Raising awareness of temporomandibular disorders
Dr Andrew McCance explains how orthodontics can help spot the telltale signs before treatment begins

With new systems on the market that enable and empower GDPs to offer orthodontic treatments to patients, it is important that everybody is able to spot the telltale signs of temporomandibular disorder (TMD). The vast majority of tooth movements carried out will affect occlusal function, so it is vital that the state of the patient’s temporomandibular joint (TMJ) is accurately appraised before treatment begins.

Orthodontics can help
The benefit of orthodontics over alternative ‘smile solutions’ is that a specialist in this field can take the entire skull into account during diagnosis and treatment planning. It may be expedient to focus just on the teeth, but this can cause the clinician to miss important data pertaining to the TMJ. Any loss of vertical resulting from treatment can lead to considerable suffering for patients who are on the brink of operating ‘off the disc’. Simply by making themselves familiar with TMD, GDPs can safeguard the wellbeing of their patients and avoid carrying out treatments that are detrimental to the TMJ.

Common symptoms
There are a number of common symptoms associated with TMD. When a patient hears a click when opening their mouth, followed by another click when the mouth is close, this is a signifier that the posteriorly misplaced condyle head is retrieving the disc, housing it within the bioconcavity, before the condyle falls back and off the disc. Other symptoms include occurrences of locking, which require intervention and cause a great deal of misery for the patient. Remodelling can also take place, as surrounding muscles become hyper-activated to prevent the disc making a hole in the pterygo-tympanic plate. Any swelling in the area can cause dizziness, or even nausea, as the middle ear is affected, and tinnitus has been known to be present in many chronic cases. The internal derangements caused by TMD could also be associated with trigeminal neuralgia.

Impact on the chin can cause trauma of the retro-discal ligament, as the jaw is pushed back and forced off the disc.

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Predictable Magic seminars are presented by Helen Harrison, BDS MFDSR. Thanks to Helen’s pragmatic approach to occlusion & splint therapy, over 400 GDPs are now confidently using splints to benefit their patients.

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