

Enhancing Temporomandibular Disorder and Comorbidity Care in the Military Health System

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Bethesda, Md.

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DENTAL



Uniformed
Services
University



Presenter

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CDR Hawkins currently serves as Chair of the Orofacial Pain Center at the Naval Postgraduate Dental School (NPDS) in Bethesda, Md, as well as the Orofacial Pain Specialty Leader to the Navy Surgeon General. Originally from Columbus, Ohio, he attended Dental School at The Ohio State University, graduating with his Doctor of Dental Surgery (DDS) in 2010. In 2015, CDR Hawkins completed a residency in Orofacial Pain at NPDS and received a Master's Degree in Oral Biology from the Uniformed Services University of the Health Sciences. He next served as the sole Department of Defense Orofacial Pain Specialist in the Southwestern region of the United States while at Naval Medical Center San Diego from 2015-2018. In 2017, he received a certificate in Medical Acupuncture from Helms Medical Institute. Cmdr. Hawkins served as the Program Director for the TriService Orofacial Pain residency program from 2019-2022.

Disclosures

- Dr. James Hawkins has no relevant financial or non-financial relationships to disclose relating to the content of this activity.
- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.
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Polling Question 1

What is your field of medicine?

- A. Physician
- B. Dentist
- C. Allied Health Clinician
- D. Other

Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Summarize how to screen patients for temporomandibular disorders (TMD) and comorbidities.
2. Differentiate TMD diagnostic categories and risk categories.
3. Describe self-care techniques to help rehabilitate TMD.
4. Outline when and how to refer orofacial pain (OFP) and TMD patients.

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Temporomandibular Disorders

Night
Guard

Bite
Adjustment

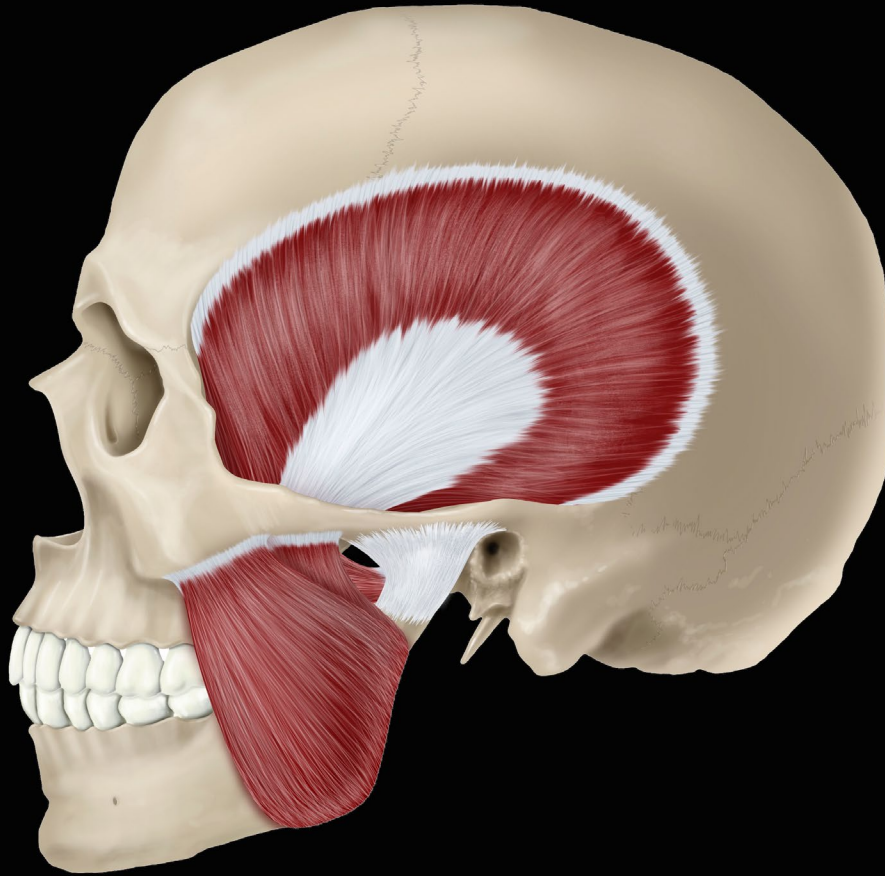


Botox
or
Surgery

Temporomandibular Disorders



Temporomandibular Disorders (TMD)



More than 30 diagnoses

Polling Question 2

Do you or someone you know have a TMD?

- Yes
- No

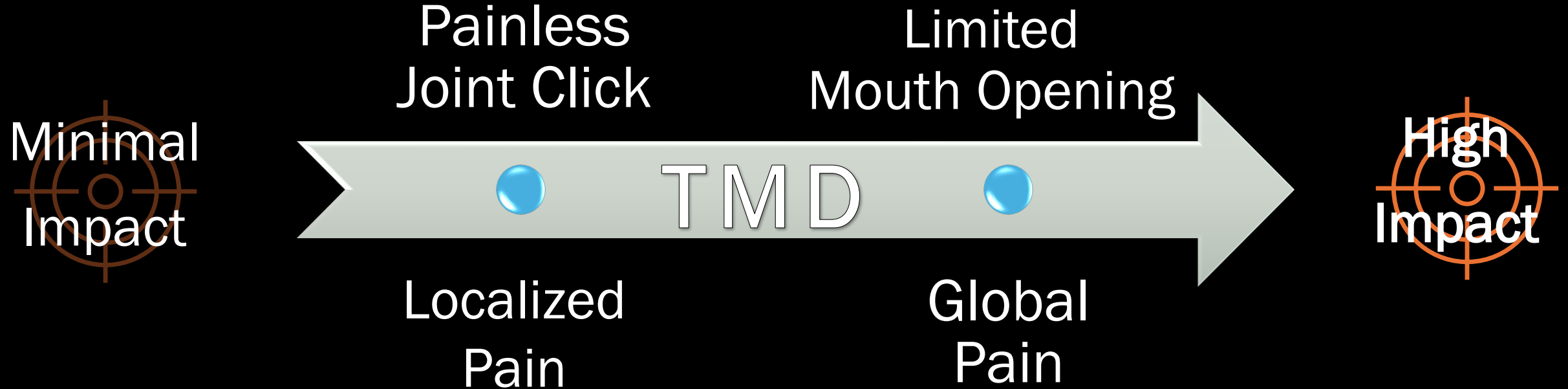
Prevalence

~Twelve million U.S. adults

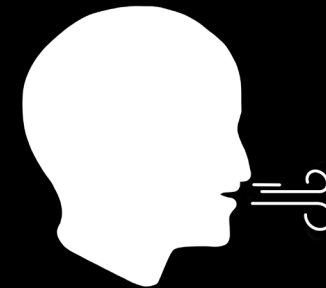
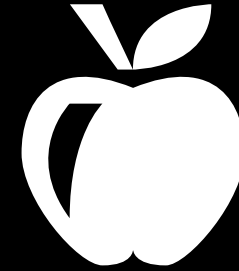
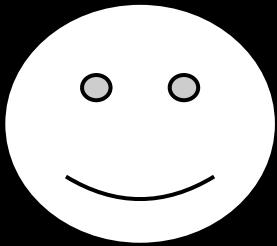
4% annual incidence

19% subclinical symptom incidence

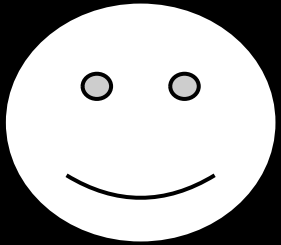
Impact (1 of 4)



Impact (2 of 4)



Impact (3 of 4)



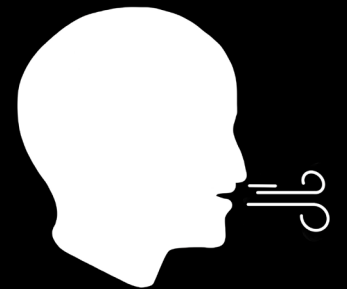
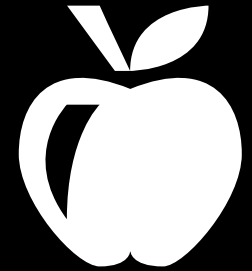
Focus & Concentration

Operational mishaps

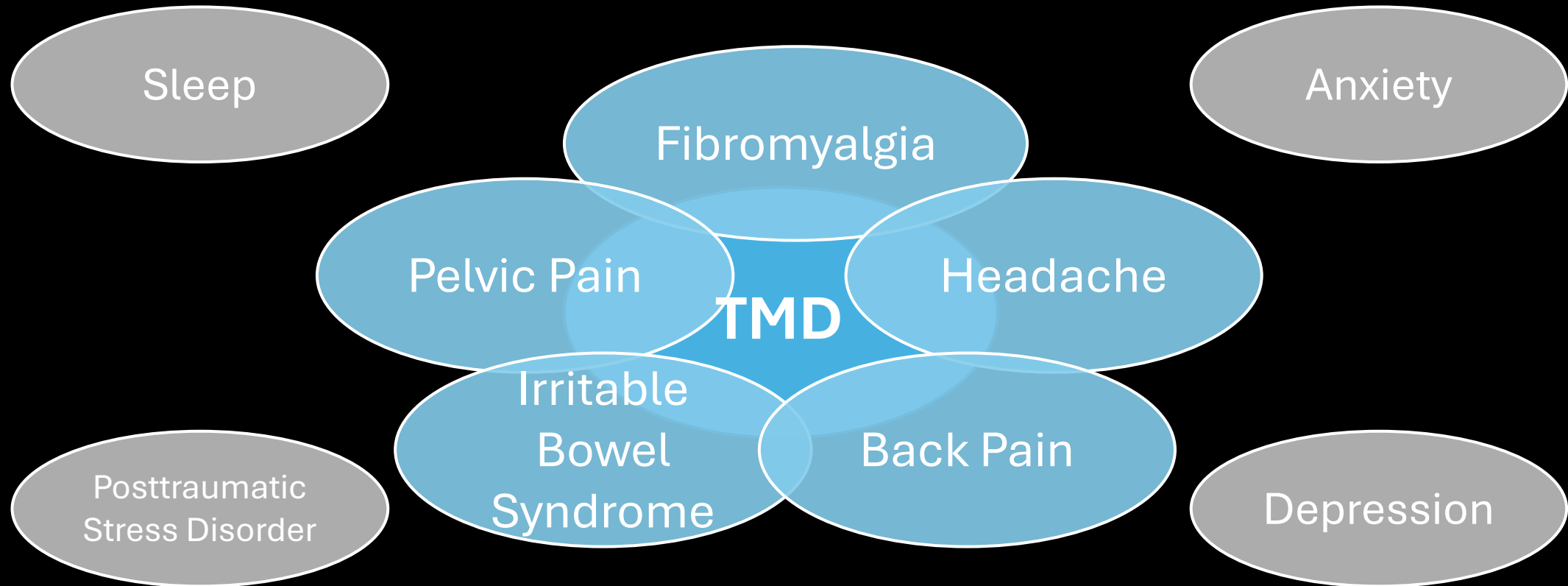
Wearing protective gear

Briefings

Leadership



Impact (4 of 4)



Polling Question 3

Have you knowingly evaluated a patient with a TMD in your practice?

