Temporomandibular Joint Disorder (TMD) describes a variety of conditions that affect jaw muscles, temporomandibular joints and nerves associated with chronic facial pain. Symptoms may occur on one or both sides of the face, head or jaw, or develop after an injury. TMD affects more than twice as many women than men.

**Chapter: What is the Temporomandibular Joint?**

The temporomandibular joint (TMJ) is a joint that slides and rotates just in front of your ear, consisting of the temporal bone (side of the skull) and the mandible (lower jaw). Chewing muscles connect the lower jaw to the skull, allowing you to move your jaw forward, sideways and open and close.

The joint works properly when the lower jaw and its joint (both the right and left) are synchronized during movement. TMD may occur when the jaw twists during opening, closing or side-motion movements. These movements affect the jaw joint and the muscles that control chewing.

**Chapter: What Causes TMD?**

Trauma to the jaw or jaw joint sometimes plays a role in TMD, but in most cases the cause of the disorder is unknown. Most experts suggest that certain tasks, either mental or physical, may cause or aggravate TMD, such as stressful situations. Most discomfort is caused from overuse of the muscles, specifically clenching or grinding teeth (bruxism). These excessive habits tire the jaw muscles and lead to discomfort, such as headaches or neck pain.

**Chapter: Symptoms of TMD**

- Jaw pain or soreness that is more prevalent in the morning or late afternoon
- Jaw pain when you chew, bite or yawn
- Clicking when opening and closing your mouth
- Difficulty opening and closing your mouth
- Locked or stiff jaw when you talk, yawn or eat
- Sensitive teeth when no dental problems can be found
- An earache without an infection

**Chapter: How to Treat TMD**

The majority of cases can be treated by unloading (resting) the joint, taking a non-aspirin pain reliever and practicing stress management and relaxation techniques. Most treatment for TMD is simple, often can be done at home, and does not need surgery. For example, control clenching or grinding during the day by sticking your tongue between your teeth. Eating soft foods and avoiding chewing gum also help relax the muscles.

Most people will experience relief with minor treatment. More severe cases may be treated with physical therapy, ice and hot packs, posture training and orthopedic appliance therapy (splint, or bite guard). When necessary, stronger pain or anti-inflammatory medications, muscle relaxants or antidepressants may help ease symptoms.

**Chapter: Is TMD Permanent?**

The condition is often cyclical and may recur during times of stress, good or bad. As the patient, you should be active in your treatment by being aware of the causes of your jaw problems after seeing a dentist for a diagnosis regime. Make routine dental appointments, so your doctor can check TMD on a regular basis.