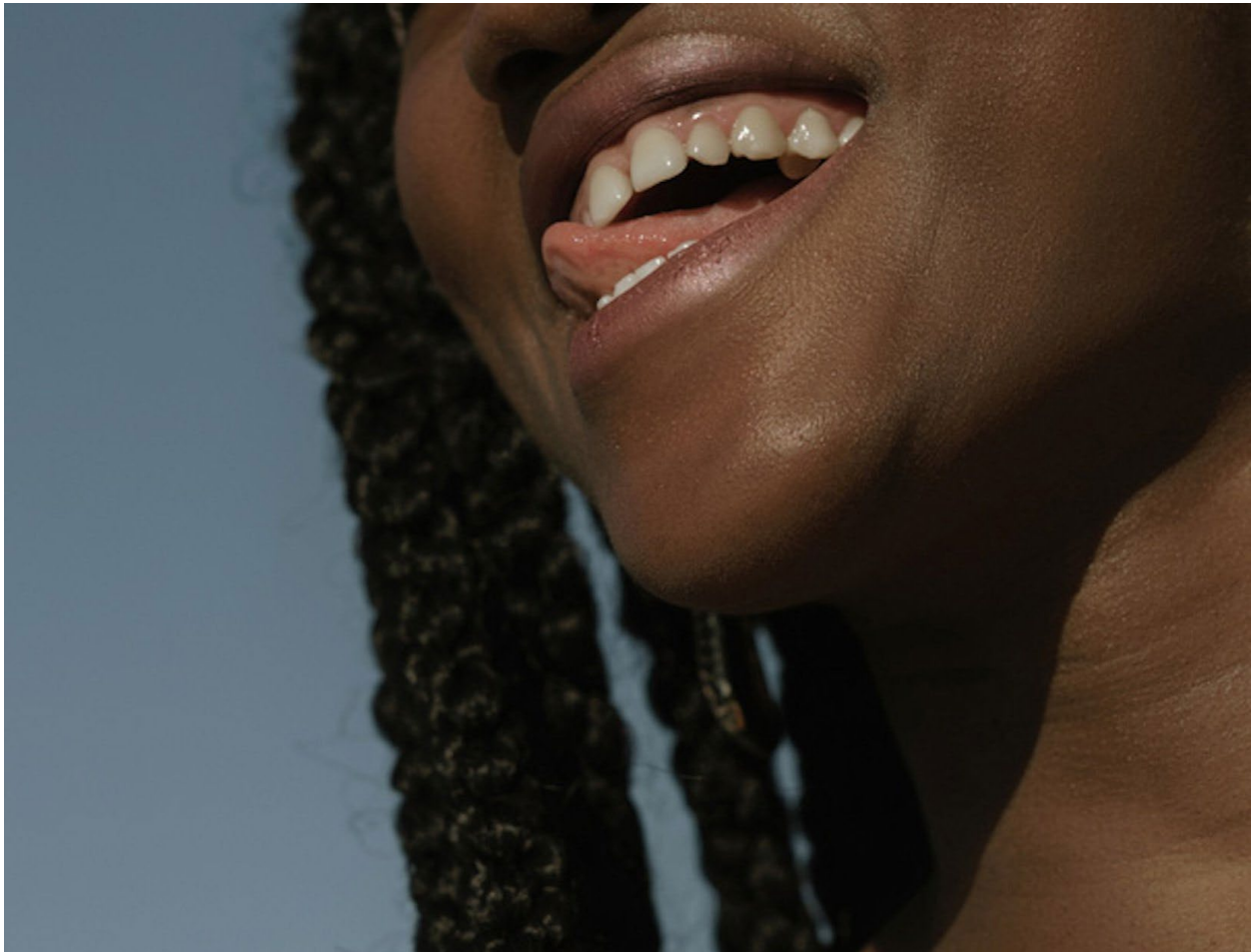


# Do You Have Bad Tongue Posture?

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Published on: June 13, 2024

EXCLUSIVE



HYPOTHESIS AND EMERGING RESEARCH  
Toggle description

When my biological dentist told me that I had incorrect tongue posture during a regular dental exam last year, my mouth opened even wider: There's a *right* way to place your tongue in your mouth? I had to learn more.

Correct tongue posture is when your entire tongue—the tip, middle, and back of your tongue—is touching the roof of the mouth, with a soft suction or light pressure that keeps it in place, says Priya Mistry, DDS, a dentist who focuses on TMJ disorders. Where you place the tip is particularly important. “The tip of the tongue should be on the roof of the mouth right behind the front two teeth, resting on the tissue—not against the teeth or pushing forward on the teeth,” she says.

When your tongue is in the correct position, your mouth closes and you naturally breathe through your nose. Nose breathing properly filters, humidifies, and warms (or cools, depending upon the ambient temperature) the inhaled air. It also increases the production of nitric oxide, a gas that improves blood flow and oxygen delivery throughout the body and reduces inflammation. Nose breathing also activates the parasympathetic nervous system (the relax-and-digest part of your nervous system that allows the body to repair more efficiently).

