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Contribution of cervical spine in temporomandibular joint disorders: A cross-sectional study

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Introduction & Aim: Temporomandibular joint (TMJ) pain refers to pain of muscles in the orofacial region. There are significantly higher proportion of signs and symptoms of temporomandibular disorder (TMD) in those whom had both jaw and neck/shoulder muscles tenderness. The objective of this cross-sectional study was to evaluate the existence and the relationship between temporomandibular disorders and neck pain and the effect of neck treatment in improving the symptoms and signs of the disorder.

Method: In this study, total number of 39 patients was included; all were examined and treated for temporomandibular disorder as first line of treatment, then referred to rheumatologist for cervical spine assessment and neck treatment as second line of management.

Result & Conclusion: About 88.2% of patients, presented complaining of temporomandibular disorder symptoms had neck pain concomitantly and a significant improvement in neck pain was noticed when treating the temporomandibular joint (P=0.001). The temporomandibular joint symptoms were also significantly improved when neck is treated (P<0.001). Moreover and interestingly, 100% of those who did not report pain in the temporomandibular joints, but presented only with clicking, had reported pain in the neck at presentation. Clicking in one or both temporomandibular was reported in 56.7% of patients presented with pain in both neck and the temporomandibular joint. The study concluded that disorders of temporomandibular joint and neck are significantly related to each other. Pathology in one can influence the pathology in the other same as treatment of each of them shows improvement of the other as well. Although the result of this study is significant, but to provide evidence-based criteria for the clinician and for more understand cause and effect relationship, a more stratified, randomized control trial is needed to support involving cervical spine by physiotherapy.

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