

About...

Dental Hygiene Considerations
for Patients with
Temporomandibular Joint
Diseases and Disorders

The logo features the letters 'TmJ' in a large, red, serif font. A horizontal bar, colored in a dark purple, is positioned across the middle of the letters. The bar is wider than the letters and extends to the right, where it contains the text 'THE TMJ ASSOCIATION' in a smaller, white, sans-serif font. The background of the entire page features a large, faint, light purple watermark of the 'TmJ' logo.

THE TMJ ASSOCIATION

...Changing the face of TMJ

The Resource Center for
Education • Support • Research
on Temporomandibular (Jaw)
Joint Diseases and Disorders

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Dental Hygiene Considerations for Patients with Temporomandibular Joint Diseases and Disorders

Temporomandibular (TMJ) diseases and disorders refer to a complex and poorly understood set of conditions manifested by pain in the area of the jaw and associated muscles and limitations in the ability to make the normal movements of speech, facial expression, eating, chewing, and swallowing. These limitations can also make oral hygiene difficult for the patient and a challenge for the hygienist in providing care. Complications from TMJ problems may be so debilitating that patients no longer schedule regular hygiene appointments. Ongoing encouragement and an understanding of the special needs are necessary to ensure treatment compliance. As a hygienist you play an important role in the overall health of a TMJ patient.

Because the exact causes and symptoms of most TMJ problems are not clear, diagnosing these diseases and disorders can be difficult. At present, there is no widely accepted, standard test to correctly identify TMJ patients. In about 90 percent of cases, however, the patient's description of the symptoms, combined with a simple physical examination of the face and jaw, provide information useful for diagnosing these disorders.

The National Institute of Dental and Craniofacial Research of the National Institutes of Health indicates that 10.8 million people in the United States suffer from TMJ

problems at any given time. Both men and women experience TMJ problems; however, 90 percent of those seeking treatment are women in their childbearing years.

Before Dental Hygiene Treatment

An important facet of treatment for TMJ patients occurs before treatment begins, during an initial interview. TMJ patients are usually apprehensive about treatment and may need to discuss their reservations and concerns before a visit. During an initial interview you will be able to establish rapport and open communication with the patient. This will allow you to share with the patients the types of procedures or treatment plan to be expected. By knowing what is going to occur, the patient will feel better prepared, confident, and relaxed during the appointment.

Patient History

Questions to determine whether the patient has a joint prosthesis should be included in the history. Prophylactic antibiotic premedication to prevent bacteria may be necessary. Any past treatments for TMJ diseases and disorders or surgical procedures, including implants, should be noted. A patient who is anticipating surgery for a joint replacement should be counseled to complete all needed periodontal and restorative therapy before the surgery to prevent the need for repeated antibiotic premedication.

Antibiotic premedication may also be necessary for TMJ patients who have been diagnosed with Mitral Valve Prolapse or have other cardiac-related conditions.

Adaptations during treatment:

- Use of a mouth prop can be used to assist the patient in keeping the mouth open. Other patients may prefer to use their own hand or fist to support their jaw.
- Use of cervical and lumbar supports, pillows, or rolled towels for neck or back discomfort.
- Use of ultrasonic or piezoelectric scalers.
- Application of topical anesthetics and, if needed, local anesthesia.
- Emphasis on the importance of stress-reducing techniques.
- Use of a semi-upright chair position may be necessary for comfort if your patient has breathing or swallowing difficulties.
- Consideration of whether sealants or fluoride treatment may be an option in reducing caries.
- Adaptations of instrumentation to accommodate a minimal opening of the mouth.
- Fatigue in the joint may be reduced by rest periods, by minimizing pressure on the mandible, and by overall efficiency to shorten the appointment time.
- More frequent appointments can contribute to keeping the patients oral health at a maximum and thus prevent long, difficult scaling sessions.

Advice for your patients:

- Encourage the use of heat/ice applications after dental hygiene or restorative treatments.
- If appropriate, recommend use of pre-and/or post-procedure medications to relieve pain and muscle spasms (from aspirin or non-aspirin pain relievers to prescription pain relievers or muscle relaxants).
- Use of a soft toothbrush ranging from adult to children's sizes.
- Use of power-assisted toothbrushes. These are an excellent way to maintain hygiene if the jarring motion does not cause jaw discomfort. Studies show that power-driven toothbrushes are more effective at plaque removal than manual toothbrushes and they encourage better compliance with brushing.
- Recommend alternatives including rubber tip stimulators, interdental brushes, or floss holders, if it is not possible for the patient to open their mouth wide enough to achieve flossing.
- A commercial oral irrigator may be recommended.
- Use of an over-the-counter antiseptic mouth rinse or a prescribed chemotherapeutic agent.
- Use of fluoride mouth rinses for dental caries control.
- Salt or baking soda and water solutions can be recommended to patients to use at home following dental and dental hygiene procedures. They can be easily prepared by the patient at home, are inexpensive,

and may be effective in reducing edema. A patient on a low-salt or sodium-free diet should not use a saline rinse.

- If mouth opening is very limited, foam instruments called “toothettes,” or moist cotton gauze squares, can be rubbed along the teeth and gums to achieve some plaque removal.
- Appliances should be brushed daily with a soft brush and toothpaste.

Because adequate oral hygiene may be compromised in TMJ patients due to limited range of motion and/or pain, regular dental exams, and cleanings should be scheduled.

Hygienists need to educate themselves and their patients regarding all of the options available to TMJ patients. By understanding the patient’s needs, clinical techniques and patient counseling may be directed more skillfully to provide better dental hygiene care.

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