North Cheshire and Mersey
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Temporomandibular joint dysfunction

Oral and Maxillofacial Surgery Department

Information for patients and carers

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What are the temporomandibular joints?

The temporomandibular joints (TMJs) are your jaw joints. They connect your lower jaw to your skull and allow your mouth to open, close and move from side to side.

These joints work together to allow the lower jaw to bring the lower teeth together with the upper teeth.

They are non-weight-bearing joints.

What is temporomandibular joint dysfunction (TMJD)?

TMJ disfunction (often called TMJD) happens when your jaw joints or the muscles around them are not working properly. It affects:

- the jaw joints
- the muscles around the jaw
- the area in front of the ears

It is a common condition and is not dangerous.

Symptoms

You may experience:

- pain around the ear and the upper jaw
- a dull ache that can spread to your cheek, neck or temples
- headaches
- muscle pain in the jaw
- difficulty opening your mouth
- your jaw getting stuck in one position (locking)
- joint noise (such as clicking, cracking, crunching, grating or popping)

Symptoms can get worse:

- when chewing
- during times of stress

Pain relief medications can help ease symptoms.

What causes TMJD?

The exact cause is not clear. Most patients with TMJD are typically younger (18 to 35 years old) and have few medical problems.

The pain may come from the:

- jaw joint itself
- muscles around the joint

Patients with TMJD may be more likely to have anxiety, depression and stress. These do not cause TMJD but can make the symptoms worse.

Teeth grinding may also make symptoms of TMJD worse.

Making a diagnosis

Before diagnosing TMJD, your doctor will:

- ask about your symptoms
- examine your mouth and jaw

You may need some tests, such as:

- an X-ray to check the upper and lower part of your jaw
- an MRI scan to exclude any disease in the region of the TMJ

This will help to rule out other conditions, such as:

- disease of the TMJ
- arthritis
- pathology in or around the TMJ
- fusion of the joint with the skull
- dental problems or infection
- problems affecting the nerves

Treatment options

The aim of treatment is to improve your symptoms. TMJD often gets better over time, even without treatment.

Common treatments include:

- eating a soft diet to avoid wide mouth opening and lots of chewing
- jaw exercises or physiotherapy
- pain relief medicine (usually over 4 weeks)
- anti-inflammatory gel (such as ibuprofen) used on the area of pain
- a mouth guard worn at night to stop clenching or grinding of teeth
- support for anxiety or depression
- movement of the jaw under general anaesthesia
- using a camera to see a clear view of the joint

Orthodontic treatment (braces or changing how your teeth meet) is not used for TMJD as it is not helpful for this condition.

What to expect

Most people recover well from this treatment and condition.

Symptoms can:

- last from weeks to months
- come and go over time

TMJD does not cause permanent damage to your jaw or arthritis.

Surgery is rarely helpful and may carry risks. It is only considered in specific cases.

Summary

TMJD is common and can be painful. Treatment focuses on:

- managing symptoms
- improving jaw movement

Looking after your general wellbeing, including stress and anxiety, can help improve your condition and recovery.