



TMJ News Bites

Issue 3 2020

The Fall Giving Season Is Upon Us



The TMJ Association (TMJA) is the only nonprofit patient advocacy organization fighting for the best science that will lead to a greater understanding of Temporomandibular and related disorders, as well as safe and effective treatments. We cannot change the face of TMJ without YOU!

If you are an employee of a government agency who understands the full impact of Temporomandibular disorders on individuals, their loved ones and society at large, please help us by designating The TMJ Association as your **Combined Federal Campaign (CFC) charity #12102**.

Ask your mail carrier and those you know serving in the military to consider pledging their support to The TMJ Association. If they don't already have a chosen charity, they may be glad to help!

State employees in Arizona, California, Connecticut, New Jersey, New York, Ohio, Pennsylvania, Washington and Wisconsin can also contribute through the State Employee Contribution Campaign by writing *The TMJ Association* on the donor form.

United Way and other nonprofit corporate donor programs are great ways to improve the plight of TMJ patients. Simply write *The TMJ Association* on your donor form.

If you don't participate in any of these campaigns, you can still help by [donating directly to The TMJ Association!](#)

Time to Eliminate the Third Pathway

As many readers of *TMJ News Bites* already know from personal experience, the TMJ field is complicated by having so many diverse concepts of diagnosis, etiology, and treatment. As a result, it is difficult for a patient who maybe having a temporomandibular problem to find care – and to avoid the harmful procedures that are often recommended and carried out.

Dr. Charles S. Greene has provided *TMJ News Bites* with a brief summary of a paper titled, *Treating Temporomandibular Disorders in the 21st Century: Can We Finally Eliminate the "Third Pathway"?*, which he recently co-authored with Professor Daniele Manfredini. The authors point out that the general management of joint and muscle problems by the medical orthopedic profession is based on a "Two-Track" system of medical and/or surgical treatments. However, those doctors generally do not get involved with TMJ patients and instead refer them to dentists, based on the assumption that a "Third Pathway" exists which only dentists can provide. That third pathway is the authors' name for the mechanistic concepts of jaw malalignment, bad bites, temporomandibular joint malpositions, and similar ideas that have been the main focus of the TMJ field throughout most of the 20th century. Obviously, those concepts usually require irreversible dental procedures such as jaw repositioning, orthodontics, and various bite-changing procedures as the main forms of corrective treatment.

However, as the title implies, the 21st century thinking in this field has changed dramatically as a result of over 50 years of basic science and clinical research. Most of the elements of the "Third Pathway" have been discredited, and the expert community within the TMJ field has adopted a more conservative model for diagnosis and treatment of TMJ problems. This model is a combination of the traditional orthopedic medical-surgical model, carried out within a biopsychosocial treatment framework that recognizes the pain and suffering of having chronic facial pain. Therefore, the authors conclude that the "Third Pathway" is an artificial creation that originated many years ago within the dental profession, and it is time to eliminate that pathway from the dental profession.

Reference: [Greene CS, Manfredini D. Treating Temporomandibular Disorders in the 21st Century: Can We Finally Eliminate the "Third Pathway"? J Oral Facial Pain Headache. 2020 Summer;34\(3\):206-216. doi: 10.11607/ofph.2608. PMID: 32870949](#)

TMD Diet Study: Preliminary Findings



Despite the pain and functional limitations commonly seen in Temporomandibular disorders (TMJ) affecting a person's ability to chew and swallow, there is very little research on the relationship between TMJ, diet and nutrition.

"While nutritional modifications are often a consequence of the "soft diet" component of most TMJ self-management programs, little evidence has addressed the benefits and adverse effects of addressing nutritional needs" (National Academy of Medicine Report on Temporomandibular Disorders).

To address these questions, a study, *Persistent Temporomandibular Disorders and Dietary Changes: A Cross-sectional Survey*, was begun in 2019 by a team of researchers at Newcastle University in the United Kingdom in collaboration with The TMJ Association. We thank the TMJ patients who participated and are pleased to share some preliminary results.

The aim of the study was to understand the impact of TMJ on diet and nutrition, which can

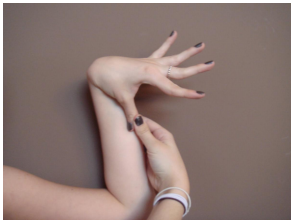
lead to evidence-based guidelines for making healthy dietary choices. In total, 93 individuals drawn from 11 different countries completed the nutrition study's patient questionnaire, with 70% from the U.S. Approximately half of those who completed the questionnaire went on to complete daily diet diaries; but only half of these completed diaries over the three consecutive days requested. The mean age of participants was 50.7 years old, most of whom were women. Over 95% had been diagnosed with a TMJ disorder by a healthcare professional.

Among the preliminary findings:

- 40% of all participants had undergone surgery
- The majority of cases had multiple surgeries
- Of all surgical interventions, closed surgery (such as arthrocentesis) was most common
- Most had surgery on both the right and left TM joints
- Over 75% of participants reported that they modify their food preparation because of jaw joint pain
- 72% cut their food into small pieces
- 42.4% and 40% boiled or mashed their food, respectively
- The majority of respondents had received professional treatment for their jaw pain
- Simple symptomatic advice (e.g. hot or cold compresses) was most common, followed by splint therapy and physiotherapy
- 65% of participants received medications for their jaw pain
- Less frequent was dietary advice
- Least reported was a referral to a nutritionist

Data analysis is ongoing and the final results will be published in a peer-reviewed journal.

Do You Have Hypermobile Joints?



Hypermobile joints are joints that move beyond the normal range with little effort. Joints most commonly affected are the elbows, wrists, fingers, and knees. The loose joint can critically affect the head, neck and jaw. Ehlers-Danlos syndromes represent another set of systemic conditions associated with an increased risk of TMJ disorders and other chronic pain conditions (De Coster et al., 2005; Chopra et al., 2017; Mitakides and Tinkle, 2017). Chronic pain is highly prevalent in this syndrome, including both regional and widespread pain and TMJ-related pain has been reported in up to 71% of patients with Ehlers-Danlos syndrome (De Coster et al., 2005). *National Academy of Medicine Report on Temporomandibular Disorders pg. 3-20.*

The Ehlers-Danlos Society is launching a new genetic study, [HEDGE Study](#), to look at the genes involved in people with hypermobile joints. We encourage TMJ patients with hypermobile joints to consider participating in this study which could lead to information that would benefit the TMJ research and health care communities.

“If we are successful in identifying the underlying genes for hypermobile EDS, the opportunities for earlier diagnosis and more comprehensive treatment and care are virtually limitless,” stated Lara Bloom, President, and CEO of The Ehlers-Danlos Society.

About The TMJ Association...*Changing the Face of TMJ*

The TMJ Association, Ltd. is a nonprofit, patient advocacy organization whose mission is to improve the quality of health care and lives of everyone affected by Temporomandibular Disorders (TMJ). For over 30 years, we have shared reliable information on TMJ with people like you. We invite you to visit our website, www.tmj.org.



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The TMJ Association, Ltd. is a nonprofit 501(c)(3) tax-exempt organization.

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