

THE TMJ ASSOCIATION
TMJA **MEDIA KIT**

Welcome to The TMJ Association, Ltd.

The TMJ Association, Ltd. (TMJA) is a non-profit, patient advocacy organization whose mission is to improve the quality of health care and lives of everyone affected by temporomandibular disorders (TMJD). TMJD refers to a complex and poorly understood set of conditions that can cause pain in the area of the jaw joint and associated muscles and/or problems using the jaw. Both, or just one of the TM joints, may be affected. TMJD can affect a person's ability to speak, eat, chew, swallow, make facial expressions, and even breathe. Some TMJD patients have other health problems that co-exist with TMJD, such as chronic fatigue syndrome, fibromyalgia, sleep disturbances, and vulvodynia. We invite you to read through our web site, www.tmj.org, and contact us if you have more questions. We do not give medical advice or make referrals, but we can link you to science-based information.

The TMJ Association continues to strive for its ultimate goal: the development of universal standards for safe, effective, affordable, science-based diagnostics, and the treatment and prevention of temporomandibular disorders. We understand that patient education, advocacy, and the provision of accessible support systems are central to achieving this goal.

The TMJA serves patients, professionals, and the general public through a variety of educational, social, and advocacy programs:

We represent the needs of patients by participating in government health care policy and research meetings, testifying before congressional committees, and promoting temporomandibular joint research and development activities in all relevant government agencies. We recognize that educating elected officials is essential to directing attention to the prevalence, cost, and long-term pain and disability often associated with these complex disorders.

Our periodicals inform readers of relevant legislative, scientific, and research news. The *TMJ Communiqué*, a general newsletter, *TMJ News Bites*, an electronic news update, and our *TMJ Science* journal, a research publication, provide concise, accurate, and newsworthy reports. Our educational materials provide a basic understanding of TMJDs and related treatment options.

We connect TMJD patients who are in need with other patients who have offered to provide one-on-one support. Our support contacts validate patients' often-doubted pain and disability, reduce isolation, promote self-esteem, and encourage self-reliance and coping skills.

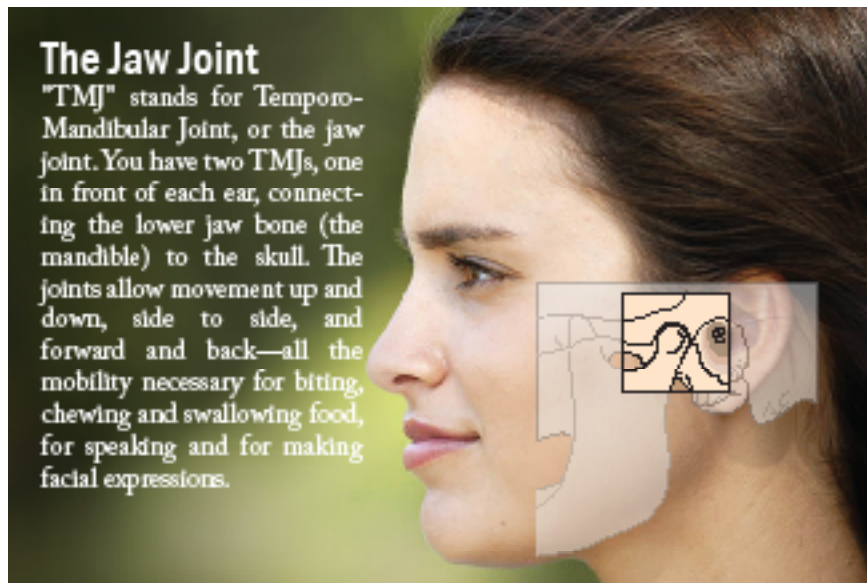
The TMJA is shaping a society in which the state of TMJD and the pain and suffering they cause are recognized and effectively managed with scientifically validated treatments.

Thank you for your interest.

Sincerely,
Terrie Cowley
President and Co-Founder, The TMJ Association, Ltd.

Basic Overview of TMJD

Temporomandibular Disorders



The Jaw Joint

"TMJ" stands for Temporomandibular Joint, or the jaw joint. You have two TMJs, one in front of each ear, connecting the lower jaw bone (the mandible) to the skull. The joints allow movement up and down, side to side, and forward and back—all the mobility necessary for biting, chewing and swallowing food, for speaking and for making facial expressions.

