

## **Nicole T. Gordon, DMD**

## **Bruxism, TMJ Disorders & Occlusal Splint Therapy**

Occlusal splint therapy is recommended to patients for a variety of reasons. The most common include bruxism (habitual clenching or grinding) and temporomandibular joint (TMJ) or myofascial (muscular) pain. An occlusal splint as a protective devise to protect your teeth or restorative dental treatment. Bruxism may cause total destruction of the dentition if allowed to progress without patient education or preventive therapy. Dr. Gordon takes a proactive vs. reactive approach, choosing to educate patients as soon as abnormal wear patterns are evidenced on the teeth.

The type of splint recommended depends on the patient symptoms and habits. Usually, splints are a hard custom-made appliance covering the biting surface of all upper teeth. Occlusal splints accompanied by a soft diet helps many patients manage pain, and is usually considered the first treatment option because it is non-invasive. Other adjuncts to treatment may include prescription medications such as muscle relaxants and anti-inflammatory drugs, warm, moist compresses and physical therapy.

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, open and close. Abnormalities in the function of the TMJ are usually diagnosed as Temporomandibular Joint Disorder (TMD). Pain associated with the chewing muscles is called neuromuscular or myofascial pain.

We ask that you <u>bring your splint with you to all continued care appointments</u> so that it can be checked by Dr. Gordon. Occasionally, adjustments are required. We will clean your splint in the ultrasonic machine to keep it as fresh as possible for you.