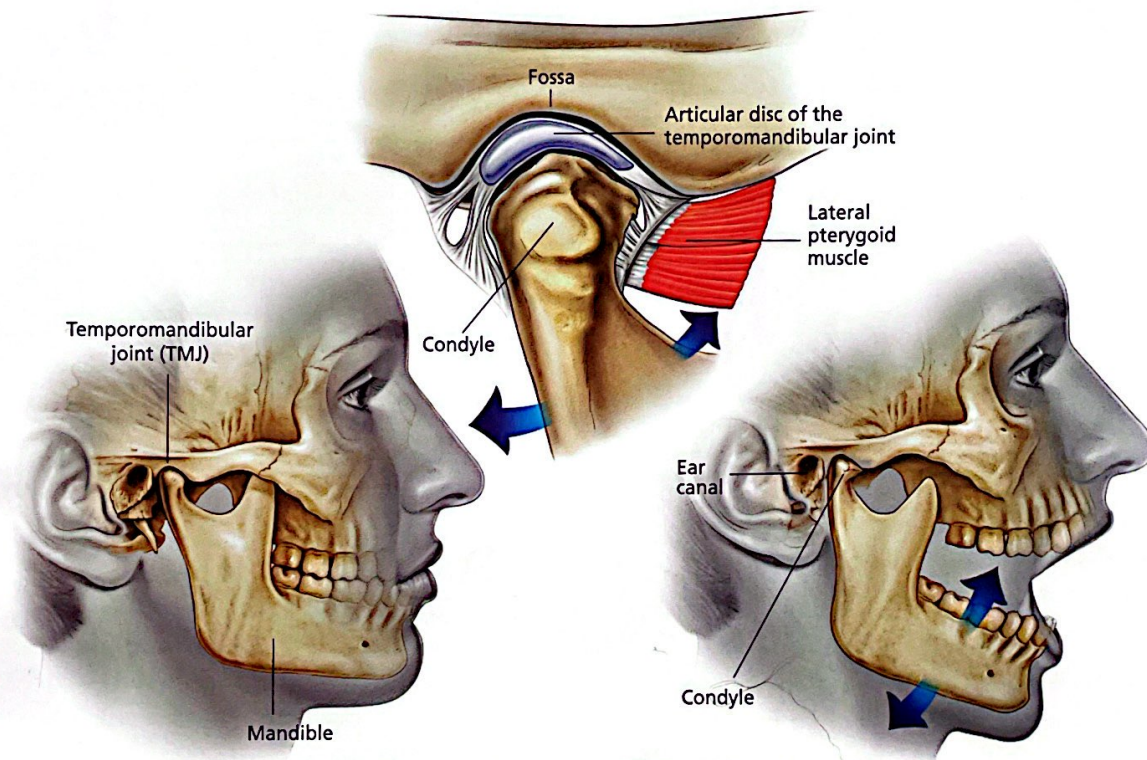


# Disorders of the Jaw Joint

A guide for patients



Your dentist can explain more about TMJ anatomy and symptoms.

The jaw joint is also known as the “temporomandibular joint”, or “TMJ”. It can be felt by placing your fingers just in front of your ears, and opening and closing your mouth.

The joint allows the jaw to open, close, and move to the side and forward. It plays an important role in jaw functions such as talking, chewing and yawning. It

is one of the most complex and frequently used joints in the body.

A TMJ disorder may affect one or both joints, often causing pain and limiting jaw function. Symptoms usually arise in early adulthood, but children and the elderly can also be affected.

TMJ disorders are common, with about seven in 10 people being affected at

some time in their lives. Although about one person in four is aware of the symptoms or reports them to a dentist or medical practitioner, only five people in every 100 seek treatment.

Most symptoms of TMJ disorders are mild and do not need treatment. As with other joints of the body, symptoms often go away with time.

## CAUSES AND SYMPTOMS OF TMJ DISORDERS

While the cause of a TMJ disorder is often unknown, various factors can aggravate a TMJ disorder, such as:

- missing teeth
- grinding or clenching of teeth, which may be linked to stress
- emotional or physical stress, and tension in the jaw muscles
- injuries such as fractures or dislocations of the TMJ
- conditions such as osteoarthritis or rheumatoid arthritis
- wrongly shaped dental fillings, crowns or bridges.

TMJ disorders in different people can cause different symptoms that may vary from mild discomfort to severe pain. For example, pain may be sharp, searing and intermittent, or dull and constant.

