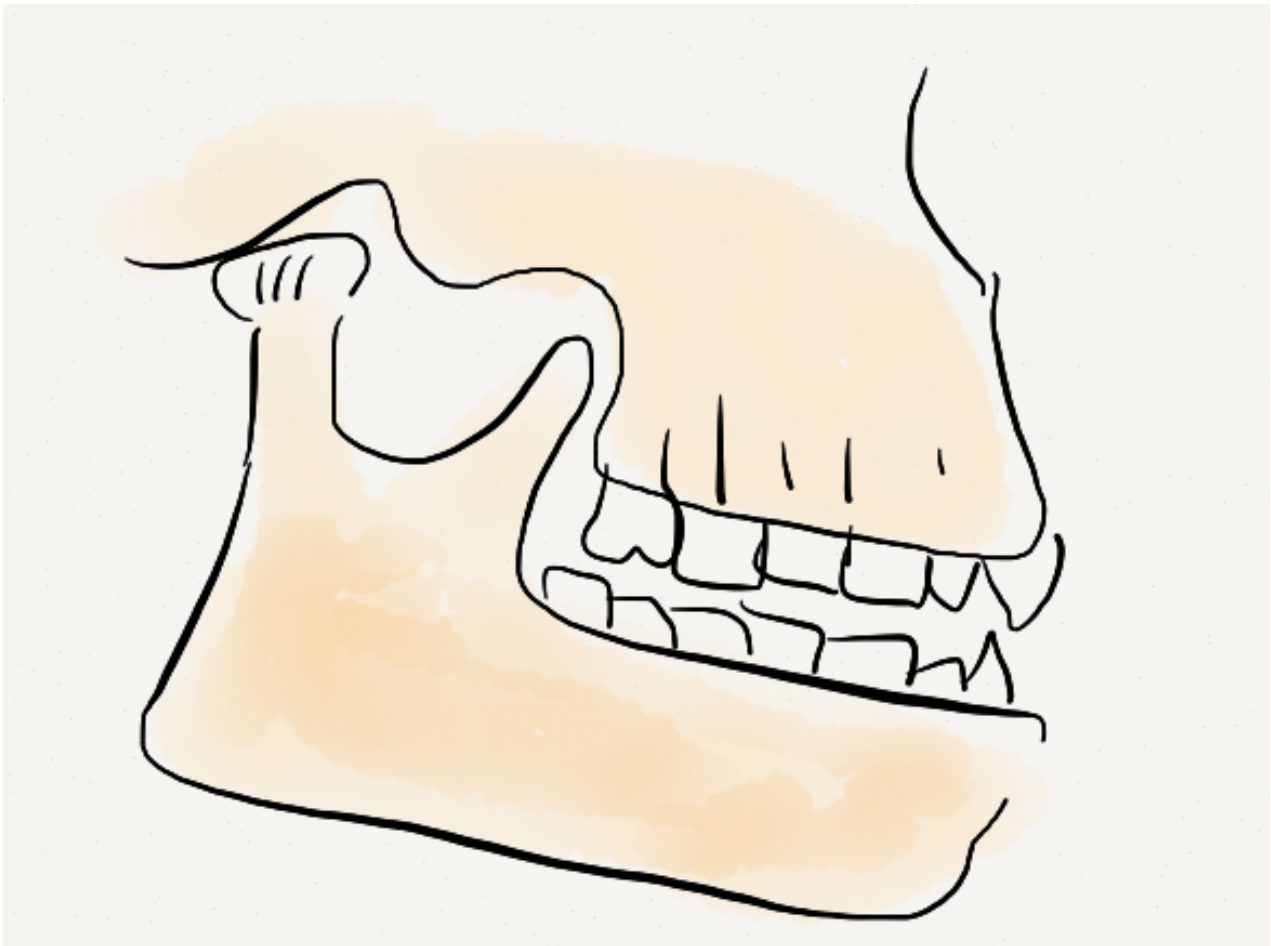
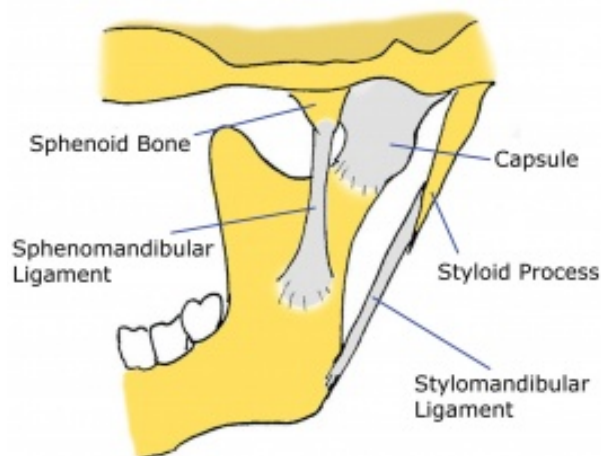

PHYSIO_{LOGICAL}



New Hope For Non-Surgical TMJ Care, by Greg Bell PT.

