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Millions of Americans Suffer from TMJ

If asked, “What is the most frequently used joint in the body,” how many of us would immediately think of the joint connecting the lower jaw with the skull? This is the temporomandibular joint, and we move it to talk, we move it to chew, and about every 3 minutes, we use it to swallow. Considering how often this joint is used, it is not surprising that the National Institute of Dental and Craniofacial Research estimates that over 10 million Americans develop disorders of this joint and its muscles. This group of disorders is commonly referred to TMJ.

According to the TMJ Association, TMJ is a “collection of conditions characterized by jaw and facial pain and limitations in jaw movements. TMJ occurs in both genders, but women are more commonly affected. Of these, 90% are women of childbearing age. The most common symptom associated with TMJ is pain, particularly in the jaw joint or the muscles associated with chewing. Additional symptoms include pain that radiates down the face, jaw, or neck, stiffness in the jaw, limited movement or “locking” of the jaw, painful clicking or popping of the jaw when opening or closing the mouth, a change in the fit between the upper and lower teeth, aching pain in and around the ear, headache, and difficulty or discomfort while chewing.

TMJ may be the result of trauma or bone deterioration resulting from osteoarthritis, but usually symptoms appear for no obvious reason. While stress and tooth grinding seem to be associated with TMJ, many people grind their teeth for years without ever developing these disorders. The TMJ Association points out that these conditions may be related to genetics, environmental triggers, and behavior, in addition to gender and stress. Further, TMJ may be just one manifestation of “broader multi-systems illnesses that go unrecognized.” TMJ is usually diagnosed and treated primarily by dentists and oral surgeons, yet people with this diagnosis are often being treated by other doctors for sleep disorders, arthritis, allergies, irregular heartbeat, headaches, fatigue, fibromyalgia, tinnitus, and irritable bowel syndrome. Further research to determine if any of these conditions are related to TMJ, and or have an unknown underlying cause in common, is needed.

Fortunately, TMJ often goes away by itself for most people. But for others, the pain can be long-term and debilitating. Treatments can range from behavioral to surgical. Conservative approaches to relieve the pain and correct related dental problems include stretching exercises,

massage, applying heat or cold to the face, and avoiding overuse of jaw muscles by changing some habits like frequent gum-chewing. The doctor or dentist may recommend avoiding sticky or chewy food, breaking the habit of chewing objects (such as pencils), taking measures to eliminate tooth grinding, and learning how to relax and control stress. Devices like a night guard or biteplate can help, and anti-inflammatory medications can be administered to reduce inflammation and lessen pain.

If the more conservative approach fails to relieve TMJ pain, corrective dental procedures such as

replacing crowns or fillings and replacing missing teeth may help. Corticosteroid drugs that can be injected directly into the joint space is another option, and for some, arthrocentesis, in which a needle is used to irrigate the joint with fluid to remove the by-products of inflammation, may be required. As a last resort, a referral to an oral and maxillofacial surgeon may be necessary to surgically repair or remove the disc between the jawbone and the skull, or even to replace the joint entirely with an implant.

November has been designated TMJ month to raise awareness about this group of disorders and to highlight the need for further research into its causes and treatments. To learn more about TMJ, visit the National Institute of Dental and Craniofacial Research's web site at www.nidcr.nih.gov, or the TMJ Association's web site at www.tmj.org (262-432-0350). For further information about this or other public health concerns, contact the Central Connecticut Health District at www.ccthd.org (860-721-2822.)