





Low-tech therapeutic resources marketed in Brazil for orofacial motricity

Recursos terapêuticos de baixa tecnologia comercializados no Brasil para motricidade orofacial

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ABSTRACT

The use of therapeutic resources can facilitate and enable the proposed objectives in the intervention in orofacial motricity, through the prior orofacial myofunctional evaluation of each individual. However, there is no description of the marketing profile of these resources. Thus, the objective of this letter is to provide reflection on the use of these resources in the context of the Brazilian reality. Through a search on two commercial websites with a large reach in Speech-Language Pathology, the low-tech therapeutic resources marketed in Brazil for use in the intervention in orofacial motricity were listed. There was a predominance of those aimed at improving orofacial muscle and respiratory function. It is noteworthy, however, that the marketing of therapeutic resources was not always linked to randomized clinical trials.

Keywords: Orofacial motricity; Therapeutic resources; Low technology; Rehabilitation; Low-tech

RESUMO

O uso dos recursos terapêuticos pode facilitar e viabilizar os objetivos propostos na intervenção em motricidade orofacial, mediante a avaliação miofuncional orofacial prévia de cada indivíduo. Entretanto, não há descrição do perfil da comercialização desses recursos. Assim, o objetivo desta carta é proporcionar reflexão a respeito do uso desses recursos no contexto da realidade brasileira. Por meio de busca em dois websites comerciais de grande alcance na Fonoaudiologia, foram elencados os recursos terapêuticos de baixa tecnologia comercializados no Brasil para uso na intervenção em motricidade orofacial. Observou-se predominância daqueles voltados à melhora muscular orofacial e à função da respiração. Ressalta-se, no entanto, que a comercialização de recursos terapêuticos nem sempre esteve vinculada aos ensaios clínicos randomizados.

Palavras-chave: Motricidade orofacial; Recursos terapêuticos; Baixa tecnologia; Reabilitação; Baixo custo

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This letter aims to provide reflections on the use of low-tech therapeutic resources in therapeutic orofacial motricity intervention. Evidence-based practice implies the use of scientific data to validate a certain treatment⁽¹⁾, and the Speech-Language Therapy intervention, apart from being evidence-based, must be guided by the complaints and disorders presented by the assisted individuals. In the orofacial motricity intervention, speech therapists may use low-tech therapeutic resources in order to enhance the proposed exercises for improving stomatognathic functions. Some of those resources have the advantage of having easy access and low cost. Still, individualized therapeutic planning is fundamental as well as the use of such resources relying on evidence-based practice.

Search held between March and April/2024, in two largely accessed commercial websites in the field of Speech Therapy – Pró-Fono and Booktoy - by means of the “orofacial motricity” filter, found 149 low-tech therapeutic resources, with 85 in the Booktoy commercial website (44 in the varied materials and massagers tab, and 45 in the Pró-Fono materials tab), and 60 in the Pró-Fono commercial website. Repeated resources in the sites were excluded. Resources found in the Brazilian context ranged from a minimum price of R\$7.00 to a maximum price of R\$792.00. Among these resources, 34 aimed at the breathing function, 12 were to the speech, 8 to chewing, 10 to suction, 19 to articulation and 54 were to muscle tone/mobility. Some of them aim at more than one function.

The resources found included: Altmann nasal aeration device; Auxiliary for Tongue Tapering; Tongue depressor; Kinesio Tape; Proprioceptive Pen; Spiral Straws; Orthodontic Pacifier; Nose Cap; Anatomic Spoon; Finger Brush-Gum Massager; Toothbrush; Rubber bands (orthodontic elastics); Thermal Stimulator; Bottle Case for Breathing Exercises; Face/Lip/Tongue Trainer; Resistance Band; Latex Tubes; Guide for Tongue/Lip Positioning; Lip/Tongue Weight; Hyperboloid; Face Massager; Lip Resistance Plate; Respirom; Cork Stopper; Shaker; Scape-Scope; Orofacial Suction Cups. There was more than one option for those resources. Thus, the repeated ones or those with different types/colors were disregarded in the total counting.

The low-tech therapeutic resources evidence results associated with the speech therapy, such as the evidence of efficiency

on the use of the elastic band associated with the orofacial myofunctional therapy in cases of post-stroke facial paralysis in the acute phase⁽²⁾. Also, positive results were verified with the myofascial release in individuals with mild obstructive sleep apnea⁽³⁾. Such cases point that low-cost resources or even orofacial myofunctional therapy without the use of these resources generate satisfactory results, as long as they are guided by the specific clinical reasoning for the orofacial myofunctional disorders found. This observation aims to point out the importance of not recommending the use of therapeutic resources indiscriminately. However, the search did not aim to carry out a systematic review on the effectiveness of the orofacial motricity therapy, which could be expanded to that in a further study.

Among the therapeutic resources for orofacial motricity sold in Brazil, prevalence was observed for those which enhance orofacial muscles and the breathing function. However, it should be pointed out that the commercialization of such devices has not always been connected with randomized clinical trials. Therefore, this theme is supposed to bring about discussions and reflections on the use of resources without scientific evidence. Thus, the importance of studies on the relevance of the use of those therapeutic resources in orofacial motricity, including their actual benefits and the characterization of the product amount and quality should be restated.

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