

## WHAT IS THE TEMPOROMANDIBULAR JOINT?

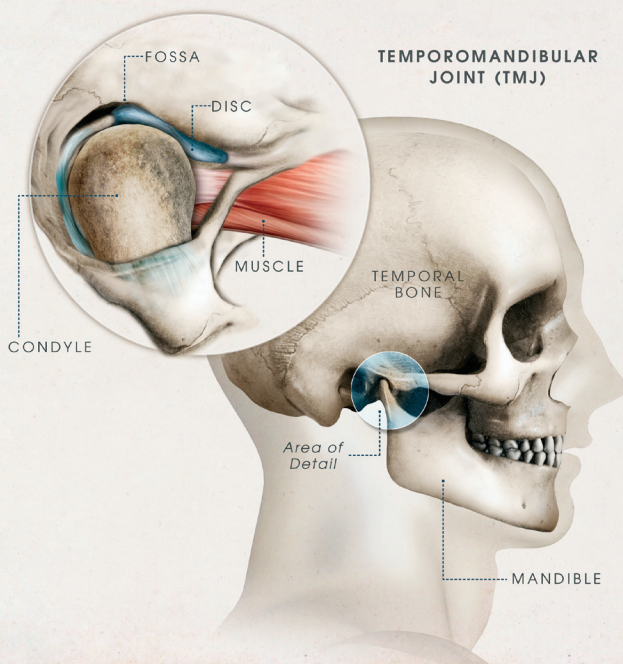


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If you place your fingers in front of your ears and open your mouth, you can feel the joints. The temporomandibular joint connects the condyle of the lower jaw (mandible) with the socket (fossa) of the temporal bone on the side of the head.

These joints allow the jaw to smoothly move up and down and side to side, allowing us to talk, chew and yawn. Muscles attached to the jaw joint control its position and movement.

A soft disc lies between the mandibular condyle and the temporal bone and absorbs shock to the jaw joint.

## HOW ELSE DOES A PROSTHODONTIST HELP?

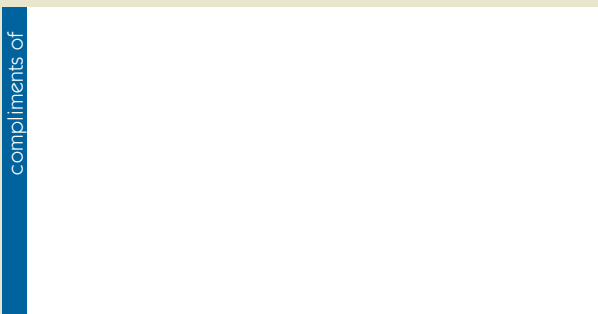
Prosthetic treatment (crowns, bridges, implant restorations, etc.) might be necessary to stabilize the bite, particularly following a diagnosis of localized osteoarthritis or degenerative joint disease. These conditions often alter the jaw posture and cause an uneven bite. However, extensive prosthetic treatment should be provided only after the TMJ disorder has been adequately diagnosed and its pain successfully managed.

For more information ask your prosthodontist or contact the American College of Prosthodontists at [www.prosthodontics.org](http://www.prosthodontics.org)



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## TMJ/TMD: pains in the jaw

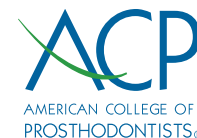


Do your jaw joints hurt when you chew?

Does your jaw hurt, click or pop when you open your mouth?

Does your jaw occasionally lock?

All can be symptoms of temporomandibular joint and muscle disorders known better as TMJ or TMD.



[www.prosthodontics.org](http://www.prosthodontics.org)

## What are the signs of TMJ?

Pain in the chewing muscles or jaw joint is the most common. Other symptoms include:

- Radiating pain in the face, jaw or neck
- Jaw muscle stiffness
- Limited movement or locking of the jaw
- Painful clicking, popping or grating in the jaw joint during movement
- A change in your bite

## TMJ disorder categories

**Myofascial pain:** Most common, involves discomfort or pain in the jaw muscles.

**Dislocation or injury:** Internal changes to the joint which may involve a displaced disc, a dislocated jaw or injury to the muscle.

**Arthritis:** Degenerative or inflammatory joint disorders.

It is possible to have one or more of these conditions simultaneously. Some people also have other health problems that co-exist with TMJ.

## What causes TMJ disorders?

Jaw noises alone, without pain or limited jaw movement, do not indicate a TMJ disorder or that treatment is needed.

Trauma to the jaw plays a role in some TMJ disorders. But for most jaw joint and muscle problems, we don't know the causes. There is no scientific evidence that clicking sounds in the jaw joint lead to serious problems.

It's also unclear if stress and tooth grinding are major causes of TMJ disorders. Many people with these disorders don't grind their teeth and many longtime tooth grinders don't have painful joint symptoms.

It is unclear to what degree, but stress might play a role.

## How does TMJ progress?

It's not clear. Symptoms often worsen and ease, but what causes these changes isn't known. Most TMJ patients exhibit a relatively mild form of the disorder. Their symptoms improve or disappear within a few weeks or months.

For others, the condition causes long-term, persistent and debilitating pain. This is more common in women than in men.

## Is it a short- or long-term problem?

For most people, pain in the jaw joint or muscles does not signal a serious problem. It is temporary and may occur in cycles. Eventually, the pain will go away without treatment.

Some people, however, develop significant, long-term symptoms.

## WHAT TREATMENTS ARE AVAILABLE?

Experts recommend using the most conservative and reversible treatments when possible, even for patients with persistent TMJ disorders.



### Self-care

- Eat soft foods.
- Apply ice packs.
- Avoid extreme jaw movements—wide yawning, loud singing, gum chewing.
- Learn techniques to reduce stress.
- Practice gentle jaw stretching and relaxing exercises to increase jaw movement. A referral to a physical therapist might be necessary.

### Pain medication

Short-term use of common pain medicines might provide temporary relief from jaw discomfort. When necessary, stronger pain or anti-inflammatory medications, muscle relaxants or antidepressants may be prescribed.

### Stabilization splint

Your prosthodontist might recommend a stabilization splint or bite guard. This plastic device fits over the upper or lower teeth. Stabilization splints are the most common treatments for TMJ disorders and should be used as prescribed by your prosthodontist. A splint should not cause permanent changes in your bite when it is removed from your mouth. While using a stabilization splint the patient should be evaluated regularly, and the splint may require adjustments by the prosthodontist.

Prior to extensive dental restorations, an occlusal splint may be used as a diagnostic device to re-establish the bite in patients with worn and missing teeth.

