

TMD SELF-MANAGEMENT THERAPIES

Your dentist has determined you have a Temporomandibular Disorder (TMD) - often due to an overuse of the jaw joint/muscle system. This is involved in many activities (talking, eating, yawning, laughing) and in between, we need to allow our jaw muscles and joints to relax. Sometimes people develop habits that do not permit their muscles or joints to relax for a sufficient amount of time. The following will help instruct you on how to reduce the TMD pain you are having:

1. Apply heat, ice, or a combination of heat and ice to the painful areas. Most patients prefer heat, but if that increases your pain, use the combination or just the ice.
 - A. Use heat for 20 minutes, 2 - 4 times each day. Some patients prefer moist heat, others find dry heat just as effective and less of a hassle. Moist heat can be obtained by wetting a thin washcloth with very warm water. The wash-cloth can be kept warm by wrapping it around a hot water bottle or a heating pad.
 - B. Use the combination of heat and ice, 2 - 4 times a day. Apply heat to the painful area for approximately 5 minutes (less if it aggravates your pain). Then apply an ice cube wrapped in a thin washcloth.
 - C. Apply ice wrapped in a thin washcloth until you first feel some numbness and then remove it (this usually takes about 10 minutes).
2. Eat soft foods like casseroles, canned fruits, soups, eggs and yoghurt. Do not chew gum or eat hard foods (e.g. raw carrots) or chewy foods (e.g. caramels, steak and bagels). Cut foods into small pieces, evenly divide the food on both sides of your mouth, and chew slowly on both sides.
3. Avoid caffeine or caffeine-like drugs; these stimulate your muscles to contract and hold tension. They are found in coffee, tea and most sodas. Decaffeinated coffee contains some caffeine.
4. Your teeth should never touch except lightly when you swallow. Closely monitor yourself for a clenching or grinding habit. People often clench their teeth when they are irritated, drive a car, use a computer, or concentrate. Learn to keep your jaw muscles relaxed, teeth separated, and tongue resting lightly on the roof of your mouth just behind your upper front teeth.
5. Observe for, and avoid additional habits that put unnecessary strain on your jaw muscles and joints. Some of these are: resting your teeth together; resting your jaw on your hand; biting your cheeks, lips, fingernails, cuticles, or any other objects that you may put in your mouth; pushing your tongue against your teeth; and holding your jaw in an uncomfortable or tense position.
6. Posture appears to play a role in TMD symptoms. Try to maintain good head, neck and shoulder posture. You may find that a small pillow or rolled towel supporting your lower back may be helpful. Ensure you maintain good posture when using a computer and avoid poor postural habits such as cradling the telephone against your shoulder.
7. Your sleep posture is also important. Avoid positions that strain your neck and jaw, such as stomach sleeping. If you sleep on your side, keep your neck and jaw aligned.
8. Set aside time once or twice a day to relax and drain the tension from your jaw and neck. Patients often benefit from simple relaxation techniques such as sitting in a quiet room while listening to soothing music, taking a warm shower or bath, and slow deep breathing.
9. Restrain from opening your mouth wide, such as yawning, yelling or prolonged dental procedures.

10. Use anti-inflammatory and pain-reducing medications such as Ibuprofen, Tylenol, Aspirin to reduce joint and muscle pain. Avoid any with caffeine.

There is no cure for TMD, and you may need to follow these instructions for the rest of your life. We may suggest other therapies in addition to these instructions, or referral to a specialist. No single therapy has been shown to be fully effective for TMD, and a percentage of patients report no symptom improvement. Based on your symptoms and identified contributing factors, an individualized treatment approach will be recommended that may be revised as your response is observed.

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