- Yes
- No

Learning Objectives (#1)

At the conclusion of this activity, participants will be able to:

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4. Outline when and how to refer orofacial pain (OFP) and TMD patients.

Screening Your Patients

Brief TMD Screener

In the last 30 days:

1. Which of the following best describes any pain in your jaw or temple area on either side?
 - ☐ No pain
 - ☒ Pain comes and goes
 - ☒ Pain is always present

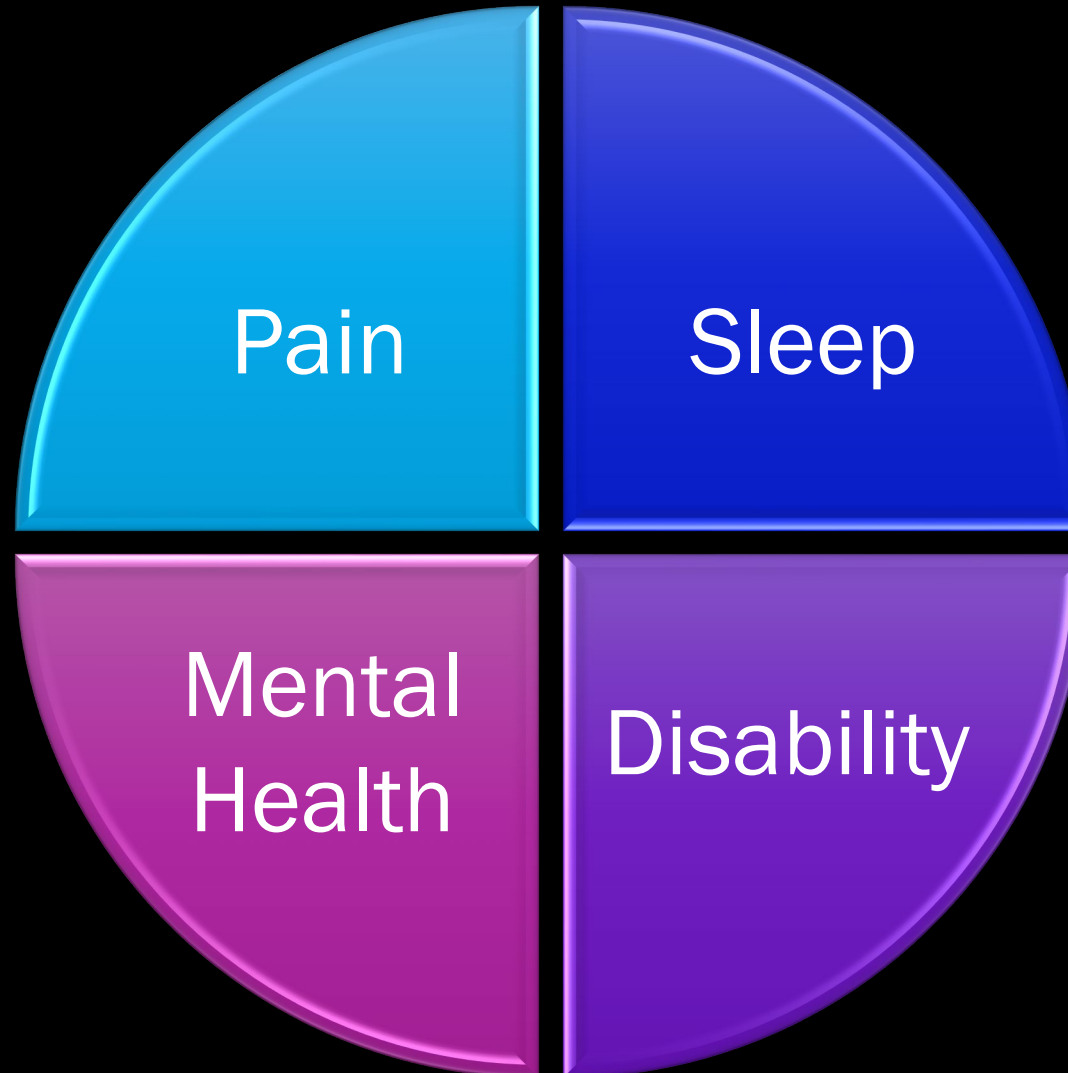
2. In the last 30 days, have you had pain or stiffness in your jaw on awakening?
 - ☐ No
 - ☒ Yes

Brief TMD Screener

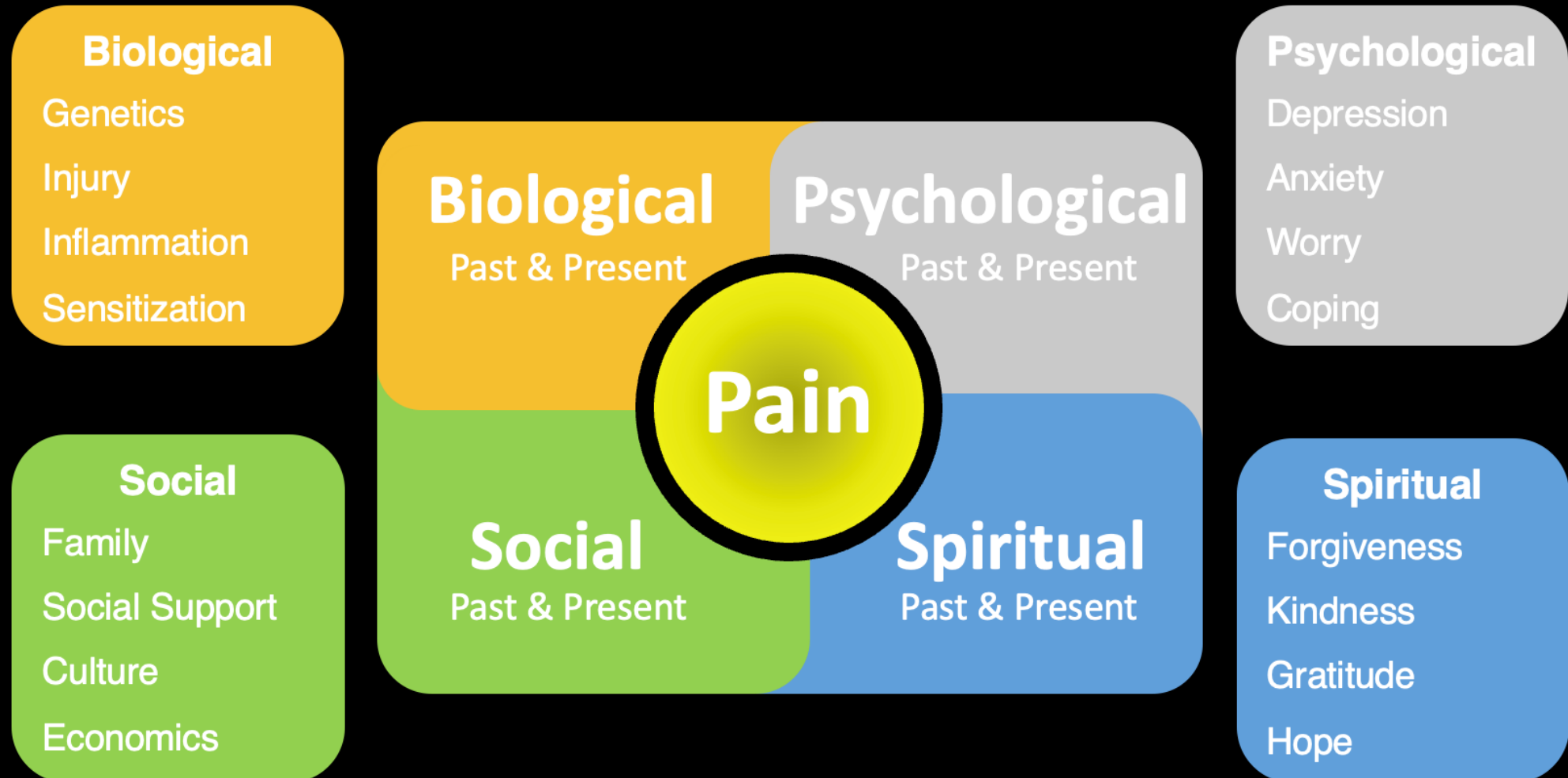
In the last 30 days:

3. Did the following activities change any pain (better or worse) in your jaw or temple area on either side?
- No
 - Yes
- a. Chewing hard or tough food
 - b. Opening your mouth or moving your jaw forward or to the side
 - c. Jaw habits (holding teeth together, clenching/grinding, or chewing gum)
 - d. Other jaw activities such as talking, kissing, or yawning

TMD Screening



BioPsychoSocialSpiritual Model



TMD Impact

E njoyment

G eneral activity

O perational impact

0 1 2 3 4 5 6 7 8 9 10

TMD Screening Resources



<https://ubwp.buffalo.edu/rdc-tmdinternational/>

TMD Symptom Questionnaire

Oral Behaviors Checklist

Jaw Function Limitation Scale

Graded Chronic Pain Scale

Patient Health Questionnaire (Depression)

Generalized Anxiety Disorder (Anxiety)

TMD Screening Resources

Sleep

Single-Item Sleep Quality Scale

Epworth Sleepiness Scale

STOP-BANG (OSA risk factors)

During the past seven (7) days, how would you rate your sleep quality?