Symptoms of a TMJ disorder may include:

- limited jaw movement
- difficulty in opening the mouth
- a stuck or “locked” jaw
- clicking, grating or popping noises from the jaw joints
- pain when chewing, yawning or opening the jaw widely

- pain in or around the ears and cheeks
- headaches and, occasionally, migraine-like headaches and nausea
- earaches, loss of hearing or ringing in the ears
- face, neck, back and shoulder pain
- a feeling of muscle spasms
- toothache
- clenching and grinding of teeth
- an uncomfortable bite or “occlusion” (that is, the contact of the teeth in the upper and lower jaws as they meet during chewing or when the jaws are closed).

## Diagnosis of TMJ Disorders

An accurate diagnosis is important to ensure that the right treatment is undertaken.

Before starting treatment, your dentist will make a diagnosis based on a clinical examination and your medical and dental history.

During the examination, the dentist

will note the exact location of pain, stiffness or soreness, the range of jaw movement, and any noises in the jaw joint. The dentist may examine your bite, tooth wear and movement of teeth.

To assist with diagnosis, your dentist may recommend:

- plaster moulds of your teeth to see if

your occlusion (bite) is correctly balanced

- X-ray films to see if the joints are the correct shape
- completion of a questionnaire and a pain diagram to assess how your symptoms affect your quality of life.

## Treatment Methods of TMJ Disorders

TMJ disorders are best treated "conservatively", that is cautiously, using treatment methods that do not have any permanent effect on the teeth and jaw joint. As TMJ disorders are often temporary, simple treatment methods are used whenever possible to help reduce symptoms and restore jaw function. Relief from symptoms may take time, particularly if the TMJ disorder has developed over a long period.

Your dentist will involve you in preparing a treatment plan and may call upon other healthcare professionals, if necessary. A well-designed treatment plan may address both physical and emotional factors.

Effective treatment should:

- lessen or relieve your pain
- restore your jaw function
- minimise any noises from your jaw joint
- enable you to carry out your normal daily activities.

In some people, the treatment plan may take several months to be effective.

For the best results, follow your treatment plan carefully. It may include some or all of the following treatments.

### Occlusal appliance therapy

Occlusal splints (also known as bite plates) may be used to take pressure off the jaw joints and teeth. These are

usually worn at night and should not have any permanent effect on the position of teeth.

Custom made by your dentist, they must be adjusted regularly and monitored for some months to help relieve pain.

### Modified diet

To minimise chewing and rest the jaw, eat only soft foods. When a small amount of chewing is necessary, try to chew on both sides of the mouth. Do not favour one side.

### Avoid extreme jaw movements

To rest the jaw, do not yawn, chew or talk too much.

### Physiotherapy

Exercises, massage, gentle movement and muscle stretching can be effective in reducing pain and stiffness, and increasing strength and mobility.

### Warm or cold packs

Muscle relaxation can be achieved by applying warm or cold packs to tender areas.

### Relaxation and stress management

Learn how to relax and lessen stress. This can reduce tension in the jaw joint. Your dentist may recommend a stress management program.

### Behaviour modification therapy

Individual or group counselling, or support sessions, can be effective in

identifying sources of stress and learning how to modify behaviour.

### Medication

In some cases, your dentist may recommend short-term medication to help relieve symptoms and assist other treatment methods.

Your dentist may prescribe a painkiller, anti-inflammatory, anti-anxiety agent, sedative or muscle relaxant. Take medication only as directed.

Your dentist will be pleased to answer questions you may have regarding medication. Read the Consumer Medicine Information which most prescription medicines have in the box. If you need further information or have questions about the medication, ask your pharmacist.

### Specialist management

If pain and dysfunction are severe and chronic, and initial conservative treatment has not been effective in relieving symptoms and restoring jaw function, the dentist may refer the patient to a specialist in temporomandibular disorders.

### Surgery

Rarely, surgery may be required. Your dentist will refer you to an oral and maxillofacial surgeon if surgery may be needed.

## Talk to your dentist

This pamphlet is intended to provide general information about TMJ disorders. It is not a substitute for advice from your dentist. This pamphlet does not contain all known facts about TMJ disorders, symptoms, diagnosis and treatment. If you are not sure about the benefits, risks and limitations of treatment, ask your dentist. Your dentist will be able to answer questions or concerns you may have about diagnosis and treatment. Your dentist cannot guarantee that treatment will meet all of your expectations and that it has no risks. If you are uncertain about the advice you are given, you may wish to seek a second opinion from another dentist. This pamphlet should be used only in consultation with your dentist.

