TMJ Referrals

Referral Criteria

Criteria for referral of patients with TMJ dysfunction to Secondary care Consideration should be given to referring a patient to the local Oral & Maxillofacial services if they meet any of the following criteria:

- Refractory TMJ dysfunction- defined as dysfunction that has failed to respond to conservative or primary care measures after **6 months.**
- Limitation or progressive difficulty in mouth opening .
- Persistent inability to manage a normal diet.
- Pain or reduced jaw function in patients with known rheumatic joint disease.
- Recurrent dislocation of TMJ and or associated syndromes (e.g. Ehlers-Danlos).

General Dental Practitioner (GDP)

-Patients presenting to their dentist with pain, clicking or reduced function in the jaw should be assessed by the dentist and a diagnosis made.

-Initially they should receive simple measures such as education about the condition, stress management, reassurance and advice about habits (Clenching/grinding of the teeth) Analgesic advice and or bite splints where appropriate. Conservative management e.g., soft diet, apply cold/warm pad and massaging muscles.

-If resolution of symptoms does not occur within approximately six months consideration should be given to referral to a specialist for further advice/management.

-If there is concern that symptoms indicate a more serious condition referral should be made for specialist assessment.

-The vast majority of patients with clicks require reassurance that the condition is not serious and is usually self-limiting.

- A few benefit from simple exercises; a small proportion may need occlusal coverage (bite splint), less than 20%require referral.

-Investigations to rule out any dental related symptoms is recommended.

Management Pathway