## **THE EFFECTS OF INCORRECT TONGUE POSTURE**

“When the tongue is in the right position, it exerts light pressure on the roof of the mouth—the palate,” Mistry says. The pressure of the tongue puts force onto the bones of the mouth and molds the roof to become flat and wide, which is ideal for the nasal passages—it keeps them open and clear.

Without proper tongue posture, the anatomy changes. The roof of the mouth becomes narrow and arched, which pushes up against the nasal cavity. This can cause the nasal septum to deviate into the nasal passage. Mistry says that this can lead to disordered breathing because the airways are not open and clear. As a result, you begin to breathe through your mouth—instead of your nose—which can be stressful for the body.

“You have to really take in big gulps of air [when mouth breathing] to get the same oxygen saturation because the air isn't used as efficiently,” says Mistry. It also affects your quality of sleep. “When you're breathing through your mouth all night, it's like a workout,” Mistry says. And you're likely not going to experience deep levels of restorative sleep.

Research shows that mouth breathing is linked to decreased saliva production, increasing the chances of tooth decay and gum inflammation. (Saliva cleans your mouth and helps it maintain a certain pH—when it's reduced, the teeth and gums are less protected.) Emerging research also suggests that mouth breathing may lead to TMJ disorders due to the improper development of jaw joints and muscles that occurs from not having proper tongue posture when you breathe through your mouth.

# WHAT CAUSES INCORRECT TONGUE POSTURE

According to Mistry, understanding why and how you developed incorrect tongue posture is critical to determining how to properly correct it. Here are four common reasons for incorrect tongue posture.

1. **Tongue-tie**, or ankyloglossia, is when your tongue has limited mobility because it's restricted to the bottom of your mouth by a stringlike tissue called the lingual frenulum. Everyone has a lingual frenulum, but when it's too restrictive or attached too close to the front of the mouth, instead of farther back, it causes a tongue-tie. "The tongue-tie will make it so you cannot have correct tongue posture," Mistry says. There are two types of tongue-ties. The first, an anterior tongue-tie, is easy to identify because it's located at the front of your mouth—you'd get this diagnosis as a baby. The second, the posterior tongue-tie, is more ambiguous. (This is the one I have and didn't know about until my recent dental exam.) Posterior tongue-ties are located farther back in the mouth, which means the tongue has more mobility than it does with the anterior tongue-tie, but its mobility is still limited compared to what's normal. "There are many people in the medical and dental communities that think this tongue-tie type is a fad and it's not a real thing," says Mistry. But she says she's witnessed too many patients suffer the consequences of it to dismiss it as a dental trend.
2. **Allergies**. "Allergies can make it very difficult, if not impossible, to breathe through your nose," says Mistry. The nasal congestion—caused by inflammation of the lining of the nasal passage—can significantly narrow or block airways. This forces mouth breathing and poor tongue posture.
3. **Enlarged tonsils or adenoids**—glands that sit in the back of the throat—block the end of the nasal passages that connects to your throat, making it difficult to breathe through your nose.
4. **Nasal obstructions**, like a deviated septum or enlarged nasal turbinates—bony plates inside your nose—can block the nasal passage, disrupting airflow. Your body naturally compensates for the lack of air by breathing through your mouth, resulting in incorrect tongue posture.

# HOW TO ASSESS AND TREAT INCORRECT TONGUE POSTURE

Mistry says mouth breathing is a key sign that your tongue is not in the correct place—mouth breathing and tongue posture are intricately connected. “You cannot breathe through your mouth and still have the tongue in the correct position—it’s impossible,” she says. That means that if your lips are apart (not sealed), then your tongue is not in the correct position. Mistry says that you can check in with yourself throughout the day—anytime you’re not talking—to see whether your mouth is open. If it is, you’re mouth breathing.

But just having your mouth closed doesn’t guarantee that your tongue is in its proper place. To determine whether you have proper tongue posture—and correct it if you don’t—Mistry says professional guidance is needed. “This is not easy to correct on your own,” she says. It can cause pain if it’s done incorrectly.

Mistry recommends mouth tape only for those who are certain they can breathe through their noses already. You don’t want to limit your breathing altogether—mouth breathing is better than not breathing at all. Either way, Mistry says mouth tape alone won’t correct your tongue posture.

The best thing you can do, she says, is consult with a myofunctional therapy provider—sessions are like physical therapy but for the tongue and facial muscles. A general dentist is not likely to provide guidance in this area, unless they’ve had training beyond dental school. “We don’t learn about this in dental school,” she says.

A myofunctional therapy provider is trained to find out what’s causing your mouth breathing issue and can make the appropriate referrals. For example, if they find that a tongue-tie or nasal obstruction is the cause of your incorrect tongue posture, they can refer you to a skilled, airway-focused otolaryngologist (ear, nose, and throat doctor). During the treatment process, they can work to retrain your muscles—the ones that surround and support your tongue—to adapt to a correct tongue posture. Mistry recommends the Academy of Orofacial Myofunctional Therapy as a resource to find a myofunctional therapy provider.