JAW OPEN



Skull
Temporal Bone
Articular Disc
Fibrous Joint Capsule

JAW CLOSED



Jaw Bone (Condyle)
Mandible

Temporomandibular Disorders

Temporomandibular disorders (TMJD), commonly called TMJ, are a collection of poorly understood conditions characterized by pain in the jaw and surrounding tissues and limitations in jaw movements. Injury and conditions that routinely affect other joints in the body, such as arthritis, also affect the temporomandibular joint. One or both joints may be affected in people with TMJD, which can affect a person's ability to speak, eat, chew, swallow, make facial expressions, and even breathe.

Research is now looking at TMJD and many other conditions to see if there is a common factor. These may include chemical sensitivity, chronic fatigue syndrome, endometriosis, fibromyalgia, hypermobile joints, irritable bowel syndrome, mitral valve prolapse, sleep disorders, and vulvodynia. Moreover, certain medical conditions such as ehlers-danlos syndrome, dystonia, lyme disease and scleroderma also may have an effect on TMJD.

Who is Affected by TMJD?

Approximately 35 million people in the United States suffer from TMJ problems. While both men and women experience TMJ problems, the majority of those seeking treatment are women in their childbearing years.

Causes

Not all causes are known. Some possible causes are injuries to the jaw area, various forms of arthritis, some dental treatments, your genes and/or hormones, an infection, and auto-immune diseases. Research has shown that TMJ patients are hypersensitive to pain, which may explain why they may also have other chronic pain conditions.

Fast Facts About the TMJA

1986 – Founded by Terrie Cowley and Sandra Geilfuss, both TMJD sufferers. Their intent was to establish a support group to exchange experiences, information, understanding and emotional support for TMJD patients.

1989 – Incorporated as a non-profit organization headquartered in Wisconsin in December.

1992 – Congressional hearing, "Are FDA and NIH Ignoring the Dangers of TMJ Implants" revealed "that the FDA had never required that the manufacturers of implants prove that they are safe or effective."

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Basic Overview of TMJD (cont.)

Temporomandibular Disorders

Diagnosis

Diagnosing TMJD can be difficult and confusing. For example, facial pain can be a symptom of many conditions, such as sinus or ear infections, decayed or abscessed teeth, various types of headache, and facial neuralgia (nerve-related facial pain). At present, there is no widely accepted, standard test to correctly identify all TMJ conditions.

In most cases, however, a complete evaluation, including a detailed medical history, the patient's description of symptoms, and physical examination of the head, neck, face and jaw provide information useful for making a diagnosis. Tests that are recommended are often intended to rule out other possible medical conditions.

A diagnosis of TMJD may be made only after every other possibility has been considered and eliminated. Many TMJ patients see multiple healthcare providers, such as primary care physicians, dentists, sleep specialists, ear and nose and throat specialists, neurologists, endocrinologists, rheumatologists, pain specialists, chiropractors, etc., in their search for answers. Before undergoing any costly diagnostic test, it is always wise to get an independent opinion from another healthcare provider of your choice and one not associated with your current provider.

Symptoms

Pain is the most common symptom. TMJ pain is often described as a dull aching pain in the jaw joint and nearby areas, which comes and goes. Some people, however, report no pain, but still have problems using their jaws. Other symptoms can include:

- pain in the neck and shoulders
- migraine and/or chronic headache
- jaw muscle stiffness
- limited movement or locking of the jaw
- painful clicking, popping or grating in the jaw joint when opening or closing the mouth
- a bite that feels "off"
- ear pain, pressure, and/or ringing in the ears
- decreased hearing
- dizziness and vision problems

Jaw noises unaccompanied by pain or decreased mobility do not mean you have a TMJ problem. Keep in mind that occasional discomfort in the jaw joint or chewing muscles is common, and is not always a cause for concern. Many people with certain TMJ problems get better without treatment. Often the problem goes away on its own in several weeks to months. However, if the pain is severe and lasts more than a few weeks, see your healthcare provider.

Fast Facts About the TMJA

1993 – First International Workshop on TMJD and Related Pain Conditions sponsored by the National Institute of Dental Research (NIDR) revealed that “the field of TMJ is currently characterized by a variety of concepts and approaches, many of which have little scientific basis, regarding how best to diagnose TMJD and how best to treat them. These are almost matched in number, and certainly are matched in the zeal of those who advocate them, by the numerous theories advocated on the etiology and pathogenesis of TMJD. Despite their limited scientific basis, many of these clinical approaches are in widespread use, at considerable financial, and in some cases functional, cost to the population.

1993 - The U.S. Senate included report language in the NIDR 1994 budget, directing them to address TMJ research needs. Language continues to be included to this day.

1996 – National Institutes of Health Technology Assessment Conference on Management of Temporomandibular Disorders told us that “not only is there no good agreement on what to call it, there is no common understanding of what jaw pain represents,” confirming that nothing had changed since the NIDR workshop of 1993.

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Basic Overview of TMJD (cont.)

Temporomandibular Disorders

Progression of TMJD

Most people with TMJ problems have relatively mild or periodic symptoms. Some TMJ problems improve on their own within weeks or months with simple home therapy. For others, symptoms worsen over time and they develop long-term, persistent and debilitating pain.

Overlapping Conditions

Millions of Americans suffer from multiple conditions such as chronic fatigue syndrome, endometriosis, fibromyalgia, headaches, interstitial cystitis, irritable bowel syndrome, temporomandibular disorders, and vulvodynia.

Current research indicates that these conditions frequently coexist or ‘overlap,’ yet all of the disorders are poorly understood. Research on the overlap of these conditions is in its infancy, so we don’t know how/why they are connected. There are many unanswered questions. Some people suffer from two conditions, while others have three or more. In some cases, individuals suffer from one condition for many years before developing a second or third. In other cases, individuals experience symptoms of several conditions simultaneously.

Treatment

Because most common jaw joint and muscle problems are temporary, lasting only weeks or months, simple care is all that is usually needed to relieve the discomfort. Self-care practices, such as eating soft foods, applying ice or moist heat, and avoiding extreme jaw movements (such as wide yawning, loud singing, and gum chewing) are useful in easing symptoms.

Unfortunately, many treatments recommended by TMJ “specialists” are based largely on beliefs that are not grounded in thorough scientific research. As a result, some patients are made worse by these treatments.

Insurance Coverage

Many medical and dental insurance plans do not pay for treatment of jaw joint and muscle disorders, or only pay for some procedures. Until the causes of the various TMJ disorders have been discovered, and quality science demonstrates that treatments are effective without causing harm, insurance companies will not recognize treatments that have questionable outcomes. Contact your insurance company to see which treatments are covered.

Costs

There are no standardized costs for TMJ treatments.

Fast Facts about the TMJA

1998 – TMJ Association launches its website, www.tmj.org.

2000 – TMJ Association launches a national public awareness campaign with an appearance on Good Morning America and a new revised website.

2000 – TMJ Association sponsors its first scientific meeting, “Moving Temporomandibular Joint Research into the 21st Century” in Bethesda, MD, May 22-23.

2002 – TMJ Association holds its second scientific meeting, “Joint and Muscle Dysfunction of the Temporomandibular Joint” in Bethesda, MD, May 6-8.

2004 – TMJ Association sponsors its third scientific meeting, “Advancing Diagnostic Approaches for TMJ Diseases and Disorders” in Bethesda, MD, May 6-7.

2004 – TMJ Association becomes a member of the Combined Federal Campaign – and is awarded the *Best in America* seal. The Independent Charities Seal of Excellence is awarded to the members of Independent Charities of America and Local Independent Charities of America that have, upon rigorous independent review, been able to certify, document, and demonstrate

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Basic Overview of TMJD (cont.)

Temporomandibular Disorders

Can TMJD be Prevented?

Patients who are told they should undergo treatment(s) to prevent the development of a TMJ problem should know that there is currently no evidence that such conditions can be prevented.

Who is affected by TMJD?

Approximately 35 million people in the United States suffer from TMJ problems. While both men and women experience TMJ problems, the majority of those seeking treatment are women in their childbearing years.

Is there a specialty in TMJD?

