

2. TMD diagnosis and management – “a nightmare” or “is it really so”

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First . . . Make a diagnosis. Temporomandibular disorder (TMD) is any disorder that affects or is affected by deformity, disease, misalignment, or dysfunction of the temporomandibular articulation. This includes occlusal deflection of the temporomandibular joints (TMJs) and the associated responses in the musculature. The concept of tmd as a “syndrome” of unknown etiology is obsolete. Improved information about the anatomy and physiology of the TMJs has been combined with new insights into the adaptive capacity of different tissues. Objective analysis has replaced the need for subjective opinions and has encouraged more specificity regarding what is wrong, not only in the joints, but also in the structural elements that relate to the joint. Thus the clinician can design treatment approaches aimed at correcting specific causes in addition to treating symptoms. If diagnosis of tmd reveals that the source of pain is primarily in the joints, it is never a reason for stopping the investigation there. If there is deformation in the tmj structures, there will almost always be signs of attrition, hypermobility, abfractions, or cracks in the teeth; there will virtually always be signs and/or symptoms in the musculature. This paper discusses the concepts which are essential to proper diagnosis and gives a fair insight into treatment planning and management.

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