publications ,in 2007 was awarded in Nashville with Leon Goldman Award, received for Clinical Excellence.

Maria Daniela Genovese is a professor in the Master International "Laser Dentistry" at the University of Genoa. She graduated with honors in Medicine and Surgery, specializes with honors in Dentistry at the University "La Sapienza" of Rome, is perfected in Orthodontics at the SMO "George Eastman" in Rome and obtained a Master in Postural Gnathology at the University "Tor Vergata" in Rome. Speaker at numerous national and international conferences ,author of important scientific publications, also follows the American certification use of the technique of Invisible Orthodontics (Invisalign).

Learning Outcomes:
Examine anatomical and physiological connections between restricted lingual frenum and posture
Compare late diagnosis and therapy of tongue tie already associated with orthodontic and postural problems.
Compare different laser technologies using minimally invasive techniques, including subsequent healing and follow-up.
Learning Outcomes:

- Identify Tethered Oral Tissues (TOTs)
- Describe how TOTs can interfere with the infant's ability to breathe properly during sleep, rest, and breastfeeding.
- Determine the role of tongue-ties in the process of differential diagnosis as it relates to breathing.

How Breastfeeding and Tongue-Ties Impact OSA

Dr. Kotlow will discuss in detail the procedures and rationale for tethered oral tissue (TOT) laser release in babies. He will also discuss diagnosis, treatment and post-surgical care after releasing lip and tongue ties. Dr. Kotlow is well known for his concern and understanding of mothers who wish to nurse and he is an internationally known expert on the diagnosis and treatment of ankyloglossia also known as tongue-tie. He sees infants as early as a day after birth for the revision of abnormally attached lingual frenums. His techniques using laser surgery eliminate the need to place infants in the operating room or the need for drugs for treatment. The connections between breastfeeding and tongue-tie and the management of tongue-tie will be discussed.

Dr. Kotlow is recognized nationally and internationally as an expert in the field of pediatric dentistry and laser dentistry. He speaks on pediatric oral care and on the use of lasers for treating all dental conditions, especially in newborns and infants. He is one of the few dentists recognized by the Academy of Laser Dentistry to certify other dentists in standard proficiency to use lasers and has achieved the position of Mastership status from the Academy of Laser Dentistry. He presented at the The Academy of Laser Dentistry, The American Academy of Pediatric Dentistry, and The American College of Dentists. He presented courses and seminars in Sydney, Melbourne, Perth and Brisbane, Australia; Taipei, Taiwan; Tel Aviv and Jerusalem, Israel; and Edmonton, Toronto, Canada.

Short Lingual Frenulum and Obstructive Sleep Apnea in Children

Abnormal short lingual frenulum may lead to impairment of orofacial growth in early childhood. This may reduce the width of the upper airway, a pliable tube increasing its risk of collapse, particularly during sleep. Recognition and treatment of short frenulum early in life at birth, if possible, would improve normal orofacial growth. Short lingual frenulum may lead to abnormal orofacial growth early in life, a risk factor for development of SDB (sleep disordered breathing). Careful surveillance for abnormal breathing during sleep should occur in the presence of short lingual frenulum. Otherwise, myofunctional therapy combined with education of nasal breathing is necessary to obtain normal breathing during sleep in many children.

Dr. Christian Guilleminault is a physician and researcher in the field of sleep medicine who played a central role in the early discovery of obstructive sleep apnea and has made seminal discoveries in many other areas of sleep medicine. Guilleminault continues to be a prolific researcher in the field of sleep medicine and has authored over six hundred articles in peer-reviewed medical journals to date and has won several awards for his research in the field of sleep medicine. He was a founding member of the Association of Sleep Disorders Centers in 1975 and was elected to be the first editor of the journal Sleep in June 1976, a role in which he continued to serve until 1997. He continues to practice clinical medicine and contribute to research endeavors at the Stanford Center for Sleep Sciences and Medicine.

Learning Outcomes:

- Examine the impact of sleep disorders in children
- Identify connections between sleep disorders and the orofacial and nasopharyngeal complex
- Describe the contribution of myofunctional therapy in treatment of OSA
Frenum Restriction & Assessment, Surgery, and Public Health Initiatives: A Discussion on the Need for New Medical Standards

Frenum restriction and its resolution through inspection protocols, has rightly gained more attention, doubling the entire total of research in the last 5 years from the previous 150 to well over 300. The recent passage of a “Frenum Inspection Law/Teste da Linguina” in Brazil for all newborns has created an unprecedented growing awareness on the need for intervention and the consequences of leaving ankyloglossia (feeding difficulties, altered craniofacial growth, posture problems, obstructive sleep apnea, etc) unaddressed, but currently there is no inter-disciplinary consensus around inspection, resolution, and co-morbidities.

Panelists

- Christian Guilleminault
- Irene Marchesan
- Larry Kotlow
- Giovanni Olivi
- Alison Hazelbaker
- Kevin Boyd
- Chele Marmet

Moderator: Marc Moeller

Learning Outcomes:
- Compare effectiveness of approaches to lingual frenum restriction in various countries
- Integrate various aspects of lingual frenum management and patient care across disciplines
- Identify points of management agreement and consensus across disciplines

For all other panelists’ bios, please refer to their respective lectures or courses.

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2:00pm-3:00pm
Patrick McKeown, MA, BBE

Buteyko Method: Practical Workshop for Sleep Disorders & Myofunctional Therapy

Rhinitis is the leading cause of respiratory obstruction and a significant contributory factor to numerous comorbidity disorders, including dentofacial and craniofacial alterations. The Buteyko Method features a measurement appraisal known as the control pause, a breath hold exercise to unblock the nose and reduced breathing exercises to reset breathing volume towards normal. A study on its effectiveness is presented and step by step instruction is provided for participants to apply the exercises first hand, and experience bodily reactions including nasal dilation, increased feeling of warmth due to vasodilatation (improved blood circulation). Experiential knowledge provides a greater understanding of the negative effects associated with oral breathing, and chronic hyperventilation (breathing a volume of air greater than metabolic requirements).

After receiving accreditation from Dr. Konstantin Buteyko in 2002, Patrick has spent the last 13 years reaching out to thousands of children and adults who suffer unnecessarily due to the asthma, sleep disordered breathing and dysfunctional breathing patterns. His latest book is titled “The Oxygen Advantage” and explores improving sports performance by addressing dysfunctional breathing patterns and simulating high altitude.

Learning Outcomes:
- Identify dysfunctional breathing in sleep disordered breathing and Myofunctional therapy.
- Perform exercises to decongest the nose.
- Demonstrate techniques and identify guidelines to help establish nasal breathing and restore physiologically normal breathing.

3:00pm-3:30pm - Exhibit Hall- Break

3:30pm-4:15pm
Christian Guilleminault, MD, DBiol

Breathing Re-education and Myofunctional Therapy: Towards Restoration of Continuous Nasal Breathing as the Ultimate Treatment Goal in Pediatric Obstructive Sleep Apnea

The interaction between oral-facial structural growth and muscle activity starts early in development and continues through childhood. Chronic oral breathing is an important clinical marker of orofacial muscle dysfunction, which may be associated with palatal growth restriction, nasal obstruction, and/or a primary disorder of muscular or connective tissue dysfunction. It is easily documented objectively during sleep. Treatment of pediatric obstructive-sleep-apnea (OSA) and sleep disordered breathing (SDB) means restoration of continuous nasal breathing during wakefulness and sleep; if nasal breathing is not restored despite short-term improvements after adenotonsillectomy (T&A), continued use of the oral breathing route may be associated with abnormal impacts on airway growth and possibly blunted neuromuscular responsiveness of airway tissues. Elimination of oral breathing, i.e., restoration of nasal breathing during wake and sleep, may be the only valid end point when treating OSA. Preventive measures in at-risk groups, such as premature infants, and usage of Myofunctional Therapy (MFT) (where breathing re-education is a part of MFT) as a part of the treatment of OSA are proposed to be important approaches to treat appropriately SDB and its multiple co-morbidities.

For Dr. Christian Guilleminault’s bio, please refer to his previous lecture.
A Call for Breathing Assessment and Re-education Across Health Disciplines Through Myofunctional Therapy Intervention

Mouth-breathing has long been considered an indicator of a potential health risk or disorder. Several disorders (asthma, COPD, rhinitis, obstructive sleep apnea etc) have a common feature in mouth-breathing, but at the present, there is no consensus on how to address it. Recent research spotlighting the critical link of mouth breathing and insufficient nasal breathing with sleep disordered breathing creates a new sense of urgency to develop standards of care across disciplines. Breathing re-education within Myofunctional Therapy has shown great promise and warrants greater exploration to become a standard for treatment.

Panelists

For all other panelists’ bios, please refer to their respective lectures or courses.

Parallel Tracks, Friday, Sept 11th

10:30am-11:30am
Nancy Rothstein, MBA

SLEEP: The Best Preventive Medicine

Offer information and guidance to help attendees recognize possible sleep issues facing their patients, as well as themselves, and recommend patients seek professional care for diagnosis and treatment of a possible sleep disorder. Provide a foundation from which to integrate Sleep Wellness into their practice, and personal lives. Provide basic sleep science and education as an essential foundation for understanding Sleep Wellness, and recommending sleep improvement strategies to patients.

Nancy Rothstein, MBA The Sleep Ambassador consults and lectures on Sleep Wellness to corporations, the travel industry, universities, schools and organizations. She has an MBA from the Univ. of Chicago and teaches an online course on Sleep Wellness at NYU. Her book, My Daddy Snores (scholastic), has sold over 380,000 copies and has a companion website.
The Guide to Eight Great Beaches in L.A.

Los Angeles is the best city to experience the quintessential endless summer in Southern California. We rounded up eight of the best beaches in LA, from Malibu to the South Bay.

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11:00am-12:00pm
Thierry Gouzland, PT, OMT

Contribution of Orofacial Myofunctional Therapy in an Orthognathic Surgery Team

Patients with facial dysmorphism, significant malocclusion or obstructive sleep apnea may be candidates for orthognathic surgery, which is an important and long process for the whole body. The team that supports these patients must be multidisciplinary. Along with the surgeon and the orthodontist, the role of orofacial myofunctional therapist is nowadays very important, for a process that begins with a complete evaluation of the dysfunctions. The myofunctional treatment prepares the patient and, also, it takes place during hospitalization and after the surgery. The post surgery care involves promoting the acceptance of the new face, recovering and balancing functions and preventing recurrences. The consequences of the surgery are not only localized to the face, but research shows their impact on muscle tension and posture. So the myofunctional therapist must also have a global, holistic vision of the patient.

