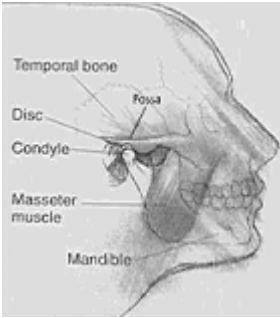


Causes and Treatments for Temporomandibular Disorders



What are temporomandibular diseases and disorders (often abbreviated as "TMJ")?

"TMJ" refers to a collection of clinical problems involving the temporomandibular joint (TMJ), the muscles used in chewing (called the muscles of mastication), or both.

How common are temporomandibular diseases and disorders?

According to a U.S. National Institutes of Health (NIH) survey, over 10 million people in the U.S. report TMJ symptoms at any given time. Women in the childbearing years slightly outnumber men in reporting symptoms. When it comes to seeking care, the proportion of women increases, and in the more severe cases, women patients far exceed men.

What are the most common signs and symptoms?

The symptoms of TMJ include pain in the cheek, near the ear, jaw locking (inability to open or close) and jaw sounds. Pain is either episodic or persistent. Symptoms can occur on one or both sides of the face and may include other body pain. Most people have relatively mild symptoms, but a sizable minority goes on to develop persistent pain and severe limitation in jaw motion. These symptoms can lead to diet restrictions, major disruptions in ability to work and engage in normal social and family life.

Do we know what causes TM problems?

Like any other joint, various types of arthritis as well as damage from intentional or unintentional injury can affect the TM joint and surrounding tissues. Whether some patients are more susceptible because of anatomic variations in the joint or other individual characteristics is under study, as are the reasons for the preponderance of women among the more severe cases of TMJ.

What should I do if I experience symptoms?

Any lasting pain and/or dysfunction should be properly diagnosed. It is important to rule out tumors, neurological problems, and other medical conditions that may be causing the jaw symptoms. As a first step, see your family physician, who may refer you to a neurologist, a rheumatologist, or other specialist. If in doubt, seek an independent second opinion. *Jaw sounds and a limited mouth opening without pain are not indicative of a current or potential TMJ problem.* If you are referred to a dental professional for treatment, the National Institute of Dental and Craniofacial Research (NIDCR) recommends avoiding any treatment that invades the tissues of the face, jaw or joint or that causes permanent, or irreversible changes in the structure or position of the jaw or teeth. Remember, most TMJ problems will resolve over time.

How are TM diseases/disorders diagnosed and treated?

Understanding of TMJ pathology has not matured to the point where tests such as a tissue biopsy or blood sample can establish a diagnosis. At this time clinicians note symptoms, patient history, and may use X-rays. There are at least 50 different treatments available, often reflecting the type of provider seen. Most patients who seek care initially improve with a variety of treatments and may even improve without treatment. One point is clear: there is no "one-size-fits-all" approach to managing TMJ. While milder cases often receive more aggressive treatment than they need, treatment of cases with severe debilitating pain often appears inadequate. Experts convened at an NIH Technology Assessment Conference held in 1996, http://odp.od.nih.gov/consensus/ta/018/018_statement.htm, concluded that conservative and reversible approaches are the treatments of choice, along with adequate measures of pain relief. The safety and efficacy of jaw surgery, including implants to replace all or parts of the joint, have not been demonstrated in clinical trials. Many cases of implant failure have led to serious complications.

Will my insurance cover TMJ claims?

Controversy exists over whether TMJ is a dental or medical condition. Presently, diagnostic criteria as well as many treatments lack scientific validation. These factors, along with evidence that some patients' TMJ problems are made worse following some treatments, have led insurance companies to question covering them or even decline to cover diagnostics and treatments of TMJ.

What research needs to be done on "TMJ"?

In the spring of 2000, the national patient advocacy group, *The TMJ Association*, co-sponsored a workshop, *"Moving TMJ Research into the 21st Century."* Key recommendations included 1) the need for animal, computer, and cell culture models to study the normal, injured, and diseased joint, 2) development of a diagnostic classification system, 3) evaluation of TMJ tissue repair problems and the development of new methods of tissue reconstruction using gene and protein therapeutic approaches, and 4) studying the neurological basis of deep tissue and joint pain in order to develop better means of pain control. Details of the workshop and extensive information on TMJ can be found at the group's Web site, www.tmj.org.



They Feel Their Best with You and Crest.