0 = Terrible

1-3 = Poor

4-6 = Fair

7-9 = Good

10 = Excellent

STOP-BANG: Snoring,
Tiredness, Observed apnea,
Pressure, BMI, Age, Neck,
Gender
BMI: Body mass index
OSA: Obstructive Sleep Apnea

TMD Screening Resources

Sleep

Snoring

BMI

Tiredness

Age

Observed apneas

Neck size

Pressure

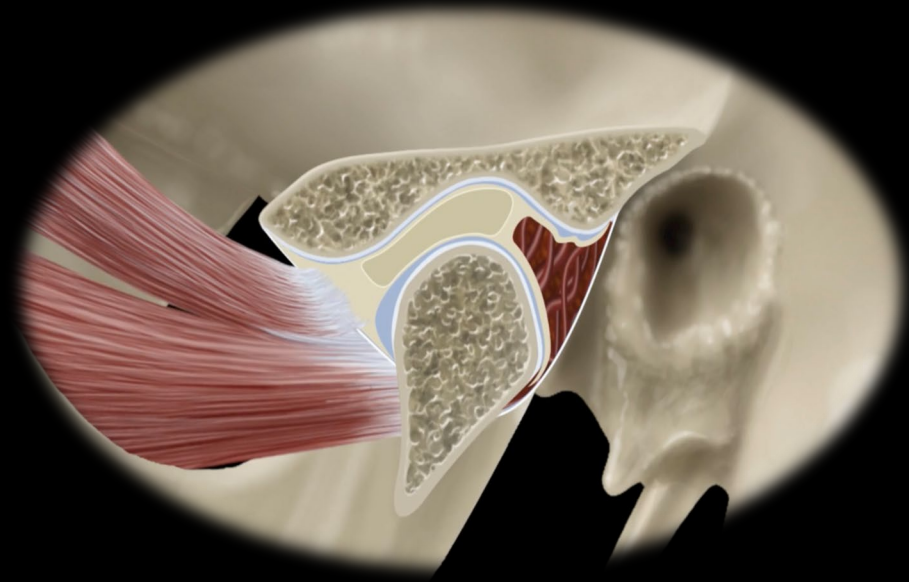
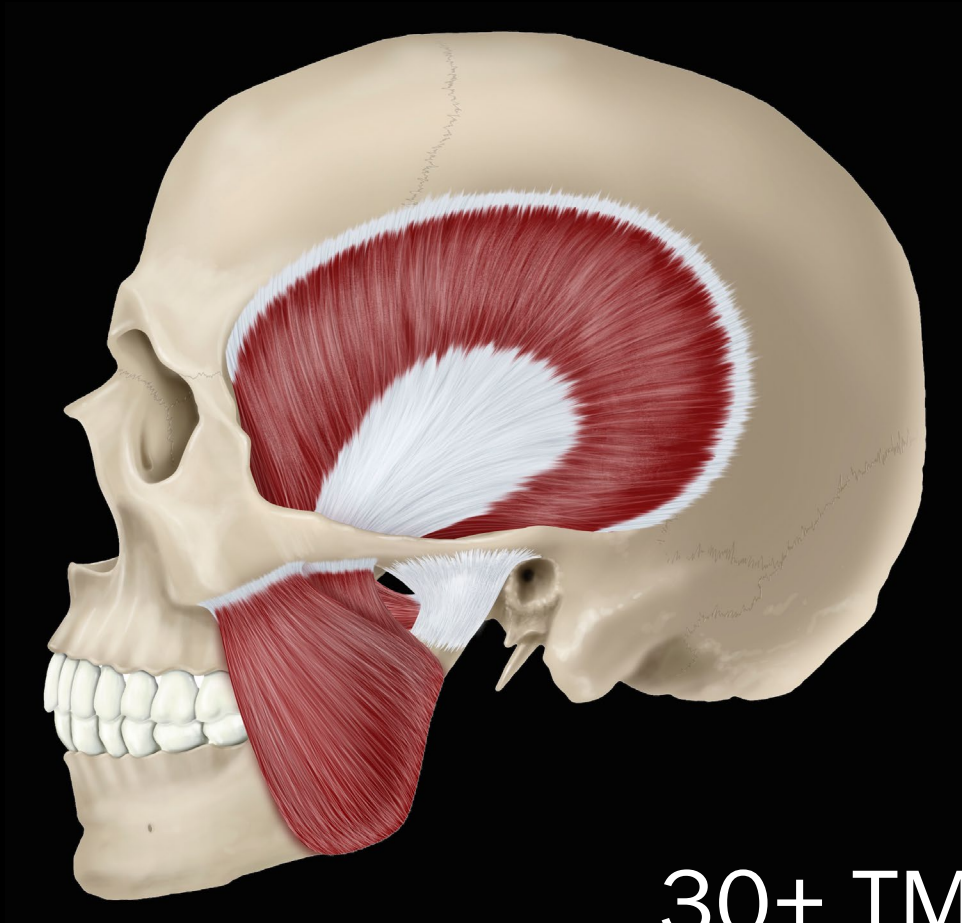
Gender

Learning Objectives (#2)

At the conclusion of this activity, participants will be able to:

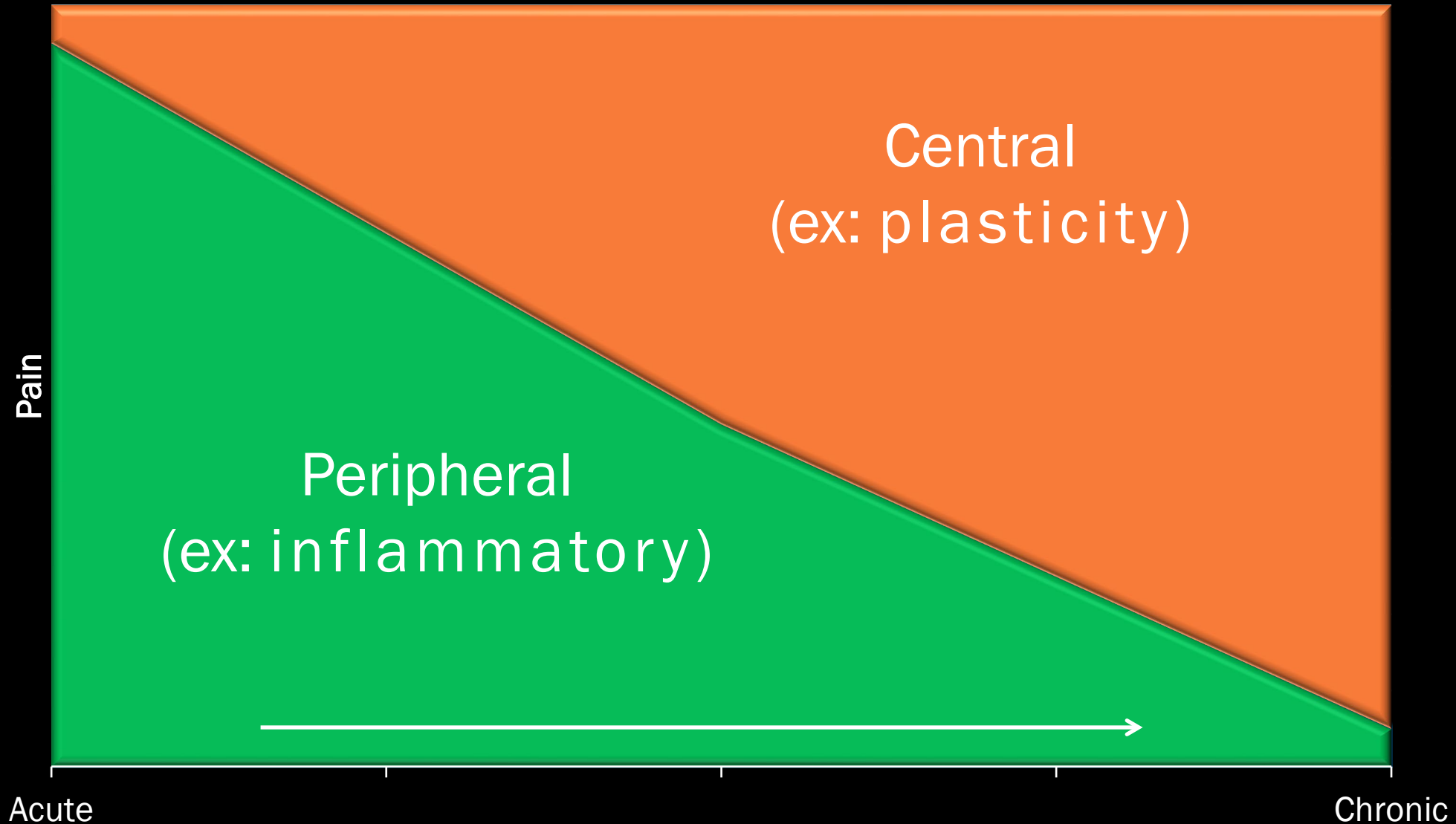
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Diagnostic Categories



30+ TMD Diagnoses

Acute or Chronic?



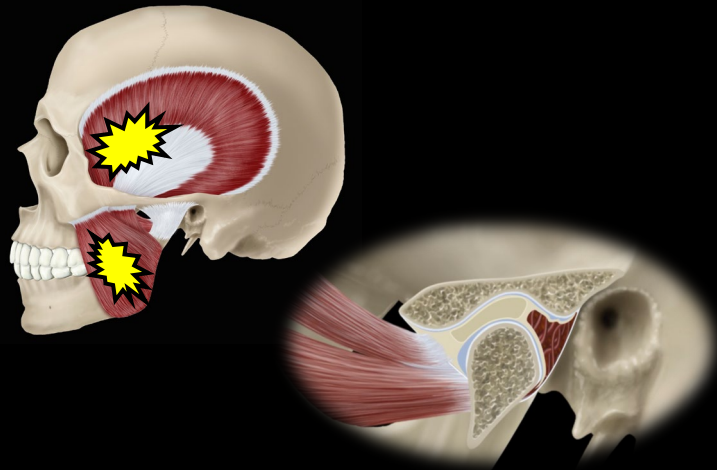
(Hawkins, 2023)

Local or Widespread?

Myalgia / Temporomandibular
Joint (TMJ)

Myofascial Pain

Fibromyalgia



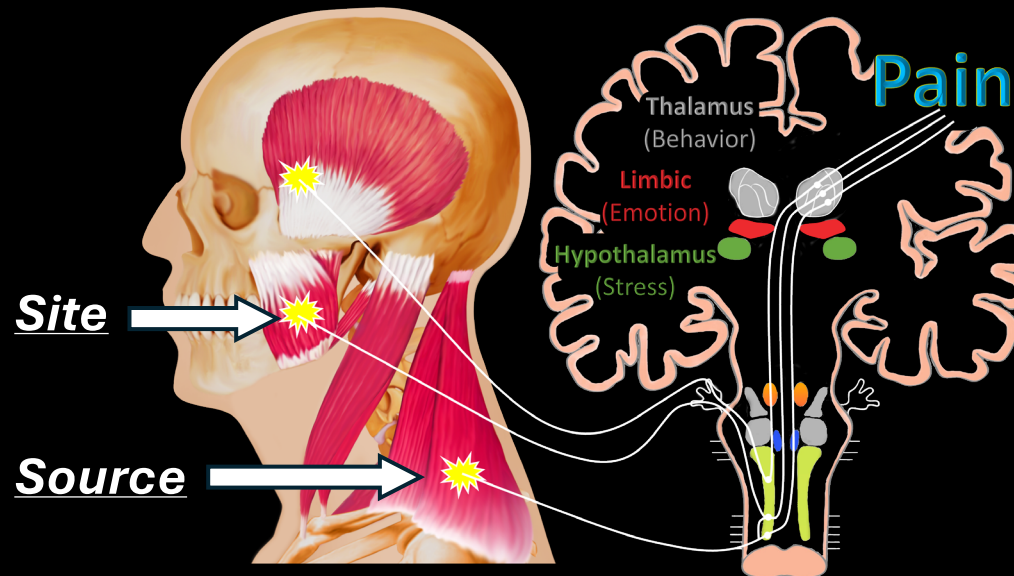
33%

Local or Widespread?

