

Managing jaw joint disorders

Oral & Maxillofacial Surgery
/Orthodontics & Restorative Dentistry
Information for Patients

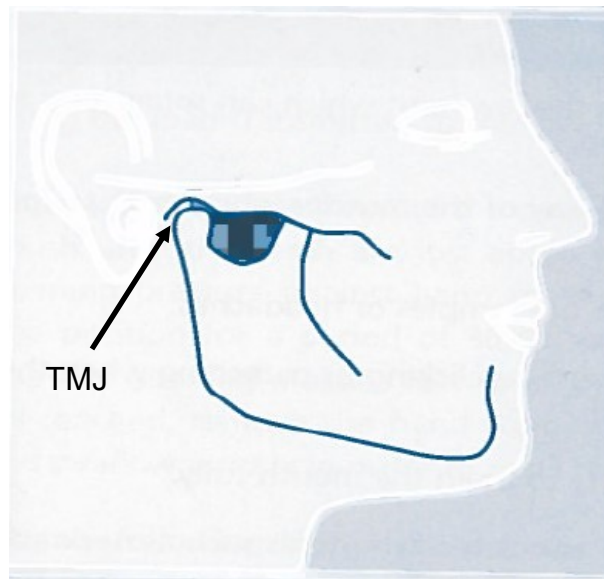
Produced: May 2021
Last reviewed: December 2022
Review: December 2025
Leaflet number: 436 Version: 3

What are the temporomandibular joints (TMJ)?

The temporomandibular joints (TMJ) are one of the most complex joints in the body. The joints sit in front of the ears, between the lower jaw and the skull. They work together with muscles and cartilage to help with opening and closing of the mouth, allowing jaw movements such as eating and speaking.

Temporomandibular disorder (TMD) or temporomandibular joint dysfunction (TMJD) are common names used to describe the problems you have when the joints, muscles and cartilages that helps joint movement, are not working properly. Other names used include myofascial pain syndrome, facial arthromyalgia or TMJ arthromyalgia.

TMD commonly affects young adults, but can occur in children and older people. Women are more likely to be affected by the condition than men.



**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What causes TMD/ TMJD?

There are many factors that can cause the disorder. Sometimes the cause may not be easily identified. Possible causes include:

- Habits such as clenching or grinding of teeth, chewing gum, biting your nails.
- Injury to the jaw; either to the joint or elsewhere on the jaw.
- Severe jaw deformity leading to increased load on the joint.
- Having your jaw in an abnormal position, for example musicians who play instruments with their mouths or holding your phone with your shoulder/ jaw.
- Stress, anxiety or depression.
- Arthritis.

What are the signs and symptoms of TMD/ TMJD?

- Pain or tenderness in the jaw joint and surrounding muscles. Pain may also spread to your ears, side of head (temples) and teeth.
- Symptoms may be sudden or gradual. Flare-ups are usually of an aching and deep nature but they can vary.
- Jaw joint noises including clicking, grating or grinding.
- Limited and uncoordinated opening of your mouth. This may sometimes include jaw locking.
- Headaches and possible neck ache.
- Chewing, yawning or keeping your mouth open for long periods of time can make the symptoms worse.

How is TMD/ TMJD usually managed?

TMD/TMJD can cause temporary discomfort. This usually improves if the cause can be removed. Treatment options usually do not need surgery (conservative), but are tailored to individual patients:

- Behavioral changes such as not opening your mouth too wide when yawning or eating, and stopping habits such as biting your nails and chewing gum.
- Have a soft diet especially during the painful stages.
- Doing things you enjoy that help you to relax and reduce stress such as activities for mindfulness and/ or daily exercise.
- Use a warm/ cold compress over the area to help relax the muscles, then gently massage them.
- Ibuprofen topical gel can be used for pain relief, targeting the most painful areas.
- Over-the-counter painkillers such as paracetamol, ibuprofen or co-codamol. Avoid ibuprofen tablets if you are using the gel form (Voltoral).

- Jaw exercises may be helpful.
- Try to maintain a comfortable posture and avoid positions that can cause pain (e.g. sitting with your head down). Break this up periodically with gentle body movements or stretches.

Jaw joint exercises

Smooth jaw joint opening:

1. Look into a mirror and place your fingers over your jaw joints.
2. Curl your tongue backwards to the roof of your mouth.
3. Keeping your tongue in this position, open your mouth slowly. Hold for 2 seconds and then slowly close, repeat this for up to 5 times.
4. Make sure your jaw opens and closes in a straight vertical line avoiding any sideways movement.



Jaw strengthening exercise:

1. Start with your jaw in a comfortable rest position with your teeth slightly apart.
2. Whilst opening your mouth, use your hand to rest your jaw on. Hold for 5 seconds and repeat this up to 5 times.



Repeat each exercise 5 times a day

What other treatment options are there?

Most TMD problems will get better on their own with time using the measures described above to help manage symptoms. You may find symptoms settle down, but can flare up. It is not always possible to stop jaw joint noises or clicking, but we can often help with pain and when you are not able to open your mouth fully. If needed, specific treatment options available include:

- **Dental splints (mouth guard):** a variety of designs such as soft and hard splints are available. We would normally refer you back to your dentist for this. The aim of the splint is to keep the joint in a relaxed position with your teeth apart. This reduces the impact of habits such as grinding or clenching on the joint. Most are for night time use but this can be discussed with your clinician.

- **Dentures:** if you have lost many teeth and your jaw over-closes, it may help to wear a denture to improve your bite. If you are wearing old worn dentures you may need to have them replaced by your dentist.
- **Physiotherapy:** this usually involves a range of treatments such as jaw exercises, acupuncture, manipulation of the jaw or heat treatment to help relax the jaw muscles and correct the position of the jaw.
- **Surgery:** this is only suggested when there is a mechanical problem or damage to the joint which has not responded to any other treatment. There can be side effects from having surgery so this is only rarely recommended.
- **Botox:** you may be offered this in rare cases. The maxillofacial surgeon will decide if it is right for your case. It will be offered once all other options have been tried. A small amount of Botox is injected into the most painful muscle areas. This will prevent muscle movement for a time giving them time to rest.
- **Cognitive behavioural therapy:** this service can sometimes be accessed through your GP. It may be helpful in some patients when problems from TMD are not getting better.

For more complex cases where the above treatments do not work to ease problems, patients may be referred to a specialist team at Queen's Medical Centre - Nottingham University Hospitals NHS Trust.

Contact details

- Oral & Maxillofacial Surgery - 0116 258 5671
- Orthodontics and Restorative Dentistry - 0116 256 3525

If you have any more concerns after you have been discharged from the department, you can contact your dentist for advice.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।
Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk