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### T.M.J PAIN / DYSFUNCTION

T.M.J. pain or dysfunction refers to the symptoms produced by poor function of either the T.M.J. (jaw joint), or the muscles around the joint. This problem is at the border of areas of concern between Otolaryngologists and dentists, and is often diagnosed and managed by either / both specialities.

#### **Causes:**

- Stress and jaw clenching from stress
- Overbite or other dental misalignment
- Ill-fitting dentures
- Leaving dentures in overnight
- Clenching teeth by day or grinding teeth at night
- Excessive gum chewing

#### **Symptoms:**

- The main symptom is **pain in or around the ear**, which is often the reason for misdiagnosis of the condition. This is because the back wall of the jaw joint makes up the front wall of the ear, the chewing muscles surround the ear, and the same nerves supply both the ears and the joint. The pain is worse in the morning if you grind your teeth at night, and worse as the day progresses if other bite or jaw problems exist. Also, if ear pain is triggered by a blast of wind then it is more often than not due to TMJ dysfunction.
- Headache /facial pain/ neck pain
- Jaw clenching or grinding
- Ringing in the ears

#### **Diagnosis:**

This condition is most often diagnosed from patient history and clinical examination. Seldom is imaging necessary (e.g. CT / MRI). If symptoms persist in spite of conservative measures, contact your ENT surgeon to be re-evaluated.

#### **Treatment:**

- This condition is usually chronic and requires time, persistence and patience to overcome
- Avoid chewing gum
- If you have dentures, make sure they fit well. Try leaving one or both plates out at night to rest the jaw muscles
- Eat a soft, non-chew diet until the pain is gone
- Use local heat to the jaw area, such as a heating pad or hot water bottle
- You should see a dentist for underlying dental or bite problems
- If you grind your teeth or wake up with T.M.J. symptoms your dentist can make a splint to help this problem
- Muscle relaxants like Flexeril, pain killers and intramuscular Botox® injections may be an option in select cases (Please discuss with your ENT surgeon for more details).