

As we enter our fourth year of participant recruitment for the Acute TMJMD Program, our recruitment to date reflects a total of 535 individuals who have been screened for participation in our protocol. Our actual recruitment of participants thus far is 443, reflecting that we are well on our way to a meeting our final 5- year goal of 675 participants recruited, and randomly assigned across three separate comparison groups. Already, 85 participants have completed their 2-year commitment as members of our treatment program. Now that we are more than halfway through our 5- year goal of participant recruitment, treatment, and follow-up, we are beginning to publish some of our preliminary findings (of course, final results cannot be published until the end of recruitment). However, it is quite encouraging that our preliminary findings demonstrate that our non-invasive biobehavioral training skills program is helping to both identify the risk, and prevent the development of, chronic TMJ pain disorders.

Our first publication has just been accepted for publication in the *Journal of Orofacial Pain*, and it explores the different sub-types of TMJ Disorders and their associated factors. Highlighted in this article are the findings that multiple diagnoses (including more than sub-type of TMJ disorder) are not uncommon in this population. Furthermore, pain severity is higher for those with multiple diagnoses, and physical functioning (as measured by a chewing performance task) is more dysfunctional for these individuals. In a second publication, just accepted by the *Journal of Applied Biobehavioral Research*, a statistical method known as Minimal Clinically Important Difference (MCID) was used to demonstrate a technique for documenting clinically significant changes in a group of patients with TMJ disorders.

Report prepared by:

Robert Gatchel, Ph.D. & Rob Haggard, M.S.

Finally, the *American Pain Society* has accepted our poster presentation for their Annual Convention being held in Hawaii this year. Our presentation includes an analysis of data demonstrating some important differences in pain symptom reporting between Caucasian and African-American participants in our program. While the sample size was relatively small for the time period analyzed, the statistical analyses demonstrated more non-specific symptoms reported among African-American participants. We are looking forward to expanding upon all of these preliminary findings and moving forward with goals during the coming year.

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