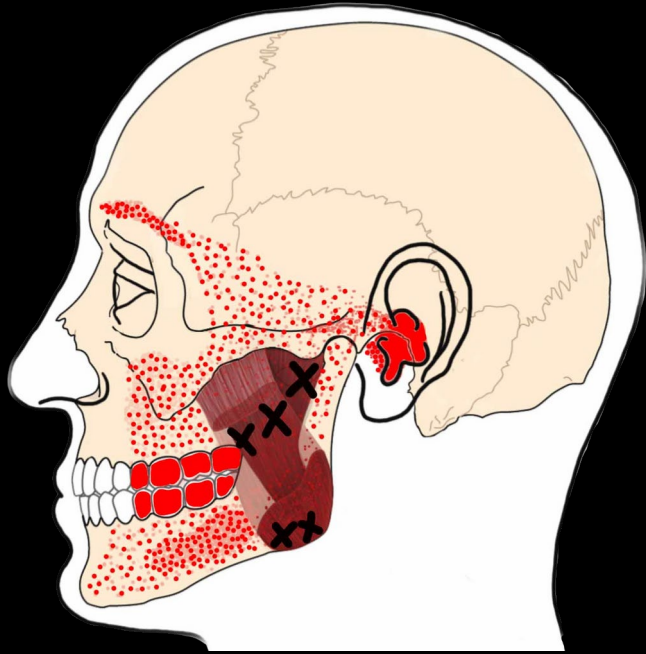
Myalgia

Myofascial Pain

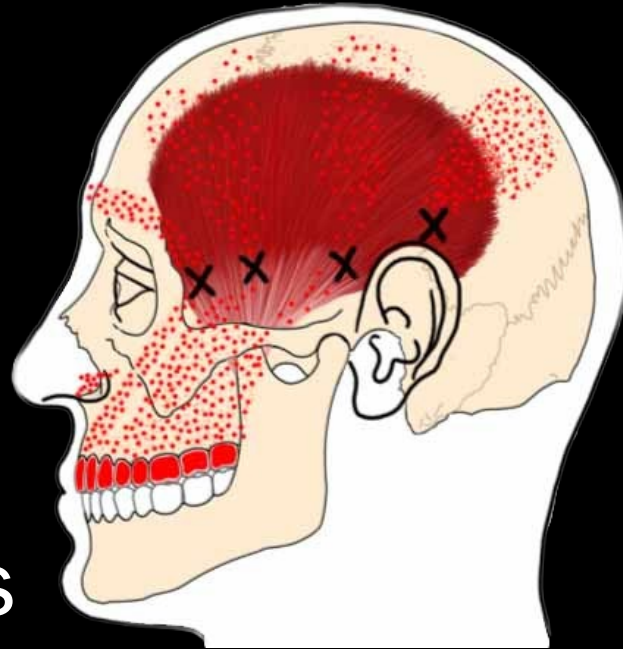
Fibromyalgia



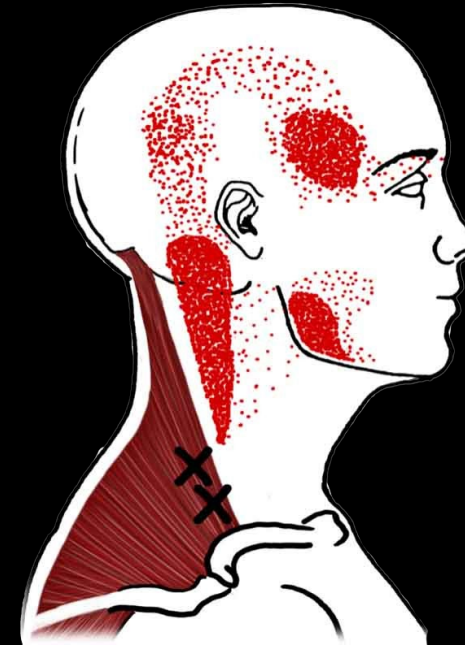
Myofascial Pain



Masseter



Temporalis



Trapezius

Sternocleido-
mastoid muscle

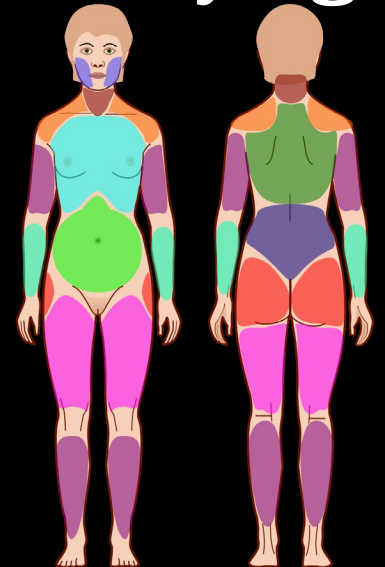


Local or Widespread?

Myalgia

Myofascial Pain

Fibromyalgia



([Jmarchn](#), 2016)

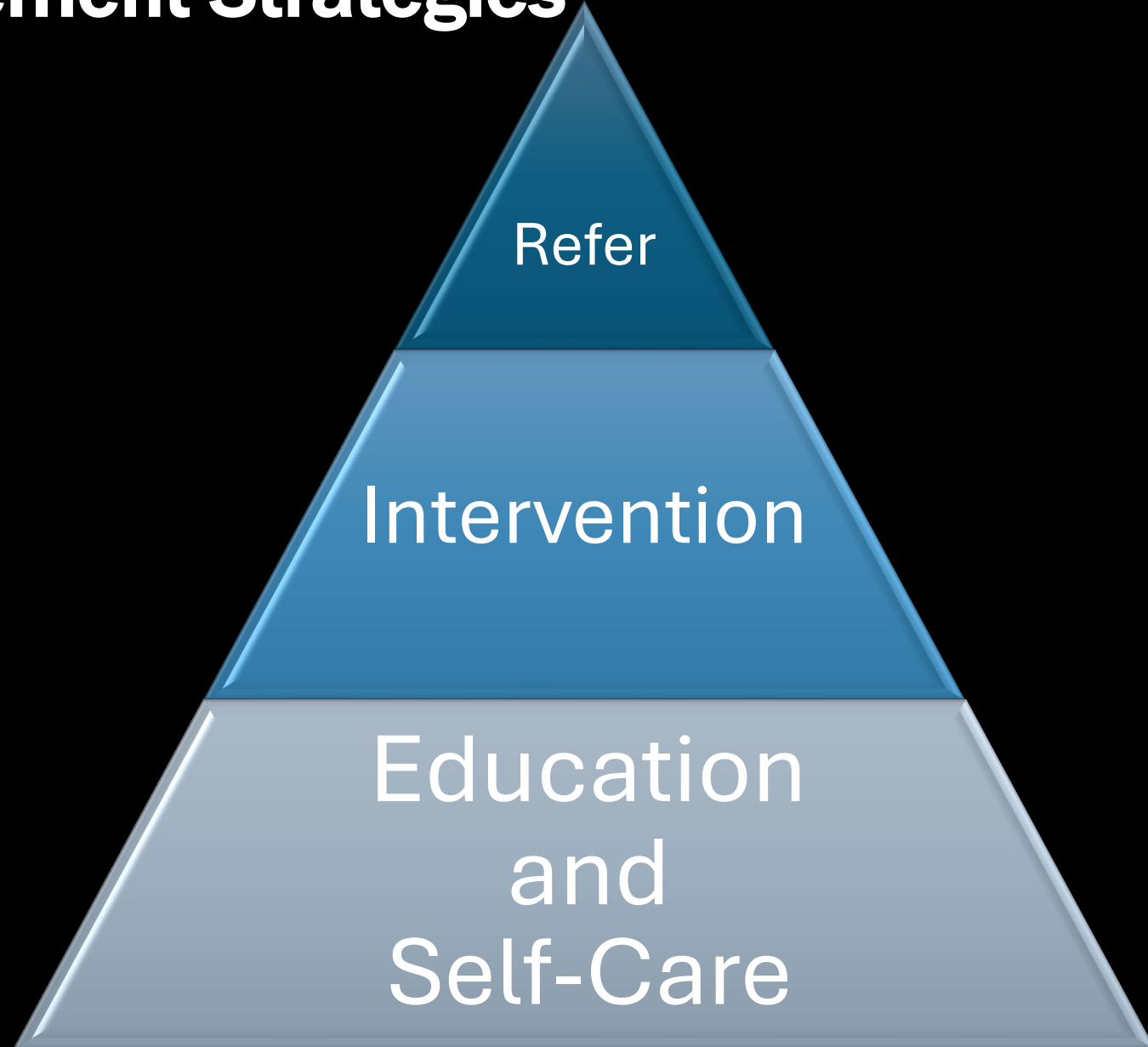
Learning Objectives (#3)

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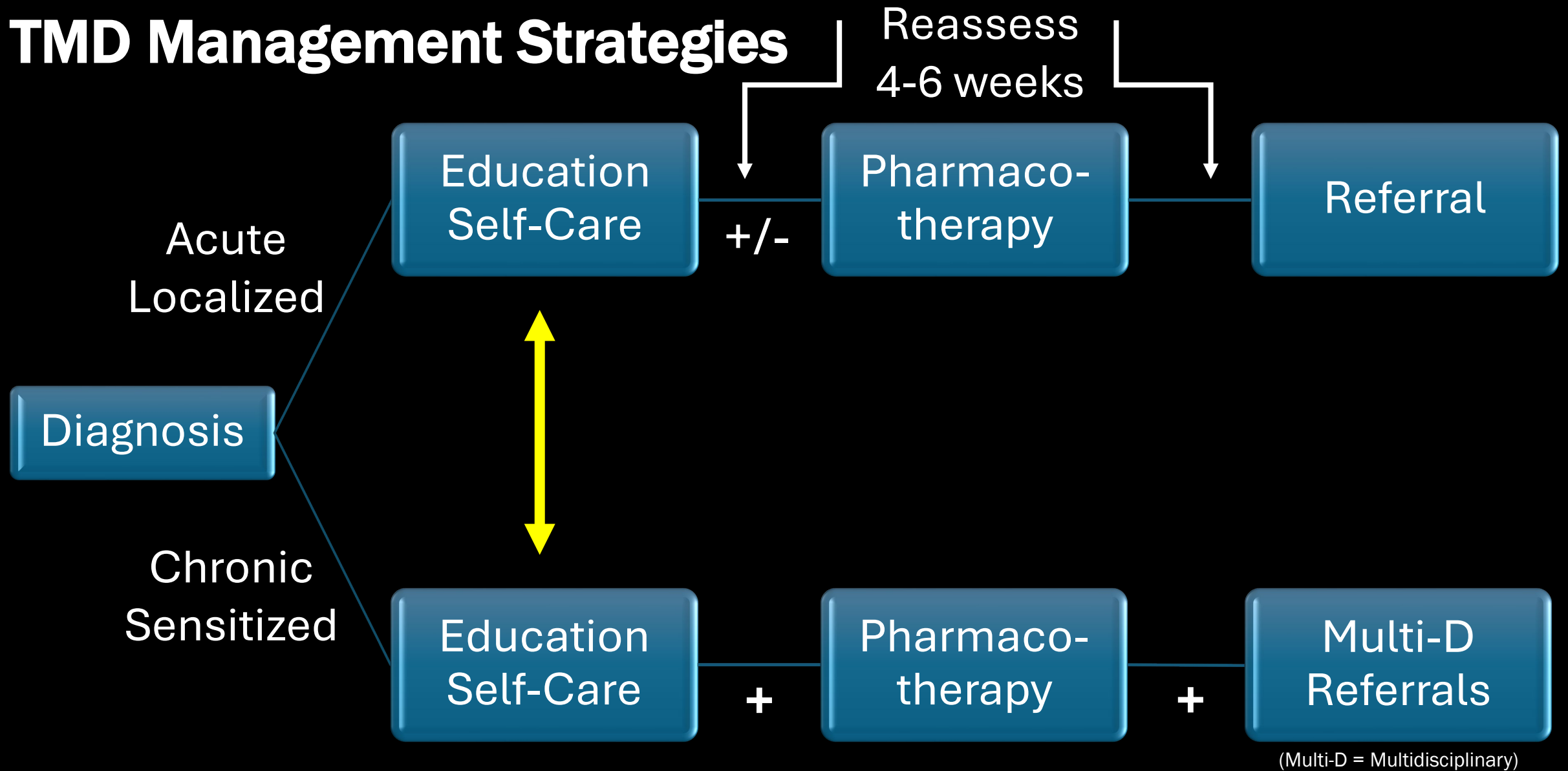
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TMD Management Strategies

TMD Management Strategies



TMD Management Strategies

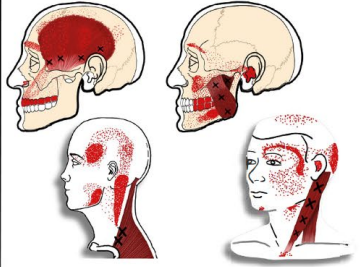


Education

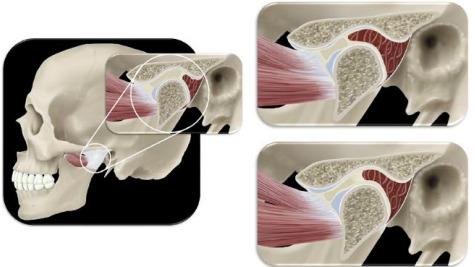
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DIAGNOSIS


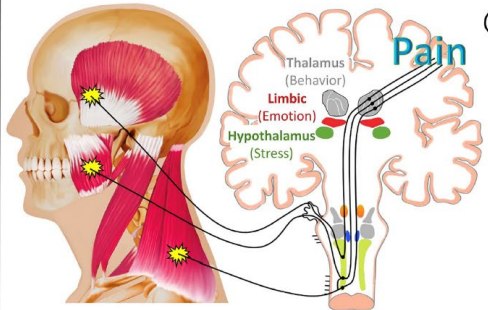
Muscle Pain



TMJ Disorder




RISK FACTORS




Emotional Trauma
Grief PTSD
Unforgiveness
Stress
Depression
Physical Trauma
TBI Anxiety
Fear Abuse
Doesn't say No

Always on Guard




MANAGEMENT

-Rehabilitation involves a team approach between you and your doctors
-Referrals to appropriate specialists may be beneficial to your overall care

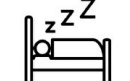


Self-Care


-Healthy lifestyle behaviors & modifying risk factors are very important




Maintain a Position of Rest




Practice Healthy Sleep Hygiene




Healthy Nutrition & Hydration



Minimize Stimulants

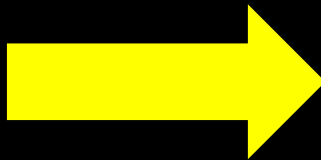


Breathe



Exercise

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Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

Position of Rest

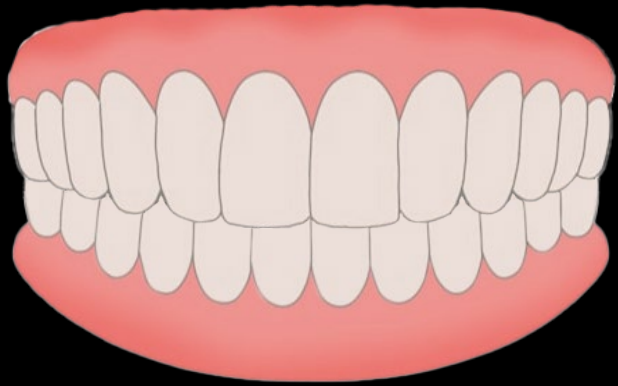
Teeth Apart

Tongue Relaxed

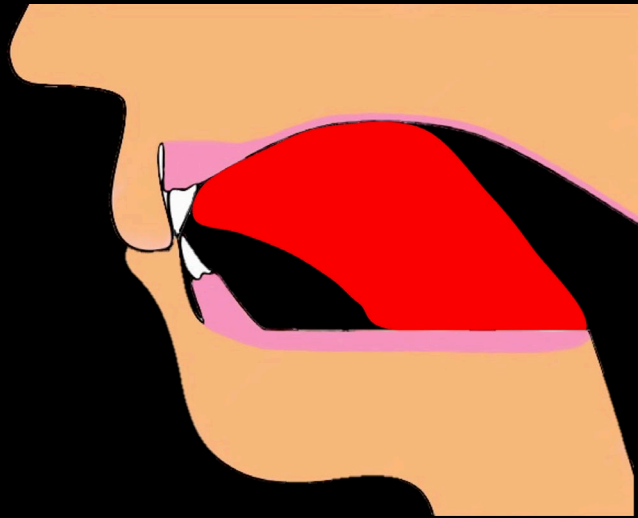
Face Relaxed

Position of Rest

Teeth Apart



Tongue Relaxed



Face Relaxed



Polling Question 4

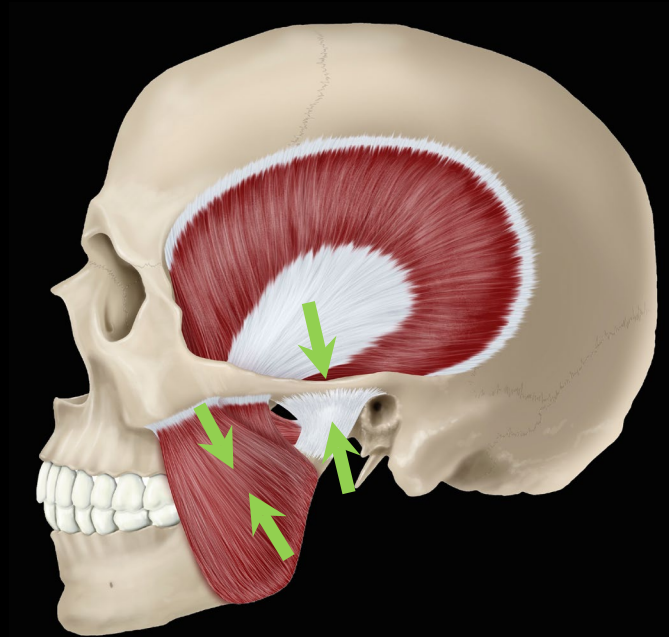
Are your teeth together now?

- Yes
- No

Position of Rest

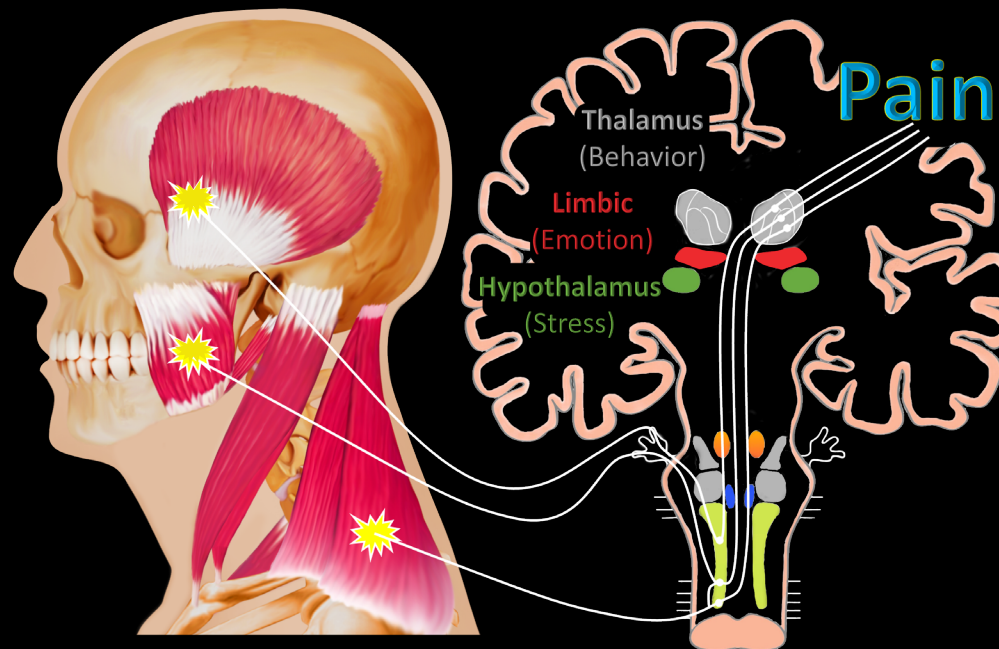
Decrease Masticatory Muscle Overuse

Decrease TMJ Loading



Position of Rest

Decrease Unhealthy Trigeminal Input



Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact and tongue position

Feel masseter and temporalis muscles

Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact and tongue position

Feel masseter and temporalis muscles

Why is it important to change

Explain how it affects pain and impairs healing

Sprinter versus Marathoner

Fist



Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact & tongue position

Feel masseter & temporalis muscles

Why is it important to change

Explain how it affects pain and impairs healing

Knowing how to change the habit

Teeth slightly apart

Tongue relaxed in the floor of the mouth

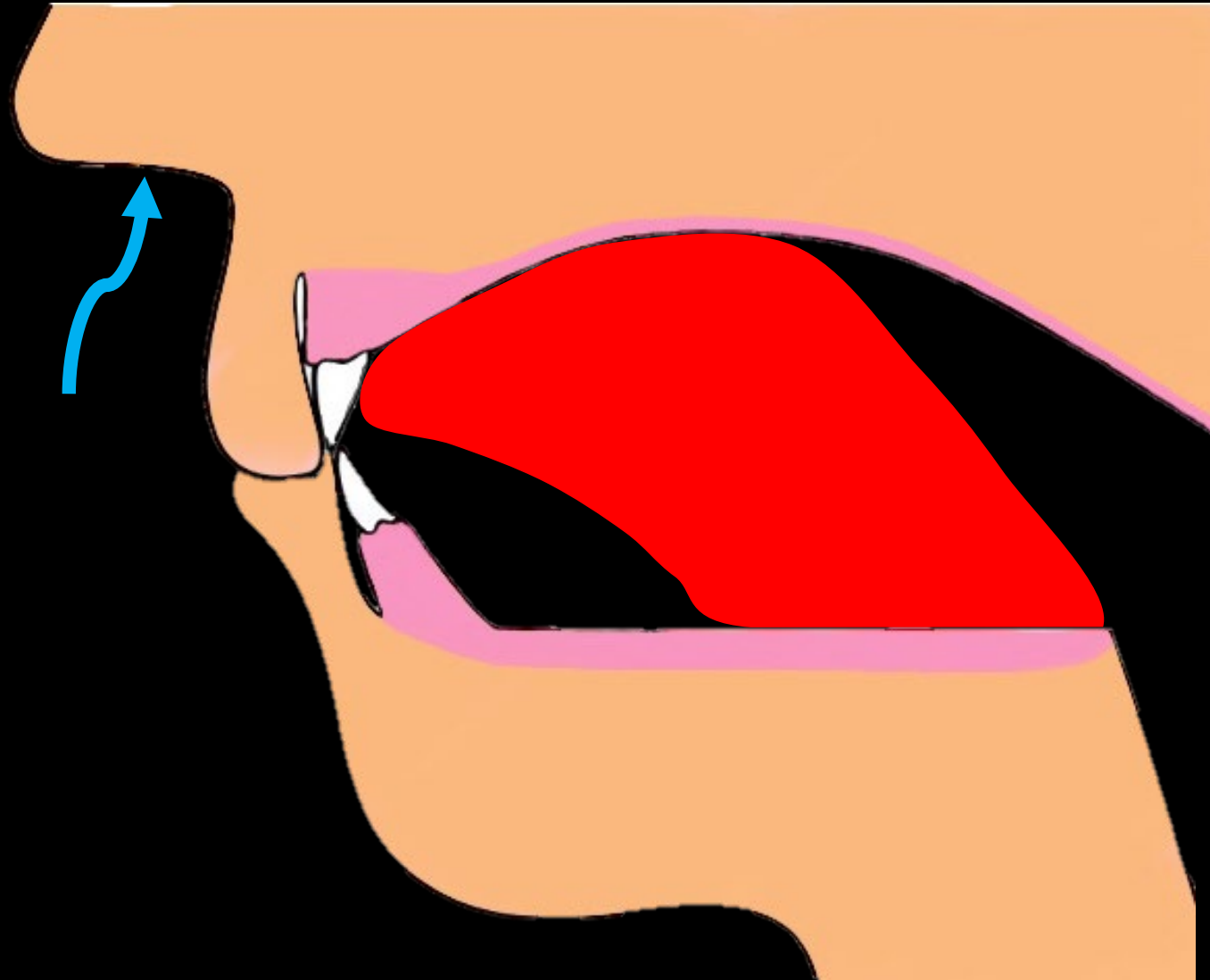
Face relaxed

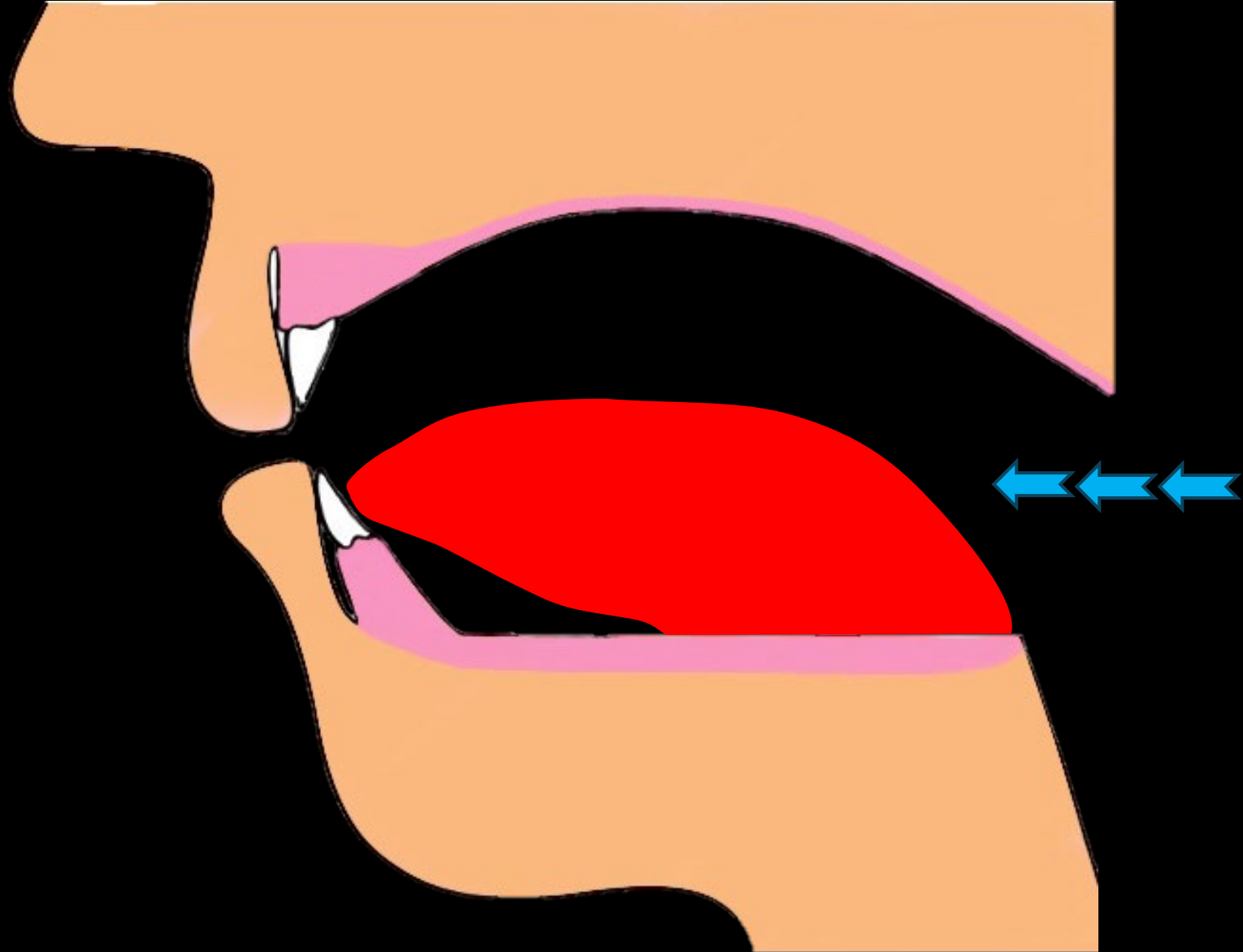


Position

Say “M” or three (3) puffs of air

Oral Habit Modification





Position of Rest

Use a Reminder

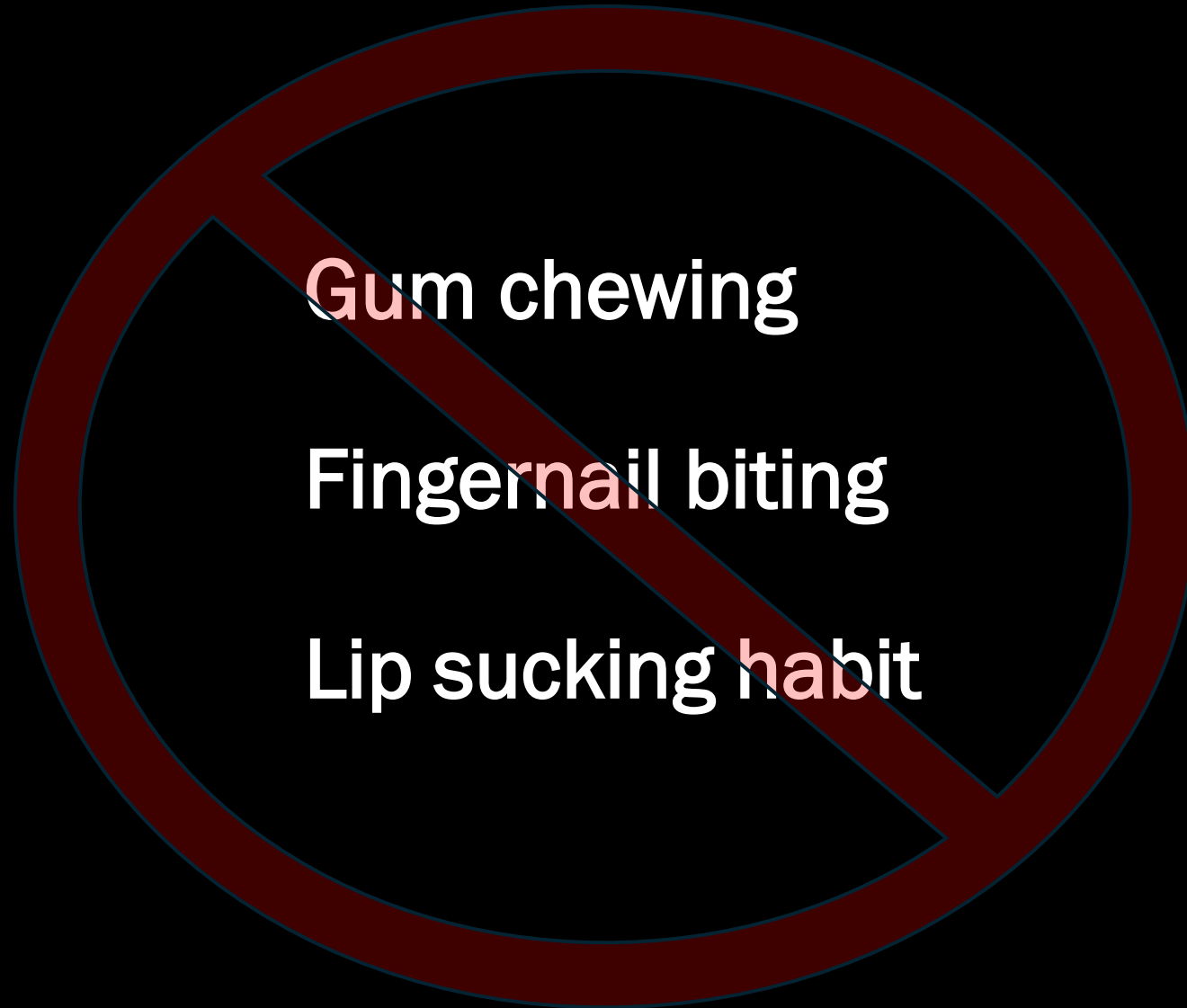
Reinforce changing the habit

1. Forced rest periods
2. Improve muscle memory (neuroplasticity)

App, timer, sticky note, rubber band, etc.



Position of Rest



Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

Improve Blood Flow

Heat

Apply Moist Heat

2-4 times per day

3-5 minutes

Massage

Gentle Circles

2-4 times per day

1-2 minutes

Movement

Gentle & Controlled

Open / Side-to-Side

30 seconds per hour

Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

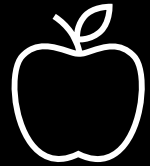
Diet Modification

Breathing

Exercise

Diet Modification

Softer & smaller bites



Healthy nutrition & hydration



Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

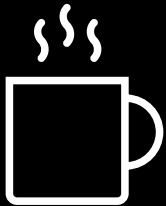
Exercise

Risk Factor Reduction

Smoking



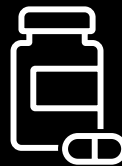
Caffeine



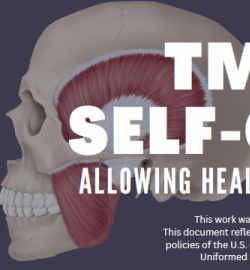
Alcohol



Medication



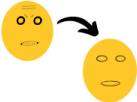

Resources



TMD SELF-CARE



ALLOWING HEALING TO OCCUR


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REST POSITION

Teeth Apart
Tongue Relaxed
Face Relaxed
Neck & shoulders relaxed

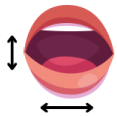
Use a Reminder  



APPLY HEAT & MASSAGE

Place heat on the painful muscles
2-4 x per day for 3-5 minutes

Gently massage the muscles






GENTLE MOVEMENT

Gently move your mouth
up & down, side to side

Stretch using your fingers,
but do not increase your pain


Learn to listen to your body



CAUTION

Be mindful when using your jaw:

- Avoid gum, nail biting, etc
- Minimize aggravating foods
- Avoid stimulants



TAKE BREAKS

Take a break from your daily tasks:

- Belly breathe
- Go for a walk
- Stretch

Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

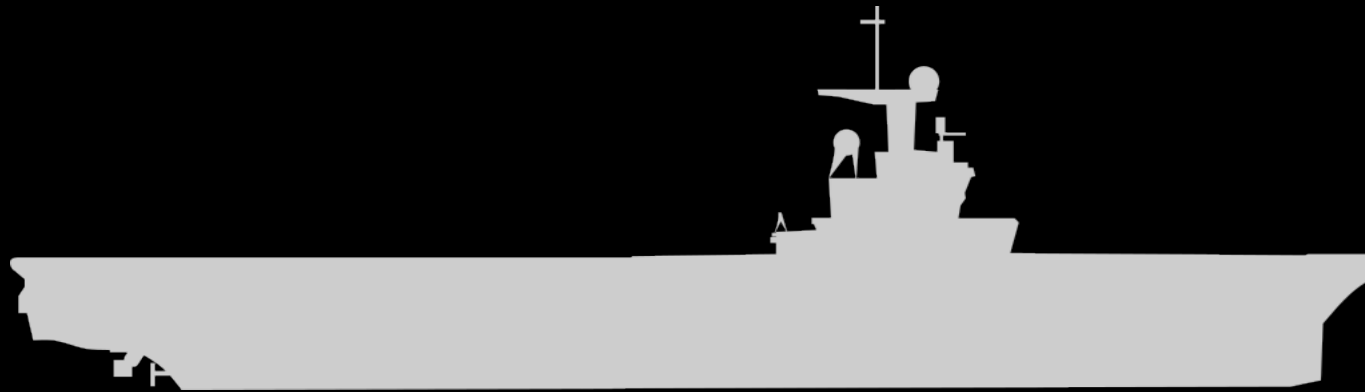
Breathing

Exercise

Sleep Hygiene

“Strong sleep hygiene means having both a bedroom environment & daily routines that promote consistent, uninterrupted sleep.”

SleepFoundation.org



Sleep Hygiene

Nighttime

Consistent bed and wake times

Relaxing pre-bedtime routine

Stimulus control

- Light (natural and artificial)

Temperature regulation (65°F)

