Physiotherapy
Ultrasound, exercises and advice may relieve symptoms. Applying gentle heat, such as a wheat bag, to the TMJ for no longer than 20 minutes can help relieve discomfort.

Surgery
Although rarely necessary for TMJ dysfunction, a closer and more detailed look at the joint using an arthroscope (camera put into the joint) may be necessary. If all else fails open surgery of the joint may be indicated.

Jaw exercises
There are two main exercises which may be useful. Your specialist will explain which will be of most help to you.

It is important to warm up your facial muscles for a few minutes with a hot-water bottle before starting your exercises.

Exercise 1
1  Open your mouth slowly.
2  Curl your tongue upwards so that the tip of your tongue is touching the back part of the roof of your mouth.
3  Close your mouth slowly, keeping your tongue in the above position.

Repeat this sequence 10 times, 2–3 times daily.

Exercise 2
1  Sit upright facing a mirror.
2  Open your mouth slowly ensuring your lower jaw does not swing to one side, this may require you applying gentle guiding pressure with your hand against your jaw.

Repeat this sequence 10 times, 2–3 times daily.

Remember!
TMJ dysfunction is not a disease but a temporary malfunction of the jaw joint and its muscles.

Many patients get better without medical treatment.

Almost all remaining patients get better with simple non-surgical methods of treatment.
What is the TMJ?
The TMJ is the joint between the lower jaw and the skull (see diagram below). The joint has a cartilage disc separating the jaw and the skull. There are also four powerful muscles which move the jaw into different positions to allow us to speak and chew.

What are the symptoms?
The commonest symptoms are:

Pain in the TMJ or chewing muscles which may radiate into the head or down the neck.

Clicking which is caused by the cartilage disc slipping in and out of its normal position due to muscle spasm.

Limited mouth opening which is due to either muscle spasm or displacement of the cartilage disc causing locking of the joint.

Jaw clenching and tooth grinding are thought to be involuntary anxiety-relieving mechanisms. These most frequently occur during sleep and therefore patients are often unaware that they are happening. Many TMJ patients also suffer from other stress-related disorders such as tension headaches, low back pain and abdominal cramps (irritable bowel).

Examination
Your specialist will examine your jaw joint and muscles to detect signs of muscle spasm and limitation of mouth opening. An X-ray of the TMJ and jaws should aid the diagnosis and show any evidence of arthritis. It may be necessary to carry out a detailed scan of the TMJ.

How is TMJ dysfunction treated?

Reassurance
Once the specialist has explained the nature of the condition and that symptoms usually resolve after a period of time, many patients do not seek further treatment.

Soft diet and limitation of mouth opening
This allows the muscles to recover from their period of over activity.

Biting and eating
Avoid biting fingernails, pens, pencils, lips, etc. Avoid very chewy food, such as gum, French bread and apples. Cut food into small pieces to reduce the amount of chewing needed.

Jaw exercises
These are designed to reprogramme the chewing muscles.

Bite raising appliances
These are similar to sports mouthguards. They are worn over the teeth to provide a cushion which in turn reduces muscle activity and spasms. It can also help to move a displaced disc back into position.

Medications
These are many and varied and may help symptoms by providing pain relief and muscle relaxation.