The field of temporomandibular disorders (TMJD) suffers from a lack of basic and clinical science. Therefore, neither the American Dental Association (ADA) nor the American Medical Association (AMA) recognizes the treatment of TMJD as a specialty. As a result, there are no established standards for dental/medical school education. Although a variety of healthcare providers advertise themselves as TMJ specialists, the more than 50 different treatments available today are based largely on beliefs, not on scientific evidence.

As we learn more about the temporomandibular joint and its associated structures, many in the healthcare community are reassessing their treatments and ways in which they were developed. Clearly, the various TMJD are far more complex than previously believed.

Whom should you see for TMJD?

Because there is no certified specialty for TMJ disorders in either dentistry or medicine, finding the right care can be difficult. Look for a healthcare provider who understands musculoskeletal disorders (affecting muscle, bone and joints) and who is trained in treating pain conditions. Pain clinics in hospitals and universities are often a good source of advice.

Are TMJD a dental or medical issue?

The TMJD patient should be seen as a whole individual, one who expresses one or more symptoms that reflect the range of other conditions that many TMJD patients experience. These include generalized muscle pain, fatigue, sleep disorders, cardiovascular disorders, and many symptoms resembling those described for fibromyalgia, irritable bowel syndrome, dysautonomias, depression, and a variety of chronic pain syndromes. It is clear that TMJD should be characterized, researched and ultimately treated as other complex diseases such as arthritis, hypertension, heart failure, and many other common diseases.

Fast Facts About the TMJA

on an annual basis that they meet the highest standards of public accountability, program effectiveness, and cost effectiveness. These standards include those required by the US Government for inclusion in the Combined Federal Campaign, probably the most exclusive fund drive in the world. Of the 1,000,000 charities operating in the United States today, it is estimated that fewer than 50,000, or 5 percent, meet or exceed these standards and, of those, fewer than 2,000 have been awarded this seal.

2006 - TMJ Association triggers a Government Accountability Office (GAO) investigation on the role in TMJ implant devices and TMJ research in general.

2006 - TMJ Association sponsors its fourth scientific meeting, "A Systems Approach to the Understanding of TMJ as a Complex Disease" in Bethesda, MD, September 11-12.

2008 - TMJ Association holds its fifth scientific meeting, "Can Studies of Comorbidities with TMJD Reveal Common Mechanisms of Disease?" in Bethesda, MD, June 1-3.

2009 - TMJ Association joins forces with five non-profits to help millions of patients suffering from coexisting medi-

Basic Overview of TMJD (cont.)

Temporomandibular Disorders

Are TMJD caused by stress?

Although stress and tooth clenching and grinding are sometimes attributed as causes for TMJ disorders, the National Institute of Health brochure, <http://www.nidcr.nih.gov/OralHealth/Topics/TMJ/TMJDisorders.htm>, states that "...for most jaw joint and muscle problems, scientists don't know the causes. For many people, the symptoms seem to start without obvious reason... The roles of stress and tooth grinding as major causes of TMJ disorders are also unclear. Many people with these disorders do not grind their teeth, and many long-time tooth grinders do not have painful joint symptoms... Researchers also found that the stress in many persons with jaw joint and muscle disorders is more likely the result of dealing with chronic jaw pain and dysfunction than the cause of the condition."

What is being done about TMJD?

The National Institutes of Health along with organizations like The TMJ Association encourage and support TMJ research and education. The Association's TMJ awareness campaigns, educational endeavors, scientific meetings, and public policy efforts have been effective in focusing federal attention on TMJD.

What is The TMJ Association?

The TMJ Association, Ltd. is a 501(c)(3) non-profit, patient advocacy organization whose mission is to improve the quality of health care and lives of everyone affected by temporomandibular disorders.

Fast Facts about the TMJA

cal conditions and forms the Overlapping Conditions Alliance, launching www.OverlappingConditions.org.

2010 - TMJ Association celebrates its 20th year as a non-profit organization.

2010 - TMJ Association launches its new website, www.TmjAssociation.org

2010 - TMJ Association is part of the *Campaign to End Chronic Pain in Women*, an advocacy campaign fighting to end discrimination against and improve care for women suffering from neglected and dismissed chronic pain conditions, www.EndWomensPain.org.