Thierry Gouzland is a physiotherapist with an exclusive practice in OMT at the Polyclinique Bordeaux Tondu, in France. He is a holder of a university degree in cranio-facial anatomy and in sciences of movement analysis. He is also qualified in structural osteopathy. For many years he worked in different fields of myofunctional therapy as OSA, posture, facial growth, bariatric and orthognathic surgery. As a professor he teaches at IFMK of Bordeaux and Dax, and at the University of Bordeaux, for the degree in cranio-maxillo-facial reeducation at the faculty of medicine. He is author of scientific articles and book chapters. He is the current Vice President of the International Society of Tongue Kinesithérapy SiKL.

Learning Outcomes:
- Examine some aspects of preliminary assessment and treatment before and after surgery.
- Describe the role of orofacial myofunctional therapy during the rehabilitation of the patient.
- Identify connections between orthognathic surgery and posture.

1:00pm-2:00pm
Joy Moeller, BS, OMT

Myofunctional Therapy in Children 0-5 Years of Age

Because of the prevalence of myofunctional disorders, their cascading impact on health and the importance of preventing them, this lecture will explore the “how to” approach to early intervention, proactive measures, and motivation techniques which will add to excellence in patients’ care and therapy programs.

Joy Lea Moeller, BS, RDH is a leader in the field of Orofacial Myofunctional Therapy, lecturing and teaching courses around the world for more than 25 years. Joy is on the board of the ASAA (American Sleep Apnea Association). She is a founder and Director of the Academy of Orofacial Myofunctional Therapy and a founding Director of the Academy of Applied Myofunctional Sciences.

Learning Outcomes:
- Identify OMD problems early, and treat patterns that can be reversed.
- Describe the crucial aspects of an OMD public education program.
- Identify motivational techniques for young children and caregivers.
2:00pm-3:00pm
Michael Mew, BDS (Lond), MSc (Orth) (UK)
Craniofacial Dystrophy, a Possible Syndrome?

Although now endemic, 250 years ago, outside the privileged groups, malocclusion was uncommon and mild. Dr. Mew wishes to scientifically understand this “modern disease” and proposes a pathological process which describes how malocclusion, sleep apnea and a range of other problems (many under the umbrellas of ENT) are related with the aim of finding cures. He suggests that they are all symptoms of a change in the architecture of the anterior craniofacial structure, which is only fully apparent when comparing “maloccluded” man to ancient man, rather than to modern man as is normal using orthodontic cephalometry.

Learning Outcomes:
- Identify what causes malocclusion.
- Identify the relationship between malocclusion and sleep apnea.
- Summarize prevention of malocclusion and sleep apnea.

3:00pm-3:30pm - Exhibit Hall - Break

3:30pm-4:30pm
James Redd, DDS
Personal experiences with Orthotropics and Myofunctional Therapy

Chicken or egg? Who cares which is first - it's better to have both. Cases presented will demonstrate that the same is true of Orthotropic treatment and Myofunctional Therapy.

Dr. Redd received his dental degree in 1982 upon completion of his program at the University of Alberta. He has practiced in Calgary since 1984 along with Dr. Kindal Robertson DDS. Both believe in proactive dental care. “My best credential isn’t my degree or years of Orthotropic experience. It’s that my wife let me practice Orthotropics on our six children, and now, on our grandchildren. My greatest accomplishment.”

Learning Outcomes:
- Measure the Cosmetic Line and determine how many mm of excess requires referral to an Orthotropic practitioner.
- Estimate the nose - lip angle from live patients and photos.
- Assess the need for referrals to manage co-morbidities such as tongue tie, sleep disorders, breathing issues and more.
The Los Angeles Biltmore is known for being an early home to the Academy Award Ceremony for the Oscars. The Academy of Motion Picture Arts and Sciences was founded at a luncheon banquet in the Crystal Ballroom in May 1927, when guests such as Louis B. Mayer met to discuss plans for the new organization and presenting achievement awards to colleagues in their industry. Legend has it that MGM art director Cedric Gibbons, who was in attendance, immediately grabbed a linen Biltmore napkin and sketched the design for the Oscar statue on it. Eight Oscar ceremonies were held in the Biltmore Bowl during the Academy’s early years of 1931, 1935–39, and 1941–42. In 1977 Bob Hope hosted the Academy’s 50th Anniversary banquet in the same room.
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RECIPIENT - Irene Marchesan
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Madame Marie Curie Award
The AAMS Madame Marie Curie Award for advancing science via Myofunctional Therapy.
RECIPIENT - Hilton Justino
SPONSOR - IOPI

Louis Pasteur Award
The AAMS Louis Pasteur Award for courage and leadership in advancing medicine via Myofunctional Therapy.
RECIPIENT - Antonio Ferrante
SPONSOR - AOMT

Our Initiatives
Overview of a Large Scale Randomised Controlled Trial with Myofunctional Therapy and Pediatric OSA At Leading Universities Around the World
A Public Health Project To Train All RDHs & SLPs in the USA & Brazil to Screen for Orofacial Myofunctional Disorders as Clinical Markers for Sleep Apnea
A Public Health Project to Advocate for Frenum Inspection Laws Around the World

Our Packages

TRAILBLAZER $125
(7-10pm) Gala Banquet Dinner on the Oviatt Penthouse Rooftop Terrace (Bring a Wrap)

CHAMPION $250
6-7pm (+7-10pm Gala Banquet Dinner) Cocktails and Jazz with guest Prof. Christian Guilleminault in the deco Oviatt penthouse

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Ortodontiakeskus is honored to sponsor the AAMS Hippocrates Award For Lifetime Achievement in Contribution to Medicine Via Myofunctional Therapy to Dr. Christian Guilleminault. How fitting that the “father of sleep medicine” should win an award tied to the the “father of medicine.”

Dr. Christian Guilleminault, Professor of Psychiatry and Behavioral Sciences and Neurology.

Pioneer of clinical insight into obstructive sleep apnea. He was the first to discern this to be a common problem even in individuals of normal weight, and discovered one of its origins in the “upper airway resistance syndrome.”

In his brilliant and multifaceted career as a clinical investigator, teacher, and editor, he has illuminated our understanding of virtually every domain of sleep disorders.

He continues to practice clinical medicine and contribute to research endeavors at the Stanford Center for Sleep Sciences and Medicine.

Wherever the art of medicine is loved, there is also a love of humanity.

- Hippocrates
The AAMS Louis Pasteur Award

The AOMT is honored to sponsor the AAMS Louis Pasteur Award for courage and leadership in advancing medicine via myofunctional therapy going to Antonio Ferrante who in his passionate pursuit of excellence to help people has done so much for the world.

“There does not exist a category of science to which one can give the name applied science. There are science and the applications of science, bound together as the fruit of the tree which bears it”

“When I approach a child, he inspires in me two sentiments; tenderness for what he is, and respect for what he may become”

“Do not let yourself be tainted with a barren skepticism”

“Let me tell you the secret that has led me to my goal. My strength lies solely in my tenacity”

“It is surmounting difficulties that makes heroes”

Quotes by Louis Pasteur

Antonio Ferrante, DMD Teaching Coordinator of the Master on Myofunctional Therapy and Posture and professor of Neurophysiology of Static and Dynamic Posture at the Sapienza University in Rome, Italy, Professor of Posturology at the Univerisity of Pisa. Course in Myofunctional Therapy, Gnatology - NY University, Lecturer in the master Posturology Rome “Sapienza”, Pisa, Palermo, Napoli University. Specialization course in Orthodontics Chieti University Academic Coordinator of the Master “Therapy Myofunctional within Postural” set up at the University of “Sapienza”, has written 4 books on MFT.

www.aomtinfo.org
IOPI Medical is proud to honor the AAMS and Dr. Hilton Justino in their pursuit of knowledge through science to help heal those who suffer.

Hilton Justino graduated from the Catholic University of Pernambuco. He specializes in Myofunctional Therapy. He has a master of Morphology from the Federal University of Pernambuco—UFPE (2001) as well as a PhD in nutrition from UFPE. He is the coordinator of the graduate program in human health communication—UFPE (2012–present). He is a permanent member of the collegiate graduate program in Neuro-psychiatry and Behavioral sciences—UFPE. He is the scientific director for the Brazilian Society of Speech. He is a founding member of ABRAMO—the Brazilian Association of Myofunctional Therapy. He is an honorary member of “Comunidad Latinoamericana de Motricidad Orofacial.”

He was an effective member and vice coordinator of the graduate pathology program. UFPE (2008–2011). He has experience in speech therapy, acting on the following topics: speech therapy, orofacial motility, voice, stomatognathic system and nutrition, surface electromyography, electro-gnathography, biofeedback and applied morphology.

We are passionate about developing easy-to-use technology that provides objective oral motor measurements to researchers, clinicians, and patients. We are excited to partner with the AAMS community to see how our current and future products can contribute to emerging standards of care in this field.
BIOLASE is proud to honor the AAMS and Dr. Irene Marchesan in their pursuit of advancing medicine through myofunctional therapy. Dr. Marchesan pioneered the creation of the frenum inspection law in Brazil, called Teste da Linguinha, impacting the oral health of future generations.

Irene Marchesan, PhD SLP is a Research Associate at CEFAC, Department of Orofacial Myofunctional Therapy. She is world-renowned in this field having authored over 300 articles and books and presided over 400 thesis defenses. She has over 30 years of experience in research and clinical practice in Brazil. As a professor, she has lectured around the world. She is currently President of the Brazilian Speech Pathology Society.

BIOLASE, Inc. is a medical device company that develops, manufactures, and markets innovative lasers in dentistry and medicine and also markets and distributes high-end 2D and 3D digital imaging equipment, CAD/CAM intra-oral scanners, and in-office milling machines and 3D printers.

We are excited to partner with the AAMS community to contribute to emerging standards of care in this field.

Differentiate your practice and deliver more smiles.

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AAPMD & the Foundation For Airway Health Are Honored To Participate In the Founding of the Academy of Applied Myofunctional Sciences.

Musical Sponsors of the 1st AAMS Hippocrates Gala

www.foundationforairwayhealth.org

Our Gala Benefactors

Joy Moeller
I am so impressed with what the AAMS has accomplished in such a short time to help prevent and treat such a major health care issue as myofunctional disorders. I will financially support and work as best I can until this treatment has become Standard of Care. Evidence based research is what we need to make a change as well as the public to demand access to care for all. We are at a “tipping point” in creating avenues of collaboration, acceptance and validation and this Congress is going to make it happen.

William M Hang, DDS, MSD - Face Focused® Orthodontics
Developing the jaws forward, enhancing facial balance, and protecting airways while creating beautiful smiles

Debbie Hang - AIRWAY-kening University™
Giving dental professionals the building blocks for success in the post-retraction world

Licia Paskay
I do believe that the AAMS has the right international and interdisciplinary leadership to promote appropriate and needed research in the field of myofunctional therapy, as it applies to many health disciplines that had the mouth and nose as primary or secondary focus. Education, prevention, or creation of standards of care are very important goals, but they cost money, time and energy. That’s why I support the AAMS as a donor and as a volunteer.

