TMJD HEALTH

optimalphysicaltherapy.com 920-648-2400

"Our mission is to empower and educate people about the changes their bodies go through and teach them how to reconnect on a neuromuscular level and heal themselves in a way that allows them to optimize their function and restore their core foundation so they can return to their desired fitness levels safely and with better long term results."

TMJ refers to the joint itself, while TMD refers to the various conditions and issues that can affect the functionality of the TMJ. An estimated 75% of the U.S. population has experienced one or more signs or symptoms of Temporal Mandibular Disorder (TMD) and Craniofacial Pain (CFP). Most TMD symptoms are temporary and fluctuate over time, requiring little or no professional intervention; but, an estimated 5-10% of the U.S. population will require professional treatment. TMD usually involves more than a single symptom and rarely has a single cause. The pain may arise suddenly or progress over months to years with intermittent frequency and intensity.

CAUSES

THE IDENTIFICATION OF A COMMON CAUSE OF TMD IS STILL BEING RESEARCHED. THERE IS NOT A SINGLE CAUSE, FACTOR, OR THEORETICAL MODEL THAT CAN EXPLAIN THE ONSET OF TMD. FROM OROFACIAL PAIN: *GUIDELINES FOR ASSESSMENT, DIAGNOSIS, AND MANAGEMENT, 5TH EDITION*. THE CAUSES OUTLINED BELOW ARE ASSOCIATED WITH TMD.

- IMPACT INJURY-CAUSING JAW FRACTURE OR WHIPLASH
- WIDE OR PROLONGED OPENING, SUCH AS WITH YAWNING OR DENTAL PROCEDURE
- THIRD MOLAR EXTRACTION
- INTUBATION – THE MEDICAL TERM FOR INSERTION OF A TUBE INTO THE MOUTH
- ANY NECK INJURY CAN REFER TO PAIN TO THE TMJS, FACE, AND HEAD
- ANY SUSTAINED OR REPETITIOUS ADVERSE LOADING OF THE MASTICATORY SYSTEM
- POOR POSTURE
- MOUTH BREATHING

PARAFUNCTIONAL HABITS:

- CLENCHING/TEETH GRINDING
- LIP & NAIL BITING
- SUCKING ON THE INSIDE OF ONE'S CHEEKS

BODY DISORDERS

- DEGENERATIVE
- ENDOCRINE
- INFECTIOUS
- METABOLIC
- NEOPLASTIC
- NEUROLOGIC
- RHEUMATOLOGIC
- VASCULAR DISORDERS
- HYPERMOBILITY

PERIPHERAL FACTORS

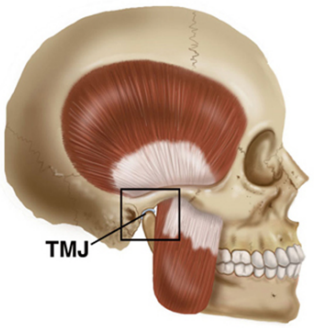
- CHEWING EFFICIENCY OR LACK OF
- MASTICATORY (JAW) MUSCLE TENDERNESS
- DISEASE RESPONSE
- OSTEOARTHRITIS
- A "STICKY" DISC OR "ADHERED" DISC
- PROLONGED IMMOBILIZATION OF THE JAW
- FEMALE HORMONES

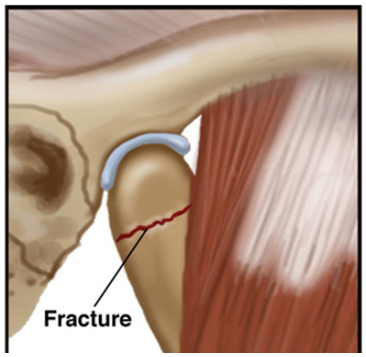
HOW DOES IT FEEL?

Following a TMJ fracture, you may experience:

- Jaw pain.
- Swelling and possible bruising in the area.
- Jaw fatigue.
- Difficulty opening your mouth to eat or talk.
- Ringing in your ears.
- Dizziness.
- Headache.
- Loose or broken teeth.
- Popping sounds in your jaw.
- Neck pain.
- A change in the way the teeth fit together.
- A locking jaw.
- A bump you can feel with your fingers on the jaw bone or joint.

Jaw Fracture (Temporomandibular Joint Fracture)





Brand new, beautiful facility that has a full gym and small pool. We brought our 13-year-old daughter in due to jaw pain related to her TMJ joint. I was not aware prior to our visit there even was PT for jaw pain. She has seen Nate for PT and is doing better, having less pain. The exercises assigned are not too complex, she understands them and is able to do them on her own, yet have been very effective. Great communication and professionalism at Optimal Physical Therapy, I would recommend. Joe and Melissa Cooper

HOW IS IT DIAGNOSED?

