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For more information:

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TMJ Syndrome



Temporomandibular Joint

If you place your fingers in front of each ear and open your jaw, you'll feel lots of wiggling. This is where your skull's temporal bone attaches to your mandible (jaw): the temporomandibular joint (TMJ). Lots of ligaments, cartilage, fascia, discs, muscles, nerves and blood vessels run in, around and through it.

Chiropractic and body alignment techniques can analyze the **skull/jaw/spine** relationship.

Chiropractic

Health • Balance • Wellness

TMJ Syndrome

When the TMJ joint is misaligned it is called TMJ Syndrome. Common symptoms include the inability to open the mouth wide and a clicking or popping sound when the mouth opens or closes. In some cases the jaw can even temporarily lock up.

Other TMJ symptoms can include headache; hearing loss; tinnitus (ringing in the ears); throat fullness; facial swelling; shoulder, cheek or jaw pain; neck ache; facial nerve pain; ear or eye pain; dental pain; nausea; blurred vision and dizziness.¹

TMJ Syndrome has also been linked to vertigo, throat infections, sinus congestion, ear infections, asthma and even heart, stomach, intestinal, respiratory and emotional disorders.²

Causes of TMJ

According to one researcher, “[Up to] 78% of the general public have some amount of TMJ dysfunction. This condition can begin during the birth process.... One of the primary causes can be poor nutrition.”³ Indeed, TMJ symptoms are found in young children.⁴

Other causes of TMJ Syndrome are poor posture, spinal or skull subluxations, accidents and trauma (even from childhood).⁵⁻⁶ For example, a child may fall on his/her sacrum and in time, through the adaptive body mechanisms, the pelvic imbalance can affect the TMJ, head and neck.⁷



Spinal and TMJ problems are often found together.

Gerald Smith, DDS, a specialist in this field, says dental work is the cause of many TMJ problems:

*Orthodontic treatment affects the cranium in 100% of cases.... The structural imbalances cause chronic fatigue, headaches, scalp tenderness, pains behind the eyes, muffled ear sounds, ringing, hissing or other ear distortions, balance problems, nausea, facial tightness and cervical or lower back pain.*⁸

Dr. Daryl Curl, who holds degrees in both dentistry and chiropractic, confirms that orthotics (braces, crowns, etc.) may contribute to or worsen a patient's head-pain complaint.⁹

The pain of ill-fitting dental work can be quite intense. There are even reports of individuals forcing dentists to remove their braces at gun point!¹⁰

Let us not overlook that the very act of sitting open-mouthed in a dental chair and getting worked on puts great stress on the TMJ.

The Standard Dental/Medical Approach

Standard approaches to TMJ Syndrome include muscle relaxant drugs; painkillers; oral appliances, such as a night guard to control bruxism (grinding of the teeth); massage and a soft diet to ease the pain of chewing. Other treatments are orthodontics, restorative dentistry to build up the bite, bite plates and physical therapy. In severe cases jaw surgery has been performed. Yet this drastic step should be taken only after more conservative approaches have failed.

The Chiropractic Approach

Because spine and TMJ problems are often found together, many TMJ sufferers benefit from chiropractic care.¹¹ Chiropractic, by relieving pressure on the spine and cranial bones, may correct or relieve a TMJ problem.¹²

Conversely, an unhealthy skull/jaw alignment can put great stress upon the spinal column. There are documented cases of dental problems that, once corrected, have enabled chiropractic patients to better hold their spinal adjustments.¹³⁻¹⁴

Improper skull/jaw/spine alignment can affect your entire nervous system.

Studies

In one study, 30 chronic TMJ sufferers were randomized into 3 groups (two had chiropractic and one was a control). The group receiving chiropractic care had the most significant relief from pain.¹⁵

In another study, sixty patients with chronic cervical pain were divided into chiropractic and control groups. There was a dramatic improvement in TMJ

pain in the chiropractic group compared to the control group.¹⁶

Eleven patients with chronic TMJ revealed a shift from high-intensity to low-intensity pain between the beginning and end of care (63.6% to 18.2%). A significant change of mouth opening range was also observed.¹⁷

An individual case involved a 41-year-old woman with bilateral TMJ pain, ear pain, tinnitus, vertigo, decreased hearing and a sensation of pressure or fullness in both ears. She also had a 22-year history of migraine headaches. Prescribed antibiotics caused gastric upset and vomiting. MDs told her to apply local heat, reduce talking and eat soft foods. Her symptoms worsened.

Chiropractic care to the atlas vertebrae resulted in complete relief of TMJ symptoms after 9 visits and headache relief. At a one year follow-up she reported no TMJ symptoms and no headaches for the prior 9 months.¹⁸

In Conclusion

Certain chiropractic and body alignment techniques have been developed that analyze skull/jaw/spinal structural relationships. These techniques have benefited patients suffering from the hidden distortions that sometimes arise within us.

All TMJ sufferers need a chiropractic checkup.

Anyone who has been to the dentist should follow up that visit with a quick stop at their chiropractor.



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