

## Commentary

### Letter from the President: Annual preview

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## Letter from the President

Dear Members:

The twelve past months have been very crucial ones to oral myologists. Negative articles in major journals, together with the indictment of the Joint Committee on Dentistry and Speech Pathology-Audiology, have nurtured serious doubts in the minds of many dentists and speech pathologists. It is true that we need more, better controlled research. It is equally true, however, that therapy for oral myofunctional disorders has proven itself clinically to be valid and effective. Those who have been providing the therapy over the years have ample evidence of its value. Time after time we see patients years after all treatment has ended and observe stable, normal occlusion and normal oral habits. Contrasting with these patients are those who are still referred to us after orthodontic relapse who did not have the benefit of therapy prior to orthodontic work. We help them correct their abnormal habits, orthodontics are resumed, the teeth are again straightened, and this time no relapse occurs. These are our everyday experiences.

Now our challenge is to prove this success to our skeptical colleagues, experimentally. Our research needs to have control and experimental groups. It should be done under the direction of someone trained to conduct careful investigations. Measurements should be objective, whenever possible. When judgments need to substitute for measurements, they should be made by independent, sophisticated observers. Bases for determining presence or absence of tongue thrust must be standardized, in order that comparisons might be made among investigations throughout the world. The research will be more acceptable if it is carried out in respected universities and research centers.

A deep concern to members of the International Association of Oral Myology is the number of poorly-trained clinicians providing therapy throughout the United States. One of the major objectives of the Association during the next several years is to broaden and deepen the training of oral myologists. We hope to place the training in the universities, where trainees have the advantage of receiving instruction from well-prepared professors representing the various disciplines which contribute to the total training of the oral myologist. These disciplines include dentistry, speech pathology, and psychology. We are communicating with schools of dentistry and departments of dental hygiene to tell them of our goals and to offer the services of our members in teaching courses in their colleges. Training guidelines have been developed which will be implemented in teaching these courses.

Our efforts, then, will be two pronged; 1) to foster good research, and 2) to upgrade training. We will need to enlist the services of every certified member of the Association to reach the many training programs throughout the United States, and, we hope, throughout the world. Those who have already completed the "trainer-training course" will be asked to conduct courses in their parts of the country. Courses will be offered in the East and in the West to those who are certified but have not had the specialized training needed to train others.

The responsibility for coordinating these efforts during the coming two years rests on the president. Any information concerning prospective or needed courses should be sent to Dr. Marvin L. Hanson, President, IAOM, 1201 Behavioral Science Building, Speech Pathology and Audiology, University of Utah, Salt Lake City, Utah, 84112. We are a young, energetic, and dedicated organization. Our members have a strong conviction that the work they do is an essential part of preventive and corrective dental treatment. There is

an unmistakable spirit of unity in our meetings and in our communications in the Association. People volunteer for assignments with eagerness and carry them out promptly and effectively. There can be no doubt that the coming years are going to be productive ones for the field of oral myology. I dedicate myself to this end and request the help of all who are, or wish to become, members of the International Association of Oral Myology.

Marvin L. Hanson, Ph.D.  
President, I.A.O.M.