Howard Hindin
The AAPMD supports the pioneering efforts of the AAMS in research and education to further establish the important and vital role of myofunctional therapy. Raising awareness and utilization of the therapeutic benefits of myofunctional therapy will have a positive influence on major public health concerns. The AAPMD hosted the inaugural event of the AAMS and is delighted to support its continuing growth and achievements. Howard G. Hindin, Co-Founder AAPMD.

Michael Gelb
On behalf of the AAPMD, FAH and The Gelb Center we applaud the creation of the AAMS in supporting multidisciplinary awareness, education and research of Myofunctional Therapy in the early management of airway, breathing and sleep disorders.

Kirk Hollman
Experience the Fun!

Danni Gomes
Claudia Torok
Vin DiBona Productions
"THIS USED TO BE REALLY TOUGH FOR ME TO DO..."
— Sebastian, Patient of Dr. Juan-Carlos Quintero

Sebastian had been suffering from snoring, mouth breathing and grinding his teeth at night, plus battling frequent sinus and ear infections. He was also struggling with any kind of vigorous athletic activity—all of which are just not normal for a boy his age.

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We Make It A Snap to Access The High Quality Products And Supplies You Need So You Can Focus On Your Patients!

The World Association of Sleep Medicine claims approximately 45% of the world’s population suffers from some form of sleep disorder. Public health estimates show obstructive sleep apnea is approaching 20% of the population and snoring is extremely common throughout the general population. The majority of current standards of care in these areas focus on the treatment of symptoms to improve patient outcomes, not addressing potential causes of disorders. Myofunctional therapy has shown great promise as an adjunct treatment for obstructive sleep apnea and snoring with a growing body of scientific literature to support this, yet in practice it is not widely utilised. This morning symposium will present the current state of treatment modalities, new evidences, and explore the need for more research and adoption of standards of care.

8:00am-12:00pm Symposium


8:00am-9:15am

Christian Guilleminault, MD, DBiol

Sleep-Disordered-Breathing in Children and Myofunctional Therapy

A review of recent scientific literature on the connections of oronasal functions and OSA (obstructive sleep apnea) will be presented. Myofunctional therapy rarely is considered in the treatment of pediatric SDB (sleep-disordered breathing) and yet, absence of myofascial treatment is associated with a recurrence of SDB. Current data supports the connection between orofacial muscle activity, oropharyngeal development and abnormal muscle contraction of upper airway muscles during sleep in patients with SDB.

Dr. Christian Guilleminault is a physician and researcher in the field of sleep medicine who played a central role in the early discovery of obstructive sleep apnea and has made seminal discoveries in many other areas of sleep medicine. Guilleminault continues to be a prolific researcher in the field of sleep medicine and has authored over six hundred articles in peer-reviewed medical journals to date and has won several awards for his research in the field of sleep medicine. He was a founding member of the Association of Sleep Disorders Centers in 1975 and was elected to be the first editor of the journal Sleep in June 1976, a role in which he continued to serve until 1997. He continues to practice clinical medicine and contribute to research endeavors at the Stanford Center for Sleep Sciences and Medicine.

Learning Outcomes:
- Examine the impact of sleep disorders in children.
- Identify connections between sleep disorders and the orofacial and nasopharyngeal complex.
- Describe the contribution of myofunctional therapy in treatment of OSA.
Learning Outcomes:

Examine the intake and treatment standards required to apply myofunctional therapy in patients with the co-morbidities of OSA and snoring.

Describe the critical importance of the adoption of myofunctional therapy as a standard of care in the treatment of OSA and snoring.

Identify the allied health professionals necessary to create an optimal team approach to treatment of OSA and snoring with myofunctional therapy.

Learning Outcomes:

Describe the main myofunctional treatments in OSA.

Identify orofacial myofunctional methods and instruments for the assessment of patients with OSA.

Identify resources for evidence-based practice.

Myofunctional Therapy in Obstructive Sleep Apnea: What More Do We Need To Do?

This lecture will reflect some of the issues that currently stand in terms of research and clinical practice of myofunctional intervention in obstructive sleep apnea (OSA). Focus will also be given on the myofunctional assessment (instruments and methods), possibilities and limitations of the current methods, as well as the need to define methods of quantitative evaluation, before and after myofunctional therapy intervention, for an evidence-based practice in this field.

Ricard Santos is a lecturer at the School of Allied Health Technologies – Polytechnic Institute of Oporto (Portugal) and EPAP Institute (Lisbon, Portugal), as well as a researcher at the Sleep Medicine Center of Cuf Hospital (Oporto, Portugal). His contributions to the field of myofunctional therapy are extensive. Mr. Santos has published in numerous scientific journals, as well as serves as a reviewer for journals in myofunctional therapy. He has been the recipient of four scientific awards in the field. By invitation, Mr. Santos is an International Member of the Phonoaudiology Committe of the Brazilian Sleep Association. Currently, he is the President of the Portuguese Speech Therapy Society.

Dr. Ester Bianchini is a Speech and Language Pathologist (SLP); Master in Communication Disorders (PUC-SP); Ph.D. in Science, Faculty of Medicine of the University of São Paulo (FMUSP); President of the SLP Department of the Brazilian Society of Sleep (ABsono); Professor at the Post Graduation Program in SLP at the Pontificia Universidade Católica de São Paulo (PUC-SP); Professor at CEFAC – Health and Education; Director of the SLP Rehabilitation Clinic in São Paulo, Brazil; author of scientific articles, books, and book chapters.

Recent research has shown great results in the treatment of in the debilitating disorder of obstructive sleep apnea and also snoring, diminishing the impact and even eliminating all symptoms with stability over time, yet standard medical and dental approaches to working with OSA and snoring have been slow to examine the use of myofunctional therapy for these sleep disorders. The presentation will explore the process that the Brazilian Sleep Society (Associação Brasileira do Sono, the first national medical society to adopt myofunctional therapy as a standard of care for sleep disorders) went through to adopt myofunctional therapy as a standard of care for sleep disorders in November of 2014, implications for research and treatment, and the current state of the art in myofunctional therapy and sleep disorders.
11:15am-12:00pm
PANEL DISCUSSION

Sleep Disordered Breathing and Myofunctional Therapy: New Evidences and Calls for Standards of Care. Where do we go from here?

Sleep disordered breathing involves the oro-facial and naso-pharyngeal structures that fall under the competence of various health professionals. In recent years, dentists specialized in sleep disorders have been integrating their practices with those of sleep physicians. Recent studies support the introduction of myofunctional therapy as an adjunct type of therapy. Integrating multiple approaches to sleep disordered breathing is the focus of this panel discussion.

Panelists

- Esther Bianchini
- Michael Gelb
- Christian Guilleminault
- Ricardo Santos
- Joy Moeller
- Darius Loghmanee
- Rakesh Bhattacharjee

Dr. Darius Loghmanee, MD FAAP FAASM, Director of the Pediatric Sleep Service Line of the Advocate Medical Group, consisting of 16 hospitals and 350+ locations in the greater Chicago area. He received his medical degree from the University at Buffalo School of Medicine. He did his postgraduate training at Rush University Medical Center where he completed a combined residency in Internal Medicine and Pediatrics and trained as a fellow in the Sleep Disorders Center. After his training, he spent seven years at the Ann and Robert H. Lurie Children’s Hospital of Chicago where he evaluated and treated children with sleep disorders and served as the Associate Director of the Sleep Medicine Center. He believes that sleep is an essential aspect of wellness and is interested in learning about how a growing number of health care providers can support families, health care providers, and communities in their efforts to optimize sleep in children and adolescents.

Dr. Bhattacharjee is a board-certified child specialist of pulmonary and sleep disorders, including sleep apnea and sleep-related breathing problems. He is the Director of Pediatric Sleep Medicine at the University of California, San Diego and Rady Children’s Hospital. His research focuses on treatment of Pediatric sleep disorders and on cardiovascular impairment in patients suffering from sleep disorders, as well as the impact of childhood obesity on pediatric sleep apnea. He has received multiple awards and grants for his research from notable organizations, including the American Academy of Sleep Medicine, American Thoracic Society, and the American Heart Association.

For all other panelists’ bios, please refer to their respective lectures or courses.

Learning Outcomes:
- Describe appropriate assessment of nasal breathing used in a variety of health practices.
- Identify the benefits of focusing on the management of nasal breathing across disciplines.
- Apply myofunctional therapy to assist management of sleep disordered breathing.

Panelists

- Esther Bianchini
- Michael Gelb
- Christian Guilleminault
- Ricardo Santos
- Joy Moeller
- Darius Loghmanee
- Rakesh Bhattacharjee

Moderator: Marc Moeller

Learning Outcomes:
- Describe appropriate assessment of nasal breathing used in a variety of health practices.
- Identify the benefits of focusing on the management of nasal breathing across disciplines.
- Apply myofunctional therapy to assist management of sleep disordered breathing.
Long Term Stability for Orthodontic Cases with OMT (Orofacial Myofunctional Therapy)

Professionals working in and around the mouth need to focus on all of the functions of each patient for the long term stability after orthodontic treatment. Therapists always need to consider using and treating with OMT (orofacial myofunctional therapy) to achieve long-term stability. Consideration for morphology and function in treatment with OMT, as suggested by EBP is a priority. Dr Imamura will discuss her OMT approach in orthodontic cases.


Learning Outcomes:
- Compare care without orthodontics and only with OMT in improving malocclusion and long term stability of occlusion.
- Link orthodontic results and dental occlusion with the functional aspects of the orofacial complex.
- Prevent occlusal instability by implementing proper assessment, early treatment and follow ups with OMT.
Orthodontics has traditionally focused on straightening teeth and fixing “malocclusions” with little attention paid to the etiology of such problems. The mechanics used can result in less-than-ideal facial esthetic outcomes, as well as compromised airway health. Orthotropics® seeks to address the cause of orthodontic problems by addressing oral posture. The facial profile is brought into better balance and the airway can be improved.

Dr. Ariana Ebrahimian graduated from the University of the Pacific Arthur A. Dugoni School of Dentistry in 2007. Upon graduation she took Dr. Bill Hang’s Biobloc Orthotropics® Mini-Residency and became passionate about providing Orthotropics® for young children. She is in private practice in Scotts Valley, CA and San Francisco, CA.

Learning Outcomes:
- Identify poor rest oral posture and its effect on facial growth.
- Assess whether a child’s face is growing favorably.
- Identify the relationship between facial balance and airway patency.

Sleep-Related Breathing Disorders & Craniofacial Pain
For Adults & Children: A System for Dx and Tx Mini-Residency

The ONLY Standardization and Integration of Systems & Protocols!

◆ System
Learn a system for screening & triage of structural injuries, OSA and systemic inflammatory conditions.

◆ Treatment
Understand the proper steps and protocols for patient treatment to achieve reproducible results.

