

Conditions-

TMJ (Temporomandibular Disorder)- More than fifteen percent of American adults suffer from chronic facial pain. Some common symptoms include pain in or around the ear, tenderness of the jaw, clicking or popping noises when opening the mouth, or even headaches and neck aches.

Two joints and several jaw muscles make it possible to open and close the mouth. They work together when you chew, speak, and swallow. These structures include muscles and ligaments, as well as the jaw bone, the mandible (lower jaw) with two joints, the TMJ's.

The TM joint is one of the most complex joints in the body. Located on each side of the head, these joints work together and can make many different movements, including a combination of rotating and translational (gliding) action, used when chewing and speaking.

Several muscles help open and close the mouth. They control the lower jaw (mandible) as it moves forward, backward, and side-to-side. Both TM joints are involved in these movements. Each TM joint has a disc between the ball and socket (see diagram). The disc cushions the load while enabling the jaw to open widely and perform rotating and translational movements. Any problem that prevents this complex system of muscles, ligaments, discs and bones from working together properly may result in a painful TMJ disorder.

Diagnosis & Treatment

A dentist can help identify the source of the pain with a thorough exam and appropriate x-rays. Often, it's a sinus, toothache or an early stage of periodontal disease. But for some pain, the cause is not so easily diagnosed. The pain could be related to the facial muscles, the jaw or temporomandibular joint, located in the front of the ear. Treatments for this pain may include stress reducing exercises, muscle relaxants, or wearing a mouth protector to prevent teeth grinding. They've been successful for many and your dentist can recommend which is best for you.

TMJ INSTRUCTIONS


1. Restriction of all mandibular movement to function in a pain- free range of motion.
2. Soft Diet
3. NSAIDs (eg, Anaprox DS 1 tablet every 12 hours for 7-10 days)
4. Moist heat applications to the affected area for 15-20 minutes, 4-6 times per day.
5. Consideration of a muscle relaxant, such as methocarbamol (Robaxin)

Sensitivity-

Are Your Teeth Sensitive?

Is a taste of ice cream or a sip of hot coffee sometimes a painful experience for you? Does brushing or flossing make you wince occasionally? If so, you may have a common problem called "sensitive teeth."

What Causes Sensitive Teeth?

Cavities and fractured teeth can cause sensitive teeth. But if your dentist has ruled these problems out, then worn tooth enamel, a [cracked tooth \(PDF\)](#)  or an exposed tooth root may be the cause.

A layer of [enamel](#), the strongest substance in the body, protects the crowns of healthy teeth. A layer called cementum protects the tooth root under the gum line. Underneath the enamel and the cementum is dentin, a part of the tooth that is less dense than enamel or cementum.

The dentin contains microscopic tubules (small hollow tubes or canals). When the dentin loses its protective covering, the tubules allow heat and cold or acidic or sticky foods to stimulate the nerves and cells inside the tooth. This causes hypersensitivity and occasional discomfort. Fortunately, the irritation does not cause permanent damage to the pulp. Dentin may be exposed when gums recede. The result can be hypersensitivity near the gum line.

Proper oral hygiene is the key to preventing gums from receding and causing sensitive-tooth pain. If you brush your teeth incorrectly or even over-brush, gum problems can result. Ask your dentist if you have any questions about your daily oral hygiene routine.

Treating Sensitive Teeth

Sensitive teeth can be treated. Your dentist may suggest that you try a desensitizing toothpaste, which contains compounds that help block transmission of sensation from the tooth surface to the nerve. Desensitizing toothpaste usually requires several applications before the sensitivity is reduced. When choosing toothpaste or any other dental care products, look for those that display the American Dental Association's [Seal of Acceptance](#)—your assurance that products have met ADA criteria for safety and effectiveness.

If the desensitizing toothpaste does not ease your discomfort, your dentist may suggest in-office techniques. A fluoride gel, which strengthens tooth enamel and reduces the transmission of sensations, may be applied to the sensitive areas of the teeth.

If receding gums cause the sensitivity, your dentist may use agents that bond to the tooth root to "seal" the sensitive teeth. The sealer usually is composed of a plastic material.

In cases where hypersensitivity is severe and persistent and cannot be treated by other means, your dentist may recommend endodontic ([root canal](#)) treatment to eliminate the problem.