

## What is a digit sucking habit?

It is not uncommon for infants to have the habit of sucking on their thumb or any of their fingers (digits).



## Why is it Important to break the habit?

A digit sucking habit may cause permanent dental and skeletal changes with just 4-6 hours of force per day. Intensity, duration, and frequency of the habit all play a role. If the habit is stopped before the eruption of the permanent incisors, the adverse dental changes will likely begin to reverse naturally. Otherwise, it may result in an anterior open bite, proclined incisors and a narrow upper jaw.

**Reminder Therapy:** This is effective for those who

desire to stop, but need some help. An adhesive bandage,

secured with waterproof tape, on the offending digit can serve as a constant reminder not to place the finger in the

mouth. Some clinicians have used a mitten or sock to cover the fingers of the hand. This is especially useful during





## **Treatment Options:**

**Patient Choice:** Discontinuation of a digit sucking habit should be by choice. If the parents or child do not want to engage in treatment, it should not be attempted. If the child has recently undergone stressful changes in their life, it may be best to postpone treatment. Two-thirds of children stop by 5 years old. Some spontaneously stop upon entering school due to peer pressure.

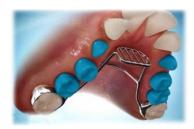
**Counseling:** This is an adult-like discussion between the doctor and patient explaining the impact digit sucking has on their teeth and appearance. Counseling appeals to the child's maturity and sense of responsibility and may move them to discontinue their habit.







**Reward System:** A contract is drawn up between the patient and the doctor. The contract states that the patient will discontinue the habit within a specified period of time. Leading up to the agreed upon date, it may help to place stickers on a calendar for every day the patient has successfully avoided the habit. A prize is presented at the end with verbal praise for meeting the conditions of the contract.



**Adjunctive Therapy:** If reminder or rewards systems are unsuccessful and the child truly desires to stop, there are some options for physical interruption of the habit. The first is an elastic bandage loosely wrapped around the elbow of the arm and worn at night for 6-8 weeks. This makes it difficult for the patient to bring their hand to their mouth. The second method is a palatal crib or other appliance placed in the patient's mouth to obstruct digit insertion. This is left in place for 6 months after the habit is stopped.