◆ Resources
All forms & documentation (patient intake, clinical exam, tracking, billing) are supplied to successfully treat patients.
10:30am-12:00pm
Pejman Katiraei, DO

An Integrative Physiological Approach
to Myofunctional Disorders

The human body is a miraculous and intelligent organism with physiological systems that are all tied together. A myofunctional disorder may be impacted by various systems within the body including the thyroid, pancreas, gonads, etc. We will overview the relations of various organ systems to the airways and myofunctional disorders. We will then explore dietary and Endobiogenic herbal treatment approaches that can be offered as part of a larger integrated myofunctional treatment program.

Dr. Katiraei was the curious child who always wanted to know how everything works. It was this curiosity that encouraged Dr. K to explore and later specialize in holistic and integrative medicine. Before graduating cum laud with a degree in Biology from UCLA, Dr. K started the UCLA Stroke Force where he led over 70 undergraduate students to educate the senior community about strokes. After UCLA, he went onto obtaining his osteopathic medical degree from Western University of Health Sciences. He then started his pediatric residency at Loma Linda University. Dr. Katiraei completed a fellowship under Dr. Andrew Weil at the University of Arizona and then to start the Loma Linda University Wholistic Medicine Clinic, of which he was the Medical Director until 2014.

Learning Outcomes:
- Describe an integrative physiological perspective on myofunctional disorders.
- Explain the background on the role of medical herbalism in supporting myofunctional treatments.
- Identify the role of diet in airway and myofunctional disorders.

12:00pm-1:00pm - POSTERS

12:00pm-1:00pm LUNCH HOUR

1:00pm-2:00pm
David Rubinstein, PhD

The Role of Chronic Stress in Airway Encroachment

Airway encroachment is a new term to help describe the epidemiological development of the loss in airway patency over time. In particular in this presentation, the central pharyngeal airway beginning at the base of the uvula moving downward to the base of the tongue is the specific area of interest. Although the oral pharyngeal airway space extends above to the oral space and below to the lower airway, structural degradations related to maladaptive breathing and Di “Diaphragmatic Inhibition” are most often presented in the central space. For example, Forward Head Posture FHP occludes the central space more than the upper or lower airway. Anterior tongue thrust, for example, can be the body’s reaction to Di “Diaphragmatic Inhibition” brought on by stress or medication and is usually ALSO an attempt to open the airway. Such noxious habits can be re-trained. But are we asking the right questions? WHY did the noxious habit develop? An underlying stress disorder is likely to be at cause in the matter.

Dr. Rubenstein has developed a highly effective system of stress/anxiety transformation called The Rubenstein Method™. He earned his PhD in 2010 and has 29 years experience in chronic health and pain issues. He is a Senior Clinical Instructor at White Memorial Medical Center, Adjunct Professor at California Trinity University, has several published articles in peer-reviewed journals, is a continuing medical education (CME) provider, and a national speaker on Stress and Anxiety related topics.

Learning Outcomes:
- Identify the stress response that may be at cause in a high percentage of functional distortions to the oral cavity and the cranio-cervical complex.
- Link the hypertrophy of the accessory breathers contributing to airway encroachment.
- Describe how dysfunction of the diaphragm muscle has severe consequences to the body’s ability to deliver oxygen and to sustain proper posture of the cranio-cervical- mandibular- maxilla-oral cavity complex.
If the Los Angeles five-county area were a state, it would surpass all states in total population size with the exception of California, Texas, New York and Florida. The diverse, multiethnic population of Los Angeles today distinguishes the city as the cultural hub of the Pacific Rim. In fact, Los Angeles is one of only two U.S. cities without a majority population. People from 140 countries, speaking approximately 86 different languages, currently call Los Angeles home.
Two Novel and Unpublished Cephalometric Factors in the Diagnosis of OSA

This presentation is a “structural screening” to determine propensities for the disruptive factors of Obstructive Sleep Apnea (OSA) and Temporomandibular Joint Dysfunction (TMD) in prospective orthodontic patients. Diagnosis and treatment planning for orthodontic cases should include cephalometric screening for propensities for the disrupting factors in TMD and OSA, because, failure to recognize these conditions will greatly diminish chances of successful and stable results. The screening factors used in the Sassouni-Plus Cephalometric Analysis are the same for both the propensity to OSA and the propensity to TMD. Knowing in advance the propensity toward joint problems is essential, because patients with subclinical radiographic signs often develop joint problem symptoms during or after orthodontic treatment. Furthermore, while patients with airway condition often present many symptoms, sometimes they are asymptomatic, and yet they still present “structural signs” of potential underlying problems. Knowing in advance the propensity toward airway problems, including OSA, is essential as patients often develop symptoms during or after Orthodontic Treatment. The objective of this presentation is to teach how to recognize particular signs by using "structural screening". Recognition of specific cephalometric signs will allow clinicians to design a treatment plan to eliminate those factors that complicate cases, hinder treatment success and limit case stability.

Dr. Viet Nghiem and Steven Hou trained with Dr. Richard Beistle, who is the originator of the Sassouni Plus Cephalometric Analysis. They have since used this Cephalometric Analysis for comprehensive diagnostic and treatment planning in every case of full mouth reconstruction, functional orthodontic, orthopedic, TMD and SBD in their professional TMD/Orofacial Pain/Sleep practices in southern California. Around the year 2000, alongside Dr. Beistle, Doctors Nghiem and Hou identified two important cephalometric factors that have the ability to give any clinician a simple yet powerful screening tool for OSA. The presentation focuses on these findings, their significance and clinical applications.
Learning Outcomes:
Describe the role of motion and mechanics in forming human anatomy and maintaining health.
Identify how departures from normal function can impact development and establish the condition for pathology.
Summarize how clinicians can look beyond a patient's static symptom presentation and search for underlying dynamic causes of disease.

Protocol for the Phonoaudiological Assessment of Breathing with Scores (PROPABS)

Promoting or restoring nasal breathing is crucial in orofacial myofunctional therapy. However, there are very few protocols to assess nasal breathing in a small non-medical practice. The Protocol for the Phonoaudiological Assessment of Breathing with Scores PROPABS (initially called PAFORE in Brazil), is an easy-to-apply and validated protocol that allows the clinicians to discriminate between nasal and oral breathing. The scores generated by the protocol allow an equally easy test-retest and make the PROPABS an ideal instrument for myofunctional therapy practice.

Franklin Susanibar is a visiting lecturer in the Specialization Diploma in Myofunctional Therapy of the EPL Clinical School of the Autonomous University of Barcelona-Hospital del la Sant Creu i Sant Pau. Lecturer of the Second Specialty Evaluation and Intervention of Child Language Difficulties of the National University of San Marcos (UNMSN), Lima, Peru. Lecturer of the Faculty of Medical Technology in Speech Therapy of the Peruvian University Cayetano Heredia (UPCH).

This presentation will be in Spanish with simultaneous English translation.

Learning Outcomes:
Identify connections of the trigemial nerves with other parts of the brain as related to posture.
Identify various neurological centers involved in bruxing and other parafunctions.
Analyze some aspects of oral functions in movement disorders.

Integrating Myofunctional Diagnosis into Whole Patient Care: Uncovering the Causes of Many Chronic Disease Syndromes.

A reciprocal relationship exists between the motions of life—breathing, eating, communicating—and the structures of the living human being. This relationship establishes very early in life. Normal motions are integral to pre-natal and post-natal development, to the fulfillment of growth potential in the child, as well as to the continued vital health of the adult. Any breakdown of normal function will inevitably lead to disease states. Pathology in the oral and facial regions provide clear examples of the structure and functional concept, and they also provide insights into the steps necessary for the restoration of the patient's health.

Dr. Johnson first discovered Osteopathy as a grateful patient. A graduate of Vassar College and the University of Arizona, she left a career in public accounting to pursue osteopathic study. After graduating from Western University of Health Sciences with a teaching fellowship, she completed a residency specializing in Osteopathic Manual Medicine at St. Barnabas Hospital, Bronx, New York, where she provided traditional osteopathic care to critically ill patients, post-partum mothers and newborns. She is Board Certified in Osteopathic Manual Medicine (C-NMM/OMM) by the American Academy of Osteopathy. She is a certified teacher with the Cranial Academy, where she serves on the Board of Directors as Secretary-Treasurer, and she is clinical faculty for the College of Osteopathic Medicine of the Pacific, Western University. She enjoys working with people of all ages, and treats a broad spectrum of medical conditions by applying anatomic and physiologic principles of osteopathy. She believes the goal of Osteopathic care is to facilitate the inherent healing properties, thereby allowing the patient's potential for healthy function to unfold.
3:30pm-4:30pm
Michael Gelb, DDS

Airway Centric Dentistry

Myofunctional Therapy has been recognized as an effective adjunct and in some cases a primary treatment for OSA, airway and breathing disorders. When combined with adenotonsillectomy and non retractive orthodontics it is particularly efficacious. Early intervention is recommended to establish nasal breathing, proper rest oral posture and normal tone. A team approach is highly recommended for improved results.

Dr. Michael Gelb is a leading expert in the use of oral appliances to mediate, relieve and enhance a range of health and wellness issues. He has pioneered an integrative approach to treating TMJ, snoring and sleep disorders. Chief Executive Officer of the Gelb Center, a worldwide resource for integrative dentistry. Dr. Gelb is Clinical Professor and former director of the New York University TMD and Orofacial Pain Program, a member American Academy of Orofacial Pain, and a Diplomate of the American Board of Orofacial Pain. Dr. Gelb currently holds patents for the proprietary design of oral appliances. His prescription design is currently the most widely dispensed oral appliance in the world.

Learning Outcomes:
- Identify the connections between nasal breathing and orofacial functions.
- Examine the application of CBCT in identifying upper airway volume.
- Identify benefits of proper nasal breathing in orthodontics and myofunctional therapy.

Crystal Room

3:30pm-4:15pm
PANEL DISCUSSION

What do we Know and What do we Need to do to Integrate Orofacial Myofunctional Therapy with the Whole Body?

Professionals who work within the cranio-oro-facial area often experience difficulties in their therapy because of other conditions affecting the whole body, as in the case of posture. But are the orofacial functions affected by posture or are they themselves the origin of the problem? This panel of experts will discuss ways to harmoniously integrate various therapies to promote reciprocal stability of myofunctional therapy, physical therapy, posturology and cranio-osteopathy.

Panelists

- Virginia Johnson
- Esther Bianchini
- Carla Stecco
- Antonio Ferrante
- Mariano Rocabado
- Eliana Rivera

Moderator: Marc Moeller

Learning Outcomes:
- Describe appropriate assessment of nasal breathing in any type of health practice.
- Illustrate the benefits across disciplines of focusing on managing nasal breathing.
- Apply myofunctional therapy to assist management of sleep disorders breathing.

