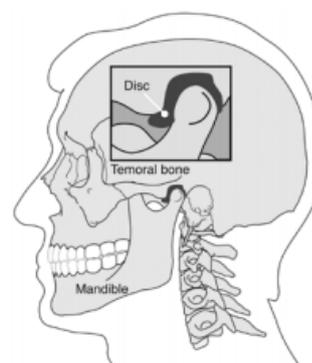


Temporomandibular joint (TMJ) disorders

This leaflet has been designed to improve your understanding of your problem and contains answers to many of the commonly asked questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask.

The temporomandibular joint (TMJ)

The temporomandibular joint (TMJ) joins the lower jaw to the skull and controls its movements. It is found just in front of the ear. The joint itself is made up of two bones that are separated by a disc of cartilage. Ligaments and muscles surround the joint.



What are TMJ disorders?

TMD (Temporomandibular Joint Disorders) is a common group of conditions which affect the TMJ. Many of these conditions are self-limiting (they eventually get better) if care is taken of the joint. It can occur when:

- Grinding and clenching teeth
- Stressed or anxious
- There is a history of trauma to that area

What are the signs of TMD?

Signs of TMD include:

- Clicking or grinding noises from one or both jaw joints when opening or closing the mouth – this is due to altered movement of the disc not due to damage to the jaw bone.
- Locking of the jaw on opening.
- Reduced mouth opening.
- Pain, discomfort or tenderness of jaw joint(s) and surrounding muscles.
- Headache, neck ache or dizziness.
- Earache, buzzing or fullness in the ear.
- Sleep disturbance.

Practical tips

TMD is usually a temporary discomfort, although this can persist for some months, and may recur after settling.

When the condition flares up try to:

- Eat a soft diet, trying to chew on both sides.
- Cut your food into small pieces before eating.
- Avoid biting into things such as apples and baguettes.
- Avoid opening your mouth too wide (stifle yawns).
- Avoid habits such as chewing gum and fingernails which put a lot of strain on the joint.

The simplest way of working out exactly what you can or cannot do is to avoid anything that makes the pain or discomfort worse; any pain will show you when you are overworking the joint and muscles.

Managing your TMD

- Apply a warm compress to the area. You can heat a wet towel in the microwave for one minute and apply to the area for 10-20 minutes, 3 to 4 times a day.
- Take pain relief such as anti-inflammatories (e.g. ibuprofen) or paracetamol. Take regularly ensuring that you follow the instructions on the packet. You may use ibuprofen gels and apply directly to the area.
- If you grind or clench your teeth it may be advisable to get a soft bite guard. This can be provided by your own dentist, although the hospital can also provide one if necessary.
- You may also be given jaw exercises to follow by the doctor.
- As well as avoiding triggers that make the condition worse, you should also try to avoid getting tired or stressed, as these contribute significantly to pain in the TMJ.

Once the flare up has improved, you can return to normal jaw activity. Slowly reintroduce a full range of food into your diet and avoid anything that triggers the condition.

If the pain persists or increases and the suggested tips do not help you may be referred to a consultant who specialises in TMD. Your consultant may consider medication, referral to the Pain Management Team and further investigation of the joint.

Contact us

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Further information

More information is available on the Trust website www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.

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