## LATERAL PTERYGOID AND LATERAL RECTUS ALTERNATION IN STANDING

by Ron Hruska, MPA, PT

- Reduces palatoglossus and pharyngopalatine reciprocal restriction, and limitation of pharyngeal expansion.
- Facilitates occipital rotary repeated occurrence on both atlas fossae, and therefore limits overuse of unilateral concomitant sternocleidomastoid and mylohyoid during over lateralized rotation of the occiput and counter rotation of the mandible.
- Promotes laryngeal relaxation of adductor muscle and hyoid depressors.
- Diminishes demands on lateral rectus and superior oblique extraocular eye muscles.
- Minimizes genioglossus guidance of mandible and cervical orientation.
- Prevents overactivity of palatoglossus muscle and palatine-sphenoid compression, elevation of posterior portion of the tongue, pulling of the soft palate inferiorly, and thus narrowing of the diameter of the oropharyngeal isthmus.
- Maintains appropriate laryngeal air flow associated with laryngeal resistance and sub glottal pressure, for uninterrupted phonation.
- Realigns tongue, oral pharynx, sphenoid and cervical swallowing positions.

## LATERAL PTERYGOID AND LATERAL RECTUS ALTERNATION IN STANDING











Stand with your feet shoulder width apart with your hands and arms relaxed by your side.

Sense your big toes and inside arches on the ground or floor. Use shoes if necessary.

Slide your tongue through your front teeth and then gently pull it back in your mouth, keeping the 'freeway space' that was just created.

Keep this freeway space and your tongue relaxed, as you slowly breathe in through your nose and out through your mouth. Place your tongue on your upper, front, palate as you breathe in through your nose and then relax the tongue as you breathe out through your mouth.

Continue to breathe in the above manner as you move your mandible forward and to the right gently, and slowly, without the use of the tongue. Don't move the mandible too far laterally, as you may use your tongue to help move the mandible, which is not desirable.

Hold for 3 to 4 breaths, and then return your mandible back to the midline. Find your freeway space again with the use of your tongue and then gently pull it back in your mouth.

Look to the left with both eyes, and continue to breathe as before. While keeping your eyes focused to the left, move the mandible forward and to the right gently, and slowly, without the use of the tongue. Hold again for 3 to 4 breaths.

Relax your eyes and mandible.

Repeat the above steps, but reverse eye and mandible directions.