For all other panelists’ bios, please refer to their respective lectures or courses.

5:30pm-6:00pm - POSTERS
During the last 3 days of symposia and the 5 days of the Congress we will have seen new research, treatment modalities, and calls for campaigns to be inaugurated, continued, and spread.

What can we apply to our practices and our lives next week?

What concrete steps can we take to cross the new bridges that have been built?

What can we do to change the existing referral and treatment paradigms?

What curricula do we need to develop, to address new applications of myofunctional therapy?

These and many other questions will be explored with a panel of world leaders in myofunctional therapy never before assembled.

Learning outcomes:

Illustrate the appropriate public health initiatives required to advance the standards of treatment in myofunctional therapy.

Examine the application of myofunctional therapy across disciplines.

Describe the role of the clinician working in myofunctional therapy as a healthcare advocate.

Panelists

Irene Marchesan  Franklin Susanibar  Ricardo Santos  Antonio Ferrante  Miho Imamura  Thierry Gouzland  Eliana Rivera  Triin Jagomägi

Marc Moeller & Licia Paskay  Co-Moderators

5:30 Announce the 2nd AAMS Congress and Adjourn.

6:00pm-7:30pm  AAMS Hospitality Hour
Buteyko Breathing Educators Association is the international registering body and training facility for qualified Buteyko Educators.

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(425) 549-0139 IOPImedical.com
8:00am-12:00pm - Irene Marchesan, PhD, SLP
Restricted Lingual Frenum: Diagnosis and Management

Dr. Marchesan will propose and explain the frenulum protocols for babies and for children and adults. She will show many videos and photos to teach how professionals can differentiate normal from altered frenulum. She will talk about the differences between anatomical frenulum alteration and functional alterations and what to do when the frenulum is altered anatomically but does not have any functional alteration. Borderline cases will be discussed too.

Learning Outcomes:
• Examine various OMDs especially related to restricted lingual frena
• Apply the Marchesan's and the Martinelli's protocols for restricted lingual frena
• Compare, contrast and objectively measure normal, abnormal and borderline lingual frena

8:00am-12:00pm - Carla Stecco, MD
Role of the Fasciae in Head and Neck Pain

This workshop will illustrate new studies of the gross and histological anatomy of the human fasciae, and explain the biomechanical model for the human fascial system currently applied in the manual technique known as Fascial Manipulation®. The model represents a three dimensional interpretation of the fascial system. Its theoretical foundations are fruit of more than thirty years of analysis of anatomical texts and clinical practice. More recently, dissections of unembalmed bodies have provided anatomical verification of numerous hypotheses including the fascial continuity between the various muscles and the possible distribution of tensional forces. This workshop will also propose new studies concerning the histological characteristics of superficial and deep fasciae (fibre content, structural conformation, and innervation) and debate the role of deep fascia in proprioception. Altogether, these new studies could provide the bases for research projects in fields of gross anatomy, histology, biomechanics, and clinical studies.

Learning Outcomes:
• Identify fascia and its main features
• Identify the relationship among fascia and muscles
• Evaluate the possible role of fascial pathology in the clinical practice

8:00am-12:00pm - Michael Mew, BDS, MSc
Introduction to Orthotropics and Craniofacial Dystrophy

A short introduction to orthotropic philosophy and therapy. This presentation will make you re-evaluate how you look at facial development and everyone around you. In a simple, concise and entertaining presentation Dr. Mew will describe craniofacial dystrophy, the hypothesised syndrome underlying malocclusion, sleep apnoea, TMD (temporomandibular disorder) and many ENT problems. He will take a journey covering the aetiology, epidemiology, pathology, treatment and cure of these complications. This is one of those presentations that you will remember for the rest of your life.

Learning Outcomes:
• Identify the possible aetiology and pathology of malocclusion, sleep apnoea, and TMD.
• Apply principles of growth and development of the whole face to orthodontics.
• Formulate a plan of prevention and care of epigenetic facial dysmorphosis.
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**Poster Sessions**

**PLEASE NOTE:** All Posters will be available in the Crystal Room. - Presenters will be available next to their posters at the designated times. Each poster visit accrues 15 minutes of continuing education credit. - Four poster visits equal 1 contact hour/professional development unit. For additional information please refer to the actual posters.

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**Chewing impairment in patients with Parkinson's disease**

**AUTHORS:** Lucas Carvalho Aragão Albuquerque, Daniele Andrade da Cunha (Presenting Author), & Hilton Justino da Silva

**DATE & TIME:** Thursday, September 10th 12:00-1:00 pm

**BIO/CV:** Daniele Andrade da Cunha (Presenting Author) Speech Therapist; PhD in nutrition - UFPE, BRAZIL; Leader in pathophysiology research group stomatognathic system; Assistant Professor III in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity; Member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL. Daniele Andrade has studied orofacial motricity for more than ten years.

**SYNOPSIS:** The findings of this study characterize the limitations in range, speed, and trajectory of mandibular movement consistent with the global features of patients with Parkinson's Disease.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Andrade is a leader of the pathophysiology research of the stomatognathic system group. She is an Assistant Professor III in the speech-language graduate program-UFPE in the area of Orofacial Motricity. She is a member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL.

**LEARNING OUTCOMES:** Identify and compare the opinion of Portuguese and Mozambique caregivers regarding the feeding habits of children, Develop assessment protocols for feeding impairment, Identify frequent speech alterations, Identify the anatomical parts of the tongue, Assess the importance of designing a customized therapy for the patient, and Explore compensatory behaviors that influence feeding in patients with Parkinson's disease.

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**Effects of motor imagery in feeding activity**

**AUTHORS:** Ada Salvetti Cavalcanti Caldas, Daniele Andrade da Cunha (Presenting Author), Klyvia Juliana Moraes, Weldma Karlla Coelho, Roberta Ferreira Gomes Ribeiro, & Hilton Justino da Silva (Presenting Author)

**DATE & TIME:** Thursday, September 10th 12:00-1:00 pm

**BIO/CV:** Daniele Andrade da Cunha (Presenting Author) Speech Therapist; PhD in nutrition – UFPE, BRAZIL; Leader in pathophysiology research group stomatognathic system; Assistant Professor III in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity; Member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL. Daniele Andrade has studied orofacial motricity for more than ten years.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Andrade is an Adjunct Professor A in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity. - Federal University of Pernambuco, BRAZIL; PhD in Nutrition – UFPE; Leader in pathophysiology research group stomatognathic system. Hilton Justino has studied electromyography in cranio-facial disorders for at least 10 years and the impact on the stomatognathic system.

**SYNOPSIS:** This study found that motor imagery elicits some brain response in the motor area of the brain, suggesting that coaching actions related to swallowing may be effective in improving motor performance during eating and drinking.

**LEARNING OUTCOMES:** Apply motor imagery as an important therapeutic tool to facilitate motor recovery of individuals after neurological injury. Apply this approach to activate the motor repertoire in all rehabilitation levels; Apply this technique, which is still little used, to facilitate feeding activity.

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**Level of agreement in inter-evaluators during implementation of the AMIOFE in patients with stroke sequelae**

**AUTHORS:** Ada Salvetti Cavalcanti Caldas, Daniele Andrade da Cunha (Presenting Author), Weldma Karlla Coelho, Roberta Ferreira Gomes Ribeiro, Karla Gonçalves dos Santos Casanilhas, & Hilton Justino da Silva (Presenting Author)

**DATE & TIME:** Thursday, September 10th 12:00-1:00 pm

**BIO/CV:** Daniele Andrade da Cunha (Presenting Author) Speech Therapist; PhD in nutrition – UFPE, BRAZIL; Leader in pathophysiology research group stomatognathic system; Assistant Professor III in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity; Member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL. Daniele Andrade has studied orofacial motricity for more than ten years.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Andrade is a leader of the pathophysiology research group stomatognathic system. She is an Assistant Professor III in the speech-language graduate program-UFPE in the area of Orofacial Motricity. - Federal University of Pernambuco, BRAZIL; PhD in Nutrition – UFPE; Leader in pathophysiology research group stomatognathic system. Hilton Justino has studied electromyography in cranio-facial disorders for at least 10 years and the impact on the stomatognathic system.

**SYNOPSIS:** This study evaluated the level of inter-evaluators agreement for application of the AMIOFE protocol in patients with stroke sequel. The findings suggest the need for the training of evaluators to help find clear definitions of ambiguous parameters. However, coincidence of low values of Kappa and p also indicate the necessity for further investigation.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Andrade is a leader of the pathophysiology research of the stomatognathic system group. She is an Assistant Professor III in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity. - Federal University of Pernambuco, BRAZIL; PhD in Nutrition – UFPE; Leader in pathophysiology research group stomatognathic system. Hilton Justino has studied electromyography in cranio-facial disorders for at least 10 years and the impact on the stomatognathic system.

**LEARNING OUTCOMES:** Apply the assessment protocol AMIOFE; Analyze posture and condition/appearance of lips, jaw, cheeks, tongue, hard palate and face; Assess mobility and oral functions.

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**Poster Sessions**

**PLEASE NOTE:** All Posters will be available in the Crystal Room. - Presenters will be available next to their posters at the designated times. Each poster visit accrues 15 minutes of continuing education credit. - Four poster visits equal 1 contact hour/professional development unit. For additional information please refer to the actual posters.
Quantitative assessment of tongue pressure in adolescents with oral breathing

**AUTHORS:** Daniele Andrade da Cunha (Presenting Author), Priscila Rossany de Lira Guimarães Portella, & Camila Isabelle Silva Martins

**DATE & TIME:** Friday, September 11th, 12:00-1:00 pm

**BIO/CV:** Daniele Andrade da Cunha (Presenting Author) Speech Therapist; PhD in nutrition – UFPE, BRAZIL; Leader in pathophysiology research group stomatognathic system; Assistant Professor III in the Speech-Language graduate program-UFPE in the area of Orofacial Motricity; Member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL. Daniele Andrade has studied orofacial motricity for more than ten years.

**SYNOPSIS:** The data achieved by analyzing adolescents with mouth breathing and nose breathing indicated that the former showed a significant decrease in tongue pressure when compared to the nasal breathing adolescents. However, there are factors that interfered with the results such as dental interference of individuals and maxilla-mandibular disproportion, requiring increased control and observation by the researcher during data collection.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Andrade is a leader of the pathophysiology research of the stomatognathic system group. She is an Assistant Professor III in the speech-language graduate program-UFP E in the area of Orofacial Motricity. She is a member of the college and vice-coordinator of the Master Course in Human Communication Health - Federal University of Pernambuco, BRAZIL.