As a wise person once put it, “it is better to keep your mouth closed and let people think you are a fool than to open it and remove all doubt”. This is great advice for those with a mouth that engages prior to the microseconds of pondering and running that potential sentence by the better self, but what if the mechanics of your “laughing gear” malfunction? What if your witty barb cannot escape because of the limitation of your jaw?



The Temporomandibular Ligaments and Joint capsule (medial view)

This is indeed the case for a large population of you out there. Temporomandibular dysfunction (TMD) or jaw joint malfunction occurs in anywhere up to 30% of the population. Women feature as the predominant sufferer, yet there is no convincing slam dunk factoid that explains why. Some might point to the potential for overuse: according to a University of Maryland study, women speak 20,000 words per day as opposed to the 7,000 men chose to dispense. This might be a causal factor for jaw injury, if it were true. University of Texas’ chair of Psychology in Austin found with an electronic implant in subjects ears that the opposite sexes use roughly the same amount of words daily.

(16,215 vs 15,669). I will let you guess who came out on top. The study measured 496 subjects so the numbers are significant. A more valid form of overuse might be nail biting, pencil chewing, gum chewing or corn cob eating world champs.

"The actual problem is treated, not the symptoms"

Trauma is definitely a precursor to the collection of jaw symptoms that you may relate to. Clicking, ear pain, locking, loss of ability to fit whole Big Mac in mouth and grinding could be traced back to a traumatic event. As I listen to the history of a persons problem, the past often reveals a fall off a swing, a car accident, rugby maul elbow to the chops or rugby league dust up fisticuff. They can be fairly distant in the past. It might be twenty years ago. You might say yes to all of those and on top of that, you had your wisdom teeth removed under anaesthetic. There is some decent strain put on the jaw

under anaesthetised extraction, and the muscles that cradle and protect the jaws little cushion disc are inactivated. There is no reason to refuse all extractions as they are necessary, but perhaps there could be a provision for post op advice and training just like any other joint procedure.

Jaw injury can encompass a broad spectrum in sports from bruising and strain to fracture and dislocation. The latter necessitates urgent care. Surgery and splints given restore the anatomy and soothe but do not address the developing problem of tightness in the joint's ligaments. Physiotherapy is seldom sought because the jaw has been considered the domain of the dental fraternity. Also up until now there has not been a specialist discipline within physiotherapy in TMD which is why I sought the training under one of Australia's best TMJ physiotherapists, Mark Latimer.

Since 2012 I have treated a large number of people and but for a few, all have found a way back to normal function. My most satisfying results have come from two or three cases. The first was a boy who was my first TMJ patient. He sustained a severe facial trauma under the age of ten and gradually developed a significant loss of opening. He wanted to eat subway and Big Macs again, and after three to four months of weekly, and later fortnightly treatment, restored the ability to eat. His pain on waking from grinding went and he was essentially pain free. Another young woman had several incidents of falls over the years and at first consult was only able to move the jaw 2mm to one side. Normal is 12mm. She couldn't smile symmetrically, but after a few months of three week spaced treatments, she was essentially back to her best. I have noticed that the neck often plays up in concert with the jaw, and the final case I mention, this woman had cervicogenic headache (headache from the neck) as well as significant movement loss and clicking. Once the jaw returned to normal, the headaches improved with a little neck attention. I met her last weekend in the fruit section of the supermarket, and her big smile was what makes my job so fulfilling.

What has convicted me the most about the approach that Mark has taught me, is the finality of the results. The actual problem is treated, not the symptoms. It is nearly always because of the ligaments tightening, and so the physiotherapist's expertise in manipulating joints and their connective tissues is the thing that corrects what's

mechanically wrong. Would you take your car to the mechanic and accept a temporary fix only? What if the orthopaedic doctor said you have a bad ankle sprain, wear this moonboot forever? So it is true with some of the “fixes” out there. There is a new daytime TV show called The Doctors. It is a bunch of American MDs in scrubs and white coats, selling out their credibility to studio audiences and advertisers. This time they have a lady with TMD who has tried everything, but wait, they have a special guest Cosmetic Surgeon who is offering Botox as a cure. Watch further and the lady has had Botox in her Masseter chewing muscle, and he has cured her – for a whole three months. Oh, it’s now time for her second one. Kaching. \$\$\$\$. Dr Alex might care for her quality of life, but she is going to be up for repeat visits and financial drainage as they went nowhere near the ligaments. Even if they did, Botox won’t affect ligaments at all. The interesting thing is that Dr Alex states that the problem is caused by muscle spasm, but muscle spasm will always have a cause. It doesn’t exist on its own as a problem. It is the consequence of something, and I would assert that the something is jaw ligament and surrounding tissues injury or tightness.

If any of the above rings true for you or someone you know, consider physiotherapy for your jaw. In most cases you can avert the need for surgery or expensive appliances, and get back into eating, sleeping and yawning well.