

## **GUIDANCE FOR THE MANAGEMENT OF TMJ PAIN DYSFUNCTION SYNDROME (TMJPDS) IN PRIMARY DENTAL CARE**

The majority of patients presenting with TMJ conditions will be suffering from TMJPDS (temporomandibular joint pain dysfunction syndrome) or myofascial pain. These patients can, in most cases, be effectively managed in primary care without referral. 75% of patients will improve over 3-6 months with simple conservative management.

**The initial conservative management of TMJPDS in primary care should include the following measures:**

1. Explanation of the condition and provision of relevant patient leaflet [www.baos.org.uk/patient-leaflets/](http://www.baos.org.uk/patient-leaflets/).
2. Reassurance that TMJPDS is not serious and that it usually responds to simple measures. Symptoms may recur from time to time.
3. Application of heat, massage, relaxation techniques and jaw exercises.
4. Advice concerning the use of simple analgesia. Topical analgesia can be applied directly to the joint and muscles of mastication.
5. The identification and avoidance of parafunctional habits, such as clenching or grinding, nail biting, lip/cheek biting and posturing the jaw.
6. Jaw rest, soft diet and reduced mouth opening, particularly during acute phases.
7. Provision of an occlusal splint, which can be worn at night.

*NB: Irreversible procedures, such as occlusal adjustment, should only be undertaken if there is a clear indication.*

**Patients with symptoms relating to the temporomandibular joint who should be referred for management in secondary care:**

1. Those with an atypical presentation (e.g. numbness of the face, marked/persistent facial swelling, limited mouth opening).
2. Patients who fail to respond to conservative measures, including the provision of an occlusal splint.

Referrals should be made to an Oral & Maxillofacial Surgeon or Consultant in Restorative Dentistry. Please indicate the measures you have already undertaken to manage the patient's TMJPDS. All referrals must clearly state that the patient has followed the above conservative advice for a minimum of 6 months without improvement. Non-compliant referrals will be returned to the referring practitioner.

*NB: Patients should not be referred for the provision of an occlusal splint – these can be provided in primary dental care*