**NON-FINANCIAL RELATIONSHIP DISCLOSURE:** Dr. Andrade is an unpaid member of SBF (Brazilian Federation of SLPs)

**LEARNING OUTCOMES:** Compare nasal breathing and oral breathing patterns in adolescents, Assess tongue pressure in adolescents with or without oral breathing, Identify additional factors that could impact proper tongue functions

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A comparison study between feeding patterns in Portuguese and Mozambique children

**AUTHORS:** Ana Cláudia Lopes (Presenting Author) & Carla Courelas

**DATE & TIME:** Friday, September 11th, 5:00-6:00 pm


**SYNOPSIS:** The Portuguese and the Mozambique study results showed that both populations of children had different feeding development to which cultural and social-economic factors may have deeply contributed.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Mrs. Ana Claudia Lopes is a teacher at Instituto Superior de Ciências da Saúde – Maputo (Mozambique). Speech-Language Therapy Department

**NON-FINANCIAL RELATIONSHIP DISCLOSURE:** Mrs. Ana Claudia Lopes has no relevant non-financial relationships to disclose.

**LEARNING OUTCOMES:** Identify and compare the opinion of Portuguese and Mozambique caregivers regarding the feeding habits of children, Develop assessment protocols for interviewing caregivers in different cultures, Apply feeding approaches that are culturally and socioeconomically sensitive

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Human tongue and speech production

**AUTHORS:** Irene Queiroz Marchesan, PhD, M.SLP, OMTS & Roberta Lopes de Castro Martinelli, PhD Student, M.SLP, OMTS

**DATE & TIME:** Friday, September 11th, 5:00-6:00 pm

**BIO/CV:** Irene Queiroz Marchesan, PhD, M.SLP, OMTS is a Research Associate at CEFAC, Department of Orofacial Myology. She is an expert in Orofacial Myology. She has over 35 years of experience in research and clinical practice in Brazil. As a professor, she has visited several countries sharing her knowledge and experience. She has published books, book chapters, and papers on Oro-facial Myology.

**BIO/CV:** Roberta Lopes de Castro Martinelli, PhD Student, M.SLP, OMTS has a clinical background in Speech-Language Pathology with a specialization in Orofacial Myology. She works at the Department of Childcare in a Brazilian Public Hospital. Her main research area is Oro-Myofunctional disorders. She has published papers on her research.

**SYNOPSIS:** During the production of some speech sounds, different compensatory movements are observed such as asymmetric mobility, asymmetric tonus, tongue protrusion, differences between the sides of the tongue, and tongue cupping. Furthermore, changes in tongue rest position – floor of the mouth instead of incisive papilla – are observed. The tongue rest position is the reference for all tongue movements – retrusion, shortening, protrusion, elongation, dorsiflexion, ventroflexion, and retroflexion –; therefore, if the rest position of the tongue is altered there will be alterations in movement performance. When any alteration is observed in speech, tongue position, tongue movements, or asymmetric features, it is essential to assess the causes in order to design a customized therapy program.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Dr. Marchesan is the co-author and editor of Motricidade Orofacial for which she receives royalties. She is a Principal of the CEFAC Institute for which she receives compensation. She received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.

**NON-FINANCIAL RELATIONSHIP DISCLOSURE:** Dr. Marchesan is the President of the Brazilian Speech Pathology Society (Sociedade Brasileira de Fonofauudição). She is on the board of the Brazilian Myofunctional Therapy Association (Associação Brasileira de Motricidade Orofacial), the Academy of Orofacial Myofunctional Therapy, and the Academy of Applied Myofunctional Sciences

**LEARNING OUTCOMES:** Identify frequent speech alterations, Identify the anatomical parts of the tongue, Assess the importance of designing a customized therapy
Research on preference of masticatory side by surface electromyography

AUTHORS: Klyvia Juliana Rochade Moraes, Celina Cordeiro de Carvalho, Luciana Ângelo Bezerra, & Hilton Justino da Silva (Presenting Author)

DATE & TIME: Saturday, September 12th, 12:00-1:00 pm

SYNOPSIS: The study supports using surface electromyography (SEMG) as a method to investigate muscle electrical activity and determine the preference of masticatory side, since SEMG seems reliable in association with the observational method. However, there is also the need for greater methodological rigor in the use of SEMGs to minimize the limitations of this evaluation method.

FINANCIAL RELATIONSHIP DISCLOSURE: Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Justino is an Adjunct Professor in the Speech-language graduate program-UFPE in the area of Orofacial Motricity - Federal University of Pernambuco, BRAZIL. He is also a leader of a pathophysiology research group in stomatognathic system.

NON-FINANCIAL RELATIONSHIP DISCLOSURE: Dr. Justino is an unpaid member of the following international professional organizations: SBF, (Scientific Director) ABRAMO, CEMOL (Honorary), AAMS (Advisor).

LEARNING OUTCOMES: Describe the use of surface electromyography in determining the side of masticatory preference; Assess increased efficiency of SEMG when used in association with the observational method; Identify the hyperactivity of the masticatory muscles associated with the preferential side of chewing.

Software: application in speech-language therapy of children with mouth breathing

AUTHORS: Kássia Íris Silva Moura, Daniele Andrade da Cunha, Carolina Cardoso de Melo, Sandro Júnior Henrique Lima, Lucas Carvalho Aragão Albuquerque, & Hilton Justino da Silva (Presenting Author)

DATE & TIME: Saturday, September 12th, 12:00-1:00 pm

SYNOPSIS: Using Image J for evaluation and speech therapy in patients with mouth breathing could become the additional therapeutic tool for children with mouth breathing, assisting the Speech-Language Pathologist with the precise area of the nasal quantitative aeration and promoting biofeedback to the patient.

FINANCIAL RELATIONSHIP DISCLOSURE: Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Justino is an Adjunct Professor in the Speech-language graduate program-UFPE in the area of Orofacial Motricity - Federal University of Pernambuco, BRAZIL. He is also a leader of a pathophysiology research group in the stomatognathic system.

NON-FINANCIAL RELATIONSHIP DISCLOSURE: Dr. Justino is an unpaid member of the following international professional organizations: SBF, (Scientific Director) ABRAMO, CEMOL (Honorary), AAMS (Advisor).

LEARNING OUTCOMES: The use of software ImageJ to assess nasal aeration quantitatively; Describe biofeedback to patients while assisting in the evaluation and therapy of patients with mouth breathing.

Facial Carcinoma and Myofunctional Therapy

AUTHORS: Maristella Cecco Oncins, Hilton Justino da Silva (Presenting Author), Lucas Carvalho Aragão Albuquerque, & Daniele Andradeda Cunha

DATE & TIME: Saturday, September 12th, 12:00-1:00 pm

SYNOPSIS: Authors reported the predominance of unilateral injuries in male individuals, as is the case in this study. Therapeutic approaches were focused on passive never-gliding and motor stimulation techniques, as well as isometric and isotonic exercises. Knowledge of facial muscles was of utmost importance, and in the case described, the muscles were in a flaccid state. The anatomic-physiological facial muscle characteristics were essential to determine the rehabilitation method and conduct, as well as the fatigue resistance potential and orofacial muscle fiber characteristics. The evaluation and early therapeutic intervention contributed to the cranial nerve VII re-innervation and recovery, harmonizing orofacial functions related to the stomatognathic system.

FINANCIAL RELATIONSHIP DISCLOSURE: Study supported by the Federal University of Pernambuco, BRAZIL. Dr. Justino is an Adjunct Professor in the Speech-language graduate program-UFPE in the area of Orofacial Motricity - Federal University of Pernambuco, BRAZIL. He is also a leader of a pathophysiology research group in the stomatognathic system.

NON-FINANCIAL RELATIONSHIP DISCLOSURE: Dr. Justino is an unpaid member of the following international professional organizations: SBF, (Scientific Director) ABRAMO, CEMOL (Honorary), AAMS (Advisor).

LEARNING OUTCOMES: Describe facial carcinoma, identify the facial carcinoma implications in orofacial function, Evaluate functions related to the stomatognathic system.
Nonodontogenic Sources of Dental Pain: Pediatric Case Reports

**AUTHORS:** Hila Robbins, DMD & Kaitlyn Tarbert, RDH

**DATE & TIME:** Thursday, September 10th, 5:00-6:00 pm

**SYNOPSIS:** Non-odontogenic forms of dental pain and orofacial pain with or without headaches can be difficult to diagnose in children. Acquiring a detailed medical and dental history, locating the source of the pain, and recreating the pain complaint during clinical examination will help to provide a diagnosis, thereby directing treatment toward the source of pain rather than the site of pain. This presentation describes the diagnoses and integrative, multidisciplinary treatments of a series of pediatric dental patients exhibiting forward head posture, non-odontogenic dental and orofacial pain accompanied by headaches.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Dr. Robbins is in private practice

**NON-FINANCIAL RELATIONSHIP DISCLOSURE:** Miss Tarbert is an employee of Dr. Robbins

**LEARNING OUTCOMES:** Identify the relationship of forward head posture and its association with dental pain and orofacial pain with or without headaches; Identify the possible causes of forward head posture; Analyze case reports of pediatric patients with dental pain and orofacial pain, with or without headaches.

Reliability of the Myoscanner® when measuring the masseter muscle’s contraction force

**AUTHORS:** Maaske Treurniet, MA, SLP, (Presenting Author); MWH Schaap, PhD, neurosciences; MJH Schmitz, MSc, physiotherapist; RAW Damen, SLP student; & MDE Poot, SLP student

**DATE & TIME:** Friday, September 11th, 12:00-1:00 pm

**SYNOPSIS:** A good test-retest was found in this study, supporting the use of the Myoscanner® as an evaluation tool for Contraction Force of Masseter (CFM) during therapy, when measured by the same investigator. However, the inter-investigator reliability was moderate, indicating that this tool may be less suitable as a diagnostic tool. To draw definite conclusions, however, future research should investigate reliability over a longer period of time and by a greater number of investigators. Additionally, further research should focus on factors influencing the inter-investigator reliability when using the Myoscanner®, in order to improve this reliability.

**FINANCIAL RELATIONSHIP DISCLOSURE:** Mrs. Treurniet is a lecturer at Fontys University of Applied Sciences and Speech Language Pathologist in Rivierenland Hospital, Holland.

**NON-FINANCIAL RELATIONSHIP DISCLOSURE:** Mrs. Treurniet has no relevant non-financial relationships to disclose.

**LEARNING OUTCOMES:** Identify information about gender, weight, and side when interpreting CFM measured by the Myoscanner®; Describe the data of this study that supports the use of the Myoscanner® as an evaluation tool for CFM during therapy when measured by the same investigator; Describe the data of this study that does not support the use of the Myoscanner® as a diagnostic tool for OMDs.

