

**Update: Dental Education by Charles Greene, DDS
TMJ Patient-Led RoundTable Project, Working Group 3, May 2019**

Since the May 11, 2018 TMJ Patient-Led RoundTable Working Group 3 report, there have been no substantial changes regarding the state of orofacial pain (OFP) education in American dental schools, and especially on the diagnosis and treatment of temporomandibular disorders (TMD).

Dental faculty who had been members of the American Dental Education Association (ADEA) Special Interest Group (SIG) advocating for OFP/TMD had shown little interest or enthusiasm for initiating any activities over the years. This SIG was about to be discontinued by ADEA when in 2013, ADEA asked Dr. John Stockstill to attempt to resurrect interest in this SIG. At the Annual ADEA meeting in Seattle, WA, a small group met and elected Officers: John Stockstill, President; Heidi Crow, President-elect; and Yoly M. Gonzalez-Stucker, Secretary. Members of this ADEA group seem to be active in advocating for TMD matters in dental education only individually, and only if these topics are currently being taught at each of their schools or in postgraduate residency programs.

The 2017 Commission on Dental Accreditation (CODA) standard on what interventions a dental school must address (among 12) includes only one for TMD which states: ***Recognize TMD and describe the management and referral process.*** There are no items dealing with pain associated with chronic TMD and the subject of post-surgical TMJ/TMD pain also does not appear on that CODA list. Other observations by John Stockstill, as one who is involved in dental postgraduate admissions: After interviewing hundreds of residents who represent a number of dental schools in the US, it seems that little or no predoctoral instruction is given concerning TMD in American dental schools. The main focus of the dental profession in regard to pain management remains local and general anesthesia, plus concern about opioid use and misuse.

Currently, TMJ patients are consulting with medical and dental practitioners for a diagnosis and treatment plan. Future proposals developed to address the management of TMDs and co-morbid medical conditions must include basic education at the undergraduate level not only at Dental Schools but also Medical Schools as part of the broad education of primary care physicians. Proposals must as well consider training for those medical disciplines that impact importantly upon the diagnosis and treatment of TMJ patients. Towards this end, it is first necessary to bring together a multidisciplinary team to develop a diagnostic and taxonomic classification system that will differentiate the various patient subgroups. This classification system must be based upon the most current diagnostic methods available at this time within our Academic Centers that would differentiate various patient subgroups. If insufficient data is available to establish such criteria, such efforts should be of the highest priority to obtain.

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Seeking treatment for temporomandibular disorders: What patients can expect from non-dental health care providers. (Oral Surg Oral Med Oral Pathol Oral Radiol 2019;127:399_407)