Don't fight it

Sleep position

Daytime

Get some sun

Be physically active

Minimize

Caffeine and other stimulants

Alcohol

Late / large meals

Naps

Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

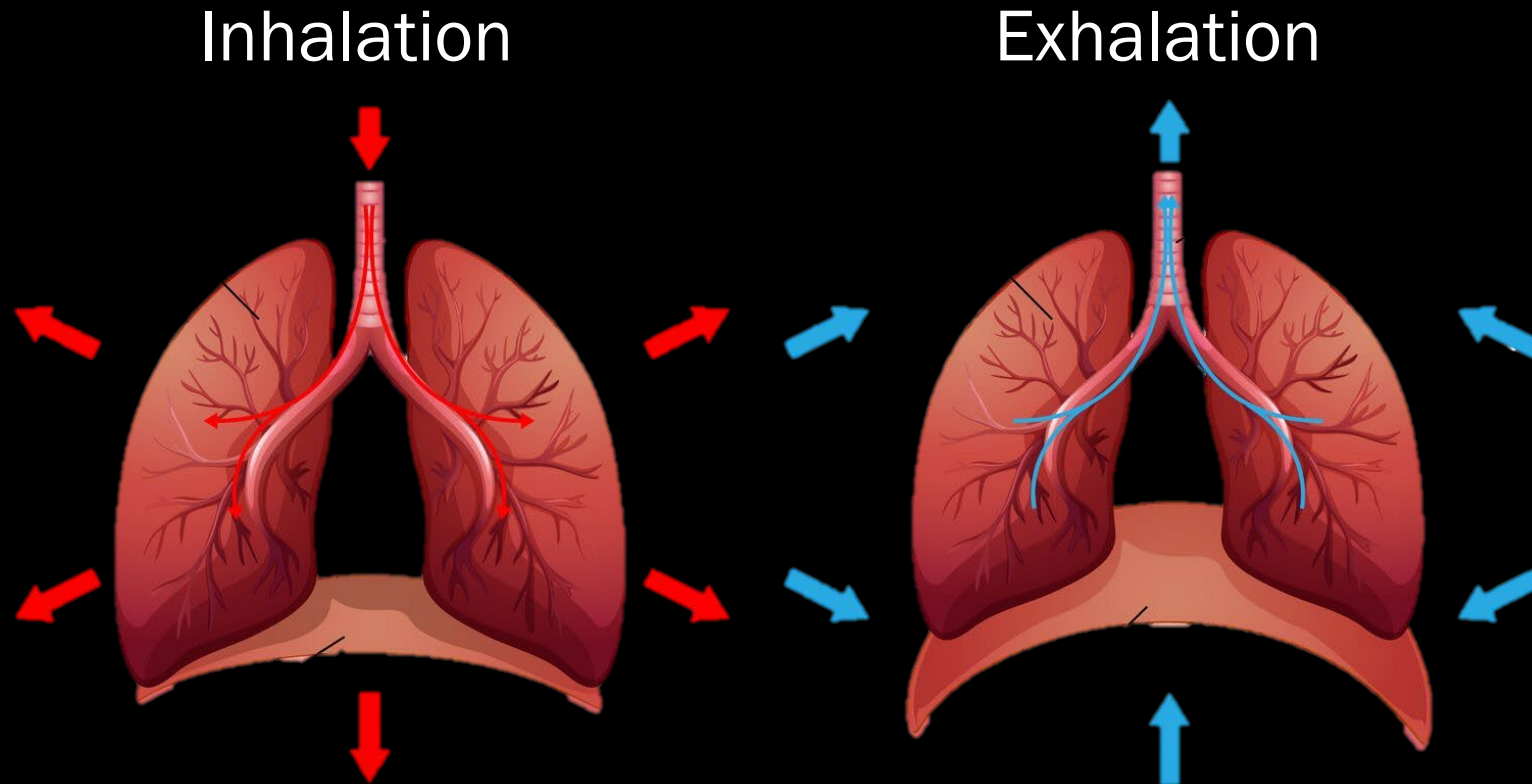
Sleep Hygiene

Diet Modification

Breathing

Exercise

Breathing



Michigan Medicine

Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

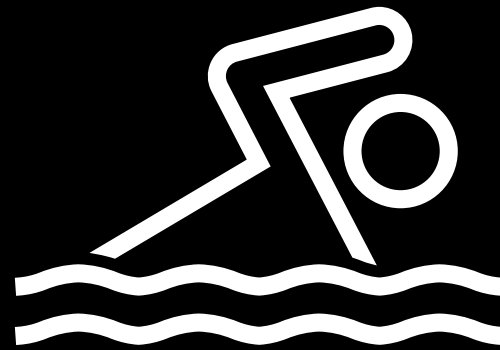
Sleep Hygiene

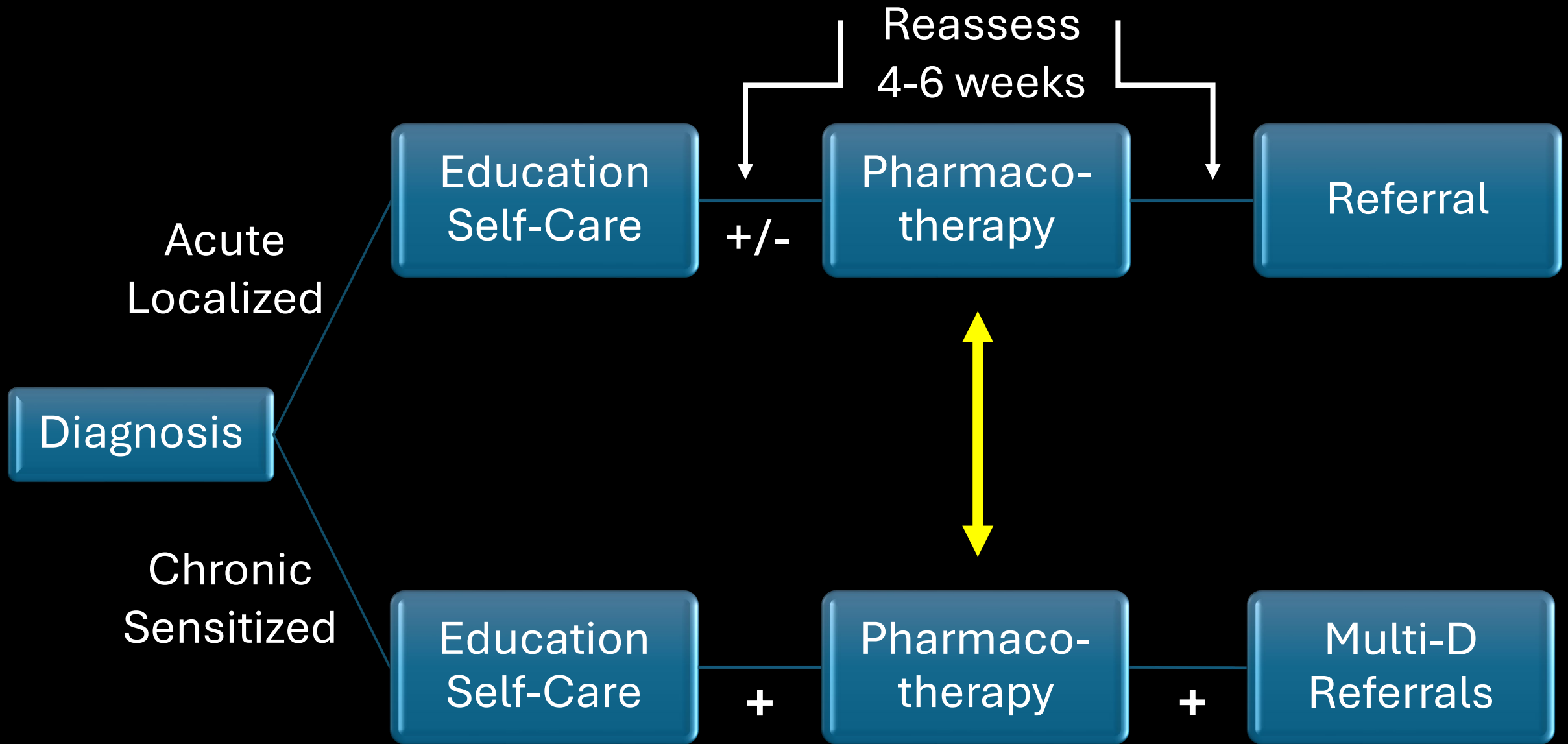
Diet Modification

Breathing

Exercise

Exercise



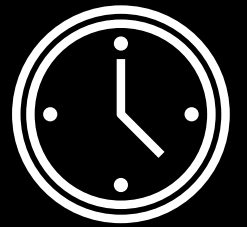


Acute Localized

Anti-inflammatories

Nonsteroidal Anti-inflammatories (NSAIDs)

Corticosteroids

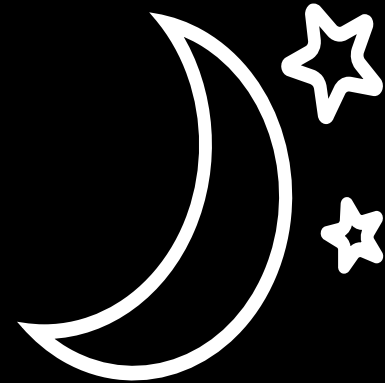
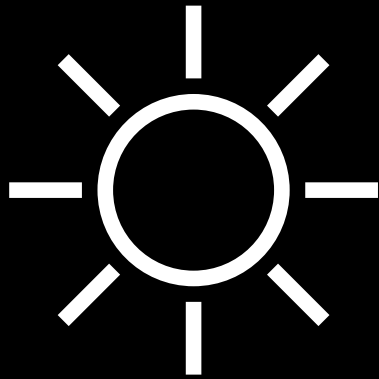


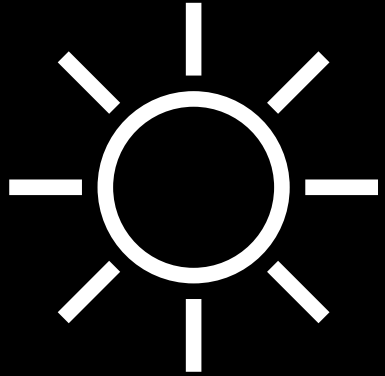
Analgesics

Alternative: Acetaminophen

Not for long-term use

Muscle Relaxants

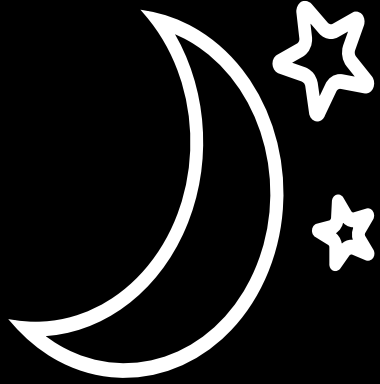




Muscle Relaxants

Methocarbamol: 500 - 1,500mg two to three (2-3) times per day

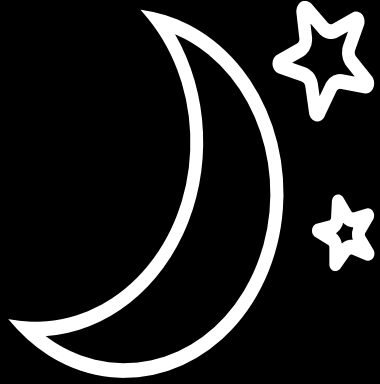
Metaxalone: 800mg three to four (3-4) times per day



Muscle Relaxants

Cyclobenzaprine: 5 - 10mg two (2) hours before bed

Tizanidine: 2 - 4mg two (2) hours before bed

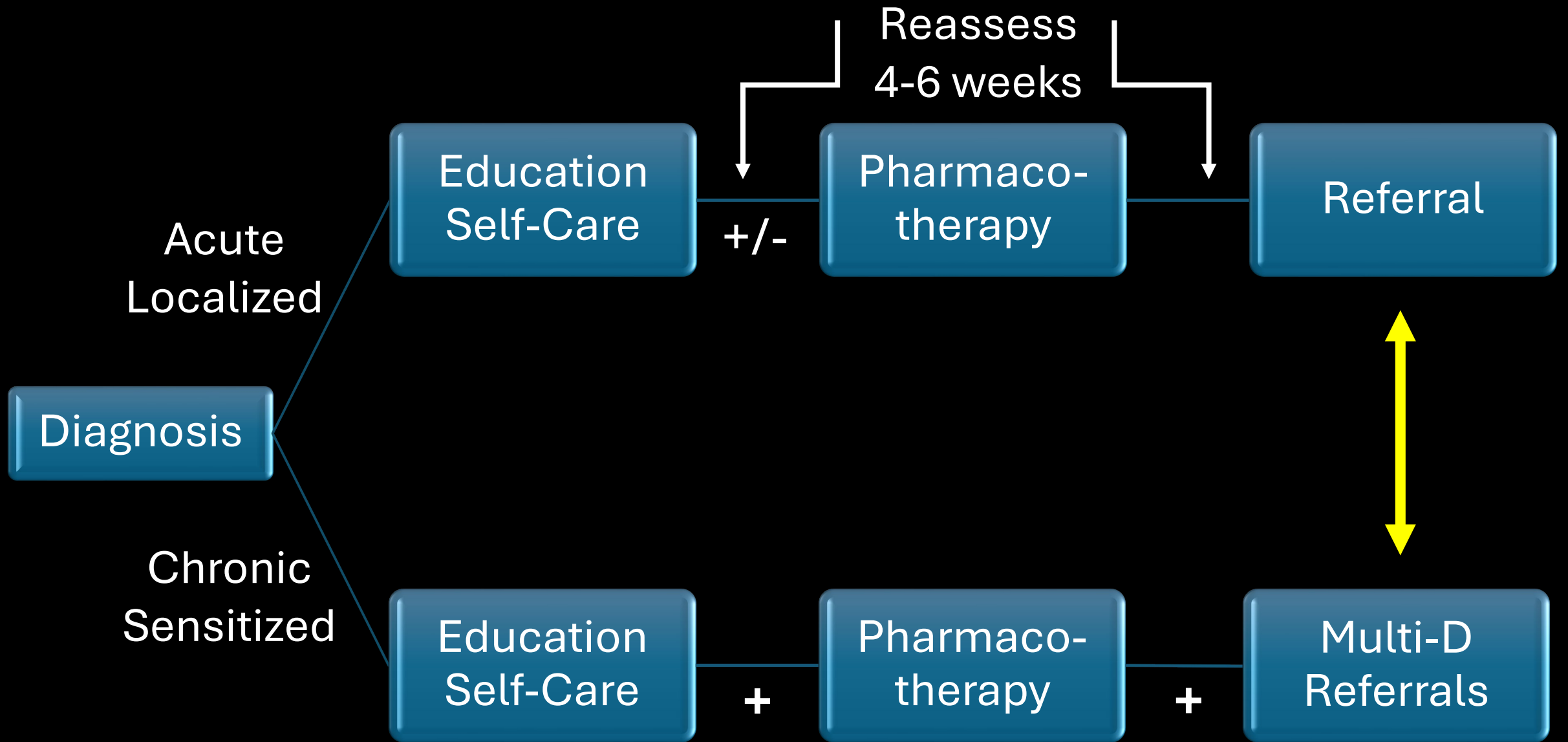


Others

Tricyclic Antidepressants

Serotonin-Norepinephrine Reuptake Inhibitors

Gabapentinoids



Learning Objectives (#4)

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1. Summarize how to screen patients for temporomandibular disorders (TMD) and comorbidities.
2. Differentiate TMD diagnostic categories and risk categories.
3. Describe self-care techniques to help rehabilitate TMD.
4. Outline when and how to refer orofacial pain (OFP) and TMD patients.

Refer

1. Secondary Cause
2. Further Evaluation
3. Multidisciplinary TMD Management

Refer

Secondary Cause
Further Evaluation

Emergency Room – SNOOP4, Cardiac, etc.

Neurology – Headache, neuralgia / neuropathy

ENT – Ear or throat disorder, salivary gland issue

Rheumatology – Connective tissue / autoimmune

Sleep Medicine – Apnea or other sleep disorder

