

# Patient Instructions – TMJ



## **TMJ (Temporo-Mandibular Joint) Syndrome**

### **What is the TMJ?**

You may not have heard of it, but you use it hundreds of times every day. It is the TemporoMandibular Joint (TMJ), the joint where the mandible (the lower jaw) joins the temporal bone of the skull, immediately in front of the ear on each side of the head. Each time you chew you move it. But you also move it every time you talk and every time you swallow (every 3 minutes or so). It is, therefore, one of the most frequently used of all the joints of the body.

You can locate that joint by putting your finger on the triangular structure in front of your ear. Then move your finger just slightly forward and press firmly while you open your jaw all the way and shut it. The motion you feel is the TMJ. You can also feel the joint motion in your ear canal. These maneuvers can cause considerable discomfort to a patient who is having TMJ trouble.

### **TMJ Syndrome Symptoms**

The jaw joint (TMJ) is in front of and is attached to the ear canal. When the joint becomes inflamed, injured, or stressed it may cause pressure in the ear or face. The discomfort is sometimes an ache mixed with sudden sharp pains. Often, it may manifest with only a single symptom like ear pressure or ringing.

- Ear pain, fullness, or pressure
- Ringing in the ear
- Temple or cheek pain
- Jaw popping, clicking, or grinding
- Locking or dislocation of the jaw
- Difficulty in opening or closing the mouth fully
- Frequent head or neck aches

A very common focus of pain is in the ear. Many patients go to an ENT doctor convinced their pain is from an ear infection. When an earache is not associated with a hearing loss and the ear drum looks normal, the doctor will consider the possibility that the pain comes from TMJ dysfunction.

### **How can things go wrong with the TMJ?**

If you habitually clench, grit, or grind your teeth, you increase the wear on the cartilage lining of the joint. Many persons are unaware that they grind their teeth unless someone tells them.

If you chew gum much of the day, you increase the wear and tear on the joint, and you don't give it the chance to recover. If you chew habitually on one side of your mouth (often due to dental work), you concentrate all the pressure on one side rather than equally.

Teeth that do not fit together properly (improper bite) can be at fault. Imagine how much extra pressure the TMJ must handle if your teeth close first on one side before the other.

When the focus of wear in the cartilage lining of the joint space wears down to the nerve endings, pain occurs. A form of arthritis (traumatic type) occurs that is called TMJ dysfunction (Dysfunction means faulty or painful function).

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## Treatment Options for TMJ

Success in treating your temporomandibular joint (TMJ) or associated muscular symptoms depend largely upon the way you treat the involved areas. Following the instructions below will help you to manage your symptoms and aid the healing process.

### Do's

- **Do** breathe through your nose if able, not through your mouth.
- **Do** rest your tongue against the roof of your mouth for greatest relaxation of your jaw muscles.
- **Do** maintain good posture at all times (keep your head in the midline over your shoulders).
- **Do** try using a child's toothbrush, if it is painful to open your mouth to brush your teeth.
- **Do** sleep on your back with a thin pillow under your head and a small towel roll under your neck.
- **Do** limit opening your mouth to wide when yawning, laughing, coughing, sneezing or singing.
- **Do** cut your food into small, bite-size pieces to prevent opening your mouth too wide.
- **Do** utilize stress management techniques to prevent tensing of your jaw, face and neck muscles.

### Don'ts

- **Do not** eat any foods that require prolonged chewing.
- **Do not** eat hard "crunchy" foods or chew on ice cubes.
- **Do not** chew gum, even occasionally!
- **Do not** bite into any foods with your front teeth.
- **Do not** move your jaw in such a way that it causes clicking, popping or grinding sounds.
- **Do not** bite your fingernails, chew on pencils or pens, bite your cheeks or lips, etc.
- **Do not** protrude your lower jaw forward when applying lipstick, eating or talking.
- **Do not** rest your jaw on your hand.
- **Do not** clench or grind your teeth. Keep your lips together but your teeth apart!

### Medications

- Anti-Inflammatory Medications - Naproxen (Alleve®) twice daily, or Ibuprofen (Advil®, Motrin®) every 6 hours. Prescription strength Meloxicam (Mobic) may also be prescribed. Do not take more than one at a time.
- Muscle Relaxant Medications – Robaxin (Methocarbamol) may be prescribed to take at night before bed to help relax the muscles around the TMJ.

### Physical Therapy

- Physical therapists are movement experts and may help people with TMJ ease pain, regain normal jaw movement, and lessen daily stress on the jaw. A referral may be placed if requested.

### Dentist or Oral Surgeon

- If the pain persists despite these measures see your dentist or consult an oral surgeon. Checking for dental problems and readjusting your bite can help. They can fit you with a splint or inject the joint with medications to relax the jaw and decrease the inflammation.