

# CLINICAL AID

## A Non-Invasive Method for Ending Thumb- and Fingersucking Habits

**T**humb- and fingersucking habits can have many negative consequences in terms of dental and skeletal growth. My office has discovered a simple, non-invasive method for ending these habits, which we have used successfully for the past seven years.

In 1999, my wife, a pediatric dentist, found a product at our local pharmacy called Mavala Stop\* (A)—a transparent liquid with a bitter taste that is applied to the nails to discourage nail biting and thumbsucking. Toxicology reports indicate that the product's active ingredient, denatonium benzoate, is completely safe, even for daily application.<sup>1</sup> Mavala Stop costs only about \$4.80 per 10ml bottle when ordered directly from the manufacturer. In addition, its ease of use makes it preferable to intraoral appliances such as thumb cribs, which have shown inconsistent results and can interfere with eating and speech.

### Procedure

I use the following protocol for new patients with thumb- or fingersucking habits:

1. At the initial consultation, discuss the benefits of stopping the habit with the patient and parent.

2. Review the treatment alternatives for habit cessation, including Mavala Stop, and their costs. After showing the patient and parent a thumb crib, discuss how the appliance may affect speaking and eating, and let the patient and parent choose which method they prefer.

3. Assuming Mavala Stop is chosen, apply some to the parent's and patient's nails, and offer them the bottle as a gift. Instruct patient and parent on daily application of the product to the patient's nails.

4. At the end of the consultation, ask the parent and patient to taste the Mavala Stop on their nails.

5. Schedule the patient for a follow-up visit one month later. By that time, almost every patient will have discontinued the habit, and the appointment can be used to provide positive reinforcement.

### Discussion

Compared with other treatment modalities for cessation of thumb- and fingersucking habits, Mavala Stop is faster, easier, less invasive, and less expensive. It has a more unpleasant taste, lasts longer, and is much more effective than other deterrent products we have tried. Since we began using Mavala Stop nearly seven years ago, my practice has not placed a single habit-breaking appliance. Patient participation in the deci-



sion-making process improves compliance and motivation.

Mavala Stop is especially helpful in patients with severe oral-digital habits, such as those with obsessive-compulsive disorder who frequently pick at their appliances, causing excessive damage. It can also be used by patients who experience frequent breakage of anterior brackets due to chronic nail biting.

### REFERENCES

1. Joubert, J.P.: *Risk Assessment for Denatonium Benzoate*, Centre d'Expertise Réglementaire et Toxicologique, St. Malo, France, 2006.



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