In cases of facial trauma and pain, diagnosis is made by an emergency medicine physician at a hospital or other emergency clinic. X-rays or a CT scan will be ordered to determine the existence and severity of a fracture. If the jaw is dislocated, the physician will return it to its normal position.

- A less severe fracture is diagnosed when the bone is still in place but has a small fracture line where the bone has broken.
- A more severe fracture can involve a larger fracture line, partially displaced sections of bone, or a dislocation.
- An extreme fracture involves displaced segments of bone or fragmented bone, with a significant alteration of bone structure.

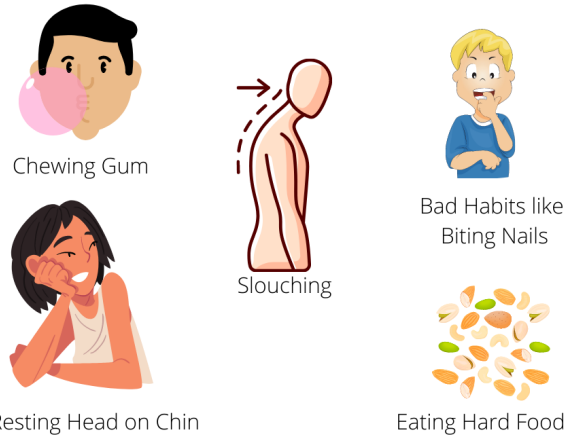
There are several treatments to help a TMJ fracture safely heal.

- If the fracture is less severe, your physician will recommend resting the jaw by:
  - Eating soft foods, or going on a liquid diet.
  - Limiting jaw use such as speaking or brushing your teeth.
- If the fracture is severe, your physician may consider a form of splint therapy to hold the jaw steady and rest it in a proper position for healing.
- If the fracture is extreme, surgery may be required, or the jaw may be set and wired closed to prevent any movement and ensure complete healing.

All of these treatments allow the jaw to heal, but often result in TMJ stiffness. The muscles used to move the jaw also may become tight and weak. You may not be able to eat, drink, or open your mouth as you normally would. Your physical therapist will work with you to help restore your jaw's normal movement, function, and muscular strength.

If a fracture is not sustained, presence of symptoms will guide a TMD diagnosis.

Things to STOP Doing if You Have TMJ



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HOW CAN A PHYSICAL THERAPIST HELP?

Your physical therapist can help restore the natural movement of your jaw and decrease your pain. During your first visit, your physical therapist may:

- Review your medical history, and discuss any previous surgery, fractures, or other injuries to your head, neck, or jaw.
- Evaluate the quality and quantity of movement of your jaw and neck.
- Assess your posture and observe how your neck moves.
- Examine the TMJ to find out how well it can open, and whether there are any abnormalities in jaw motion following the fracture.

Following the examination, your physical therapist will select the appropriate treatments to improve your jaw movement and relieve your pain.

Improving Your Jaw Movement

Stretching and Motion Exercises. Your physical therapist may prescribe stretches and range-of-motion exercises for the jaw. The instruction will include guidelines for frequency and intensity of movement to ensure the safe performance of all your exercises.

Manual Therapy. Your physical therapist may also apply skilled hands-on techniques (manual therapy) to gently increase your jaw movement and relieve your pain. Myofascial release and soft tissue massage target the muscle and fascial systems promote flexibility and mobility of the body's connective tissues, help reduce any inflammation, sensitivity, and TMJ pain.

"Low-Load" Exercises. Your physical therapist may teach you special "low-load" strengthening exercises that don't exert a lot of pressure on your TMJ but can help strengthen the muscles of the jaw and restore a more natural, pain-free motion. You will also learn exercises that help you increase the opening of your jaw and improve the way it works.

Intramuscular dry needling is a procedure in which a thin needle is inserted into the skin and muscle tissue. The needle is directed at myofascial trigger points that cause and refer pain throughout the body. The primary goal of utilizing dry needling is to break the pain cycle, restore the muscle tissue to its normal resting length, which will promote increase range of motion and increase the strength of the muscle.

Relieving Your Pain

If your pain is severe, your physical therapist may apply physical modalities, such as electrical stimulation or deep heat, to reduce pain and improve motion.

You are not alone, Connect with others at tmj.org

Direct Access legislation

NO REFERRAL NEEDED

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