LA Fact

The Hollywood sign wasn’t created to advertise movies and starlets; it was created to advertise real estate. Developers S. H. Woodruff and Tracy E. Shoults began developing a new neighborhood called “Hollywoodland.” The sign was meant to act as a huge billboard to draw new home buyers to the hillside. To advertise the Hollywoodland development, the sign was composed of 13 letters that spelled out the development’s name: “HOLLYWOODLAND.” The last four letters of the sign wouldn’t be dropped until 1949.
**Speaker Disclosures**

**Esther Bianchini, PhD**
*Financial*: Dr. Bianchini receives a salary or honoraria from PUC-SP university, CEFAC. She is the owner of a clinic for which she receives financial compensation. She also receives royalties from 2 books. Some traveling expenses were reimbursed by the AAMS, and she received complimentary conference registration.

*Non-Financial*: Dr. Bianchini is president of the SLP Department of the Brazilian Society of Sleep (ABSonora) and is a member of SBF, ABRAMO, AAMS, and IATOM. She serves on the editorial board of the CEFAC journal and CoDAS.

**Kevin Boyd, DDS**
*Financial*: Dr. Boyd is an instructor in the residency-training program in Pediatric Dentistry at Lurie Children’s Hospital for which he receives honoraria. He is in private practice. He also received a conference registration and some traveling expenses reimbursed by the AAMS.

*Non-Financial*: Dr. Boyd is a member of Lurie Children’s Hospital Craniofacial Anomalies and Sleep Medicine teams. He is on the Board of the American Academy of Physiological Medicine and Dentistry (AAPMD), and he has a Consulting Scholar position at the U Penn Museum’s section of Anthropology.

**Heather Clark, PhD, SLP**
*Financial*: Dr. Clark is employed and paid by the Mayo Clinic and received complimentary registration for this Congress in exchange for teaching and speaking. She is the co-investigator for an NIH grant R01 DC10367-01.

*Non-Financial*: Dr. Clark is a member, affiliate of several special interest groups, and a reviewer for a scientific journal for ASHA. She is also a member of the ANCDS, DRS, and ACPA.

**Ariana Ebrahimian, DDS**
*Financial*: Dr. Ebrahimian has no relevant financial disclosure.

*Non-Financial*: Dr. Ebrahimian is the treasurer of the North American Association of Orthoorthodontics.

**Antonio Ferrante, MD, DDS**
*Financial*: Dr. Ferrante is a partner in the “Centro Terapia Miofunzionale sas” company that promotes myofunctional knowledge for which he receives honoraria for teaching and speaking. He also receives honoraria from the University of Pisa and the University Federico II in Naples for teaching. He received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Dr. Ferrante is the past president of the International Myofunctional Association.

**Michael Gelb, DDS**
*Financial*: Dr. Gelb is the inventor and/or contributor to NORAD and Gelb appliances for which he receives royalties. He also receives honoraria from NYU for teaching.

*Non-Financial*: Dr. Gelb is on the advisory board of the AOMT (Academy of Orofacial Myofunctional Therapy) and the AAMS (Academy of Applied Myofunctional Sciences). He is a co-founder and board member of the AAPMD (American Academy of Physiological Medicine and Dentistry).

**Catherine Watson Genna, IBCLC**
*Financial*: Catherine Watson Genna is the author of lactation textbooks for which she receives royalties on sales: Supporting Sucking Skills in Breastfeeding Infants (Jones and Bartlett Learning, 2013) and Selecting and Using Breastfeeding Tools: Improving Care and Outcomes (Hale Publishing, 2009). She received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Catherine Watson Genna has no relevant non-financial disclosures.

**Maria Daniela Genovese MD, DDS**
*Financial*: Dr. Genovese has no relevant financial disclosure.

*Non-Financial*: Dr. Genovese has no relevant non-financial relationships to disclose.

**Thierry Gouzland, PT, OMT**
*Financial*: Thierry Gouzland is an independent contractor with Polyclinique Bordeaux Tondu for which he receives financial compensation. He received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Mr. Gouzland is Vice President and Board Member of the SIKL Société Internationale de Kinésithérapie Linguale.

**Tess Graham, PT, BBE**
*Financial*: Tess Graham earns fee-for-service income from breathing retraining consultancy and healthcare professional training programs. She receives publishing royalties from sales of her book, **CD, and online breathing course. She also received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Ms. Graham is a volunteer with the Butyko Breathing Educators Association and the Buteyko Institute of Breathing and Health Inc.

**Christian Guilleminault, MD, DBio**
*Financial*: Dr. Guilleminault has no relevant financial disclosure.

*Non-Financial*: Dr. Guilleminault has no relevant non-financial relationships to disclose.

**William Hang, DDS**
*Financial*: Dr. Hang is principal instructor in the Biobloc Orthorthotics Mini-Residency for which he is compensated. He receives royalties from a patent on an orthodontic appliance and clasps. He has his own company for which he receives various compensations.

*Non-Financial*: Dr. Hang is a board member of NAAFO (North American Association of Functional Orthodontics). He’s an advisor for the AOMT (Academy of Orofacial Myofunctional Therapy) and the AAMS (Academy of Applied Myofunctional Sciences). He is an advisor for the AAPMD (American Academy of Physiological Medicine and Dentistry).

**Gabor Hermann, DDS**
*Financial*: Dr. Hermann is CEO and shareholder in OrthoTech Innovation Laboratory of MyClearBrace aligner and functional orthodontic appliances. He is CEO and shareholder in the Dsmlie (Dynamic Smile) Company, providing a functional training program for patients supporting functional orthodontics. He received some travel expense refund from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Dr. Hermann is the founder and president of the Hungarian Association of Interdisciplinary Orofacial Functional Therapy.

**Steven Hou, DDS & Viet Nghiem, DDS**
*Financial*: Drs. Viet Nghiem and Steven Hou are in private practice and have no other relevant financial disclosures.

*Non-Financial*: Drs. Viet Nghiem and Steven Hou do not have any relevant non-financial disclosures.

**Miho Imamura, DDS, PhD**
*Financial*: Dr. Miho Imamura is the inventor and/or contributor to the original MFT support devices named M.I.H.O.devices and the expansion appliance named MIHO’s expansion. She is in private practice. She received some travel expense refund from the AAMS, and congress registration was waived by the AAMS.

*Non-Financial*: Dr. Miho Imamura is on the advisory board and is a member of the Japan Society for Oral Myofunctional Therapy.

**Virginia Johnson, DO**
*Financial*: Dr. Johnson is in private practice.

*Non-Financial*: Dr. Johnson is a Member of the Board of Directors of Osteopathic Physicians and Surgeons of California and is President of the Los Angeles County Osteopathic Medical Association.

**Hilton Justino, PhD**
*Financial Relationship Disclosure*: Dr. Justino is an Adjunct professor in the Speech-language graduation-UPE in the area of Orofacial Motricity, Federal University of Pernambuco, BRAZIL; leader of a pathophysiology research group on the stomatognathic system.

*Non-Financial Relationship Disclosure*: Dr Justino does not have any relevant non-financial disclosures.

**Pejman Katiraei, DO**
*Financial*: Dr. Katiraei is in private practice and has no other relevant financial disclosures at this time.

*Non-Financial*: Dr. Katiraei is the Vice President of the American Society for Endobiogenic Medicine and Integrative Physiology.
Lawrence Kotlow, DDS  
Financial—Dr. Kotlow assisted in the development of a variety of laser products, including innovative optics (laser glasses), T4M (videos and webinars), Schick (Serona digital radiography). He is an investor in the development of the Solea CO2 laser and, as such, he is also on their professional advisory board. For all of these, he has been a beta tester of new products for which he received honoraria. He received an honorarium/supplies from the AAMS, and congress registration was waived for his participation.  
Non-Financial—Dr. Kotlow is a member and volunteer for various professional organizations.

Derek Mahony, BDS(Syd), MScOrth(Lon), MOrthRCS(Eng)  
Financial—Dr. Mahony has no relevant financial disclosures.  
Non-Financial—Dr. Mahony has no relevant non-financial relationships to disclose.

Irene Marchesan, PhD, SLP  
Financial—Dr. Marchesan is the co-author and editor of Motricidade Orofacial for which she receives royalties. She is a Principal of the CEFAC Institute for which she receives compensation. She received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.  
Non-Financial—Dr. Marchesan is the President of the Brazilian Speech Pathology Society (Sociedade Brasileira de Fonoaudiologia). She is on the board of the Brazilian Myofunctional Therapy Association (Associação Brasileira de Motricidade Orofacial), the Academy of Orofacial Myofunctional Therapy, and the Academy of Applied Myofunctional Sciences.

Patrick McKeown, MA, BBE  
Financial—Mr. McKeown is the principal lecturer for Buteyko Clinic International, receiving a salary. He is a lecturer for the AOMT (Academy of Orofacial Myofunctional Therapy), for which he receives honoraria. He receives royalties from 2 books.  
Non-Financial—Mr. McKeown has no relevant non-financial relationships.

Michael Mew, BDS (Lond), MSc (Orth)  
Financial—Dr Mew is a shareholder in Orthodontic Health Ltd which is currently developing training devices but are not currently on sale. He’s the Clinical Director and Lecturer at the London School of Facial Orthotics for which he receives honoraria for teaching and speaking. He received some travel expense reimbursement and congress registration from the AAMS.  
Non-Financial—Dr Mew does not have any relevant non-financial disclosures.

Joy Moeller, BS, RDH  
Financial—Ms. Moeller is the author of Tucker the Tongue Finds His Spot for which she receives royalties and is on the faculty of the Academy of Orofacial Myofunctional Therapy for which she receives honoraria. She is also in private practice.  
Non-Financial—Ms. Moeller is on the Medical Committee of the American Sleep Apnea Association, the Board of the AAMS (Academy of Applied Myofunctional Sciences) and the board of the AAPMD (American Academy of Physiological Medicine and Dentistry).

Marc Moeller, BA (Planner, Session Monitor, and Panel Moderator)  
Financial—Marc Moeller is the Managing Director and main shareholder for the AOMT (Academy of Orofacial Myofunctional Therapy) for which he is compensated.  
Non-Financial—Mr. Moeller is the Board Chair and Executive Director of the AAMS (Academy of Applied Myofunctional Sciences) and on the Sleep and Respiratory Neurobiology Education Committee of the American Thoracic Society. He is a member of various professional organizations worldwide.

James Murphy, MD  
Financial—Dr. Murphy has no relevant financial disclosure.  
Non-Financial—Dr. Murphy has no relevant non-financial relationships to disclose.

Giovanni Olivi, MD, DDS  
Financial—Dr. Olivi has no relevant financial disclosure.  
Non-Financial—Dr. Olivi acts as a scientific referee for various specialized journals.

Licia Cocconi Paskay, MS, CCC-SLP  
(Congress Chairperson, President of the AAMS)  
Financial—Licia Cocconi Paskay is an independent contractor with OPICA, MSAC/UCLA, Sunrise Assisted Living for which she receives financial compensation. She is a lecturer for AOMT (Academy of Orofacial Myofunctional Therapy) for which she receives honoraria. She is also in private practice.  
Non-Financial—Ms. Paskay is president of the AAMS (Academy of Applied Myofunctional Sciences), and a member of ASHA, CSHA, and AAPMD.

James Redd, DDS  
Financial—Dr. Redd has no relevant financial disclosure.  
Non-Financial—Dr. Redd has no relevant non-financial relationships to disclose.

Elíana Riverí, PhD  
Financial—Dr. Capacho has no relevant financial disclosure.  
Non-Financial—Dr. Capacho has no relevant non-financial relationships to disclose.

Rakesh Bhattacharjee, MD  
Financial—Dr. Bhattacharjee has no relevant financial disclosure.  
Non-Financial—Dr. Bhattacharjee has no relevant non-financial relationships to disclose.

Mariano Rocabado, PT, DPT, cctT  
Financial—Dr. Rocabado has no relevant financial disclosure.  
Non-Financial—Dr. Rocabado has no relevant non-financial disclosures.

Nancy Rothstein, MBA  
Financial—Nancy Rothstein is an independent contractor and receives honoraria for speaking engagements. She received some travel reimbursement from the AAMS, and congress registration was waived by the AAMS.  
Non-Financial—Mrs. Rothstein serves on the Board of Directors and on the Executive Committee of the American Sleep Apnea Association. Her participation is on a volunteer basis, without compensation. She also serves without compensation on the NIH Sleep Disorders Research Advisory Board but receives reimbursement for travel to bi-annual Board meetings.

David Rubenstein, PhD  
Financial—Dr. Rubenstein is in private practice and has no relevant financial disclosures.  
Non-Financial—Dr. Rubenstein has no relevant non-financial relationships to disclose.

Ricardo Santos SLP, MSc, PhD  
Financial—Dr. Santos is a salaried instructor at the Escola Superior de Tecnologia da Saúde do Porto - IPP, Instituto EPAP | Ensino Pós-Graduado e Profissional, Grupo Trofa Saúde. He received some travel expense reimbursement from the AAMS, and congress registration was waived by the AAMS.  
Non-Financial—Dr. Santos has no relevant non-financial relationships to disclose.

Carla Stecco, MD  
Financial—Dr. Stecco receives royalties from a book and an atlas. She is in an Orthopaedic Surgeon in private practice and is a salaried Professor of Human Anatomy and Movement Science at the University of Padua, Italy. She received some travel expense refund from the AAMS, and congress registration was waived by the AAMS.  
Non-Financial—Dr. Stecco has no relevant non-financial relationships to disclose.

Franklin Susnabar, M-SLP  
Financial—Mr. Susnabar is in private practice with IRFMD and EOS Peru for which he receives financial compensation. He is the author of several books for which he receives royalties. He is a lecturer at the Universidad Mayor de San Marcos in Lima Peru for which he receives an honorarium. Some travel expenses were reimbursed by the AAMS, and the congress registration was waived by the AAMS.  
Non-Financial—Mr. Susnabar is director of CMOL (Comunidad de Motricidad Orofacial Latinoamericana); member of ABRAMO (Associação Brasileira de Motricidade Orofacial), and a member of the AAMS (Academy of Applied Myofunctional Sciences).
CONGRESS REGISTRATION INFORMATION

For additional information please visit www.aamsinfo.org | 310 382-7852

For AAMS preferred room rates www.aamsinfo.org/aams-first-congress

To go directly to the registration link: https://aams.memberclicks.net/2015-congress

GENERAL CONGRESS REGISTRATION

Early Bird until August 24th

$625 - Dentists, orthodontists, physicians
$395 - Therapists (SLP, RDH, OT, PT Lactation consultants, BBE etc)
$250 - Students (with ID)

After August 24th

$780 - Dentists, orthodontists, physician
$525 - Therapists (SLP, RDH, OT, PT Lactation consultants, BBE etc)
$325 - Students (with ID)

One day only

$350 - Dentists, orthodontists, physicians
$250 - Therapists (SLP, RDH, OT, PT Lactation consultants, BBE etc)
$125 - Students (with ID)

ADVANCED COURSES REGISTRATION

WEDNESDAY, SEPTEMBER 9th

12:00pm-4:00pm - Esther Bianchini, SLP, PhD
Myofunctional Therapy & Orofacial Pain, PMD
Co-Morbidities, OSA Intake Assessment, Treatment
and Their Relationship to Bruxism & OSA

$150

FRIDAY, SEPTEMBER 11th

1:00pm-5:00pm - Lawrence Kotlow, DDS, Giovanni Olivi, MD,DDS & Maria D Genovese, MD,DDS
Frenum Surgery Masterclass

$500 - Hands On
$200 - Observers

SUNDAY, SEPTEMBER 13th

8:00am-12:00pm - Irene Marchesan, SLP, PhD
Restricted Lingual Frenum: Diagnosis and Management

$150

8:00am-12:00pm - Carla Stecco, MD
Role of Deep Fasciae in Proprioception and Peripheral Motor Coordination

$150

8:00am-12:00pm - Michael Mew, DDS
Introduction to Orthotropics and Craniofacial Dystrophy

$300

HOTEL INFORMATION

Millennium Biltmore Hotel Los Angeles
506 South Grand Avenue, LOS ANGELES, CA 90071

AAMS has reserved a limited number of discounted rooms at the Biltmore at the rate of $179.00/night from Sept 9-14, 2015.

To book a room call 213 612-1575 or follow this link
www.reservations.millenniumhotels.com
Let them know you are attending the AAMS Congress.

Rooms at this rate are first-come, first-served and must be reserved by August 22, 2015.

(Rates are for single or double occupancy, and include complimentary internet access in all guest rooms.)

Guarantee Policy: A valid Credit Card is required to confirm your reservation.
Cancellation Policy: Cancel three days prior to arrival

Refund Policy:
A full refund will be given up to two weeks prior to the Congress less a $50 processing fee. (That fee will go up to $75 two weeks before the Congress). The AAMS reserves the right to cancel this Congress for insufficient registration or unforeseen circumstances. Cancellation of the Congress will result in a full tuition refund. However, the AAMS will not be responsible for financial loss due to cancellation including airline and hotel accommodations or similar circumstances.

Accessibility Policy:
Reasonable accommodations will be made for individuals with disabilities. Please contact us if you need special consideration.
In 1781, a group of 44 settlers founded Los Angeles. When L.A. was founded, the city's full name was "El Pueblo de Nuestra Senora Reina de los Angeles sobre el Rio Porciuncula." (If your Spanish is rusty, that translates to "The Town of our Lady Queen of the Angels on the Porciuncula River.")

www.aamsinfo.org

AAMS Congress Social Activities

Thursday September 10th

**Biltmore Hotel- Gold Room**
- 5:30-7:00 pm AAMS Sponsored Welcome Reception
- Kick off of the World Orofacial Myofunctional Sciences Day and the Year of Better Breathing
- Tributes to Pam Marshalla, Bill and Julie Zickefoose
- Surprise!

Friday Sept 11th

**Upper Terrace**
- AAMS Hospitality Hour 6:00-7:30 pm
- Relax, or rather, chillax with a glass of wine or a chilled beer

**Gala at the Oviatt Deco Penthouse** (617 South Olive St.-one block from the Biltmore)
- 6-7 pm Cocktails and Jazz with guest Prof. Christian Guilleminault at the Oviatt Deco Penthouse
- 7-10 pm Buffet dinner on the Oviatt Penthouse Terrace: Magician from Magic Castle, awards, projects, fun!

Saturday Sept 12th

**Upper Terrace**
- AAMS Hospitality Hour 5:30-7:00 pm
- Relax, or rather, chillax with a glass of wine or a chilled beer

**Closing Cocktail at “LA CITA”** (336 S. Hill Street, Los Angeles, CA 90013)
- Live Cumbia music celebrating the AAMS Congress in Cartegena, Columbia July 2016
- Wear and show your Congress Badge at La Cita for unlimited, tequila, beer, and iced water

**Dinner and a Show at the gorgeous Deco Restaurant Cicada**
- 9 pm Pete Jacob Wartime Radio Revue / Saturday night dinner special $49
- Admission tickets and reservations on sale at www.cicadaclub.com/weekly_schedule.asp
- $19 advance discount or $25 at the door (tickets not sold on the day of the show)
- Admission not included with dinner. Call 213-488-9488 for dinner reservations

Activities for the whole family

Grab a map from the front desk of the historic Biltmore and walk or hop on a bus and go visit the fashion district, the jewelry district, Union Station (great SoCal Spanish Revival style train station), Olvera Street, the Walt Disney Concert Hall by Frank Gehry, the Cathedral of Nuestra Señora de Los Angeles (great tapestry and alabaster windows), Central market, the flower market (best seen at 6 in the morning), Chinatown, Little Tokyo, LA City Hall (the “Daily Planet” of Clark Kent/Superman) or Broadway.

Take the metro and take your kids to Universal Studios or spend an afternoon in Hollywood. Rent a car and visit the Santa Monica Pier, Venice Boardwalk, Rodeo Drive in Beverly Hills, the Watts Towers (amazing!), the Griffith Observatory (featured in oh-so many movies and TV shows), be a live audience in one of the many shows at CBS, FOX, Sony and more.
We would like to thank our congress organizing committee:

Nicole Archambault Besson
Diane Bahr
Tracy Balsz
Jennifer Brush
Kathleen Carson
Franklin Susanibar Chavez
Amy Green
Janice Goodman
Shirley Gutowski

Brian Hockel
Hilton Justino
Yves Lajoie
Edmund Liem
Martha Macaluso
Courtney Mancini
Irene Marchesan
Joy Moeller
Marc Richard Moeller

Licia Coceani Paskay
Rossana Ramires
Hila Robins
Nancy Rothstein
Ricardo Santos
Candy Sparks
Grace Sun
Samantha Weaver

and to many of you who have contributed in so many ways... thank you!
CLOSING COCKTAIL
AT “LA CITA”

Live Cumbia music celebrating the AAMS Congress in Cartegena, Columbia July 2016
Wear and show your Congress Badge at La Cita for unlimited, tequila, beer, and icewater

5:30pm - 7:00pm Saturday Sept 12th

La Cita Bar & Nightclub
336 S. Hill Street
Los Angeles, CA 90013
Street parking available. Major parking lots 1/2 block north & south of us.
www.lacitabar.com

The AAMS encourages all congress attendees to book a table at the Cicada Club to converge, and dance out the finale.

TRIP THE LIGHT FANTASTIC

Dine and Dance at the historic 1928 Art Deco Oviatt Building

Big Band
20’s to 40’s Music
Art Deco Landmark
Strict Dress Code

The Cicada Club
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Los Angeles, CA 90014
www.cicadaclub.com

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www.ipsa2016.com

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In conjunction with
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The 1st Conference of Asian Society of Sleep Medicine

March 11-13, 2016
Taipei International Convention Center (TICC)
Taipei, Taiwan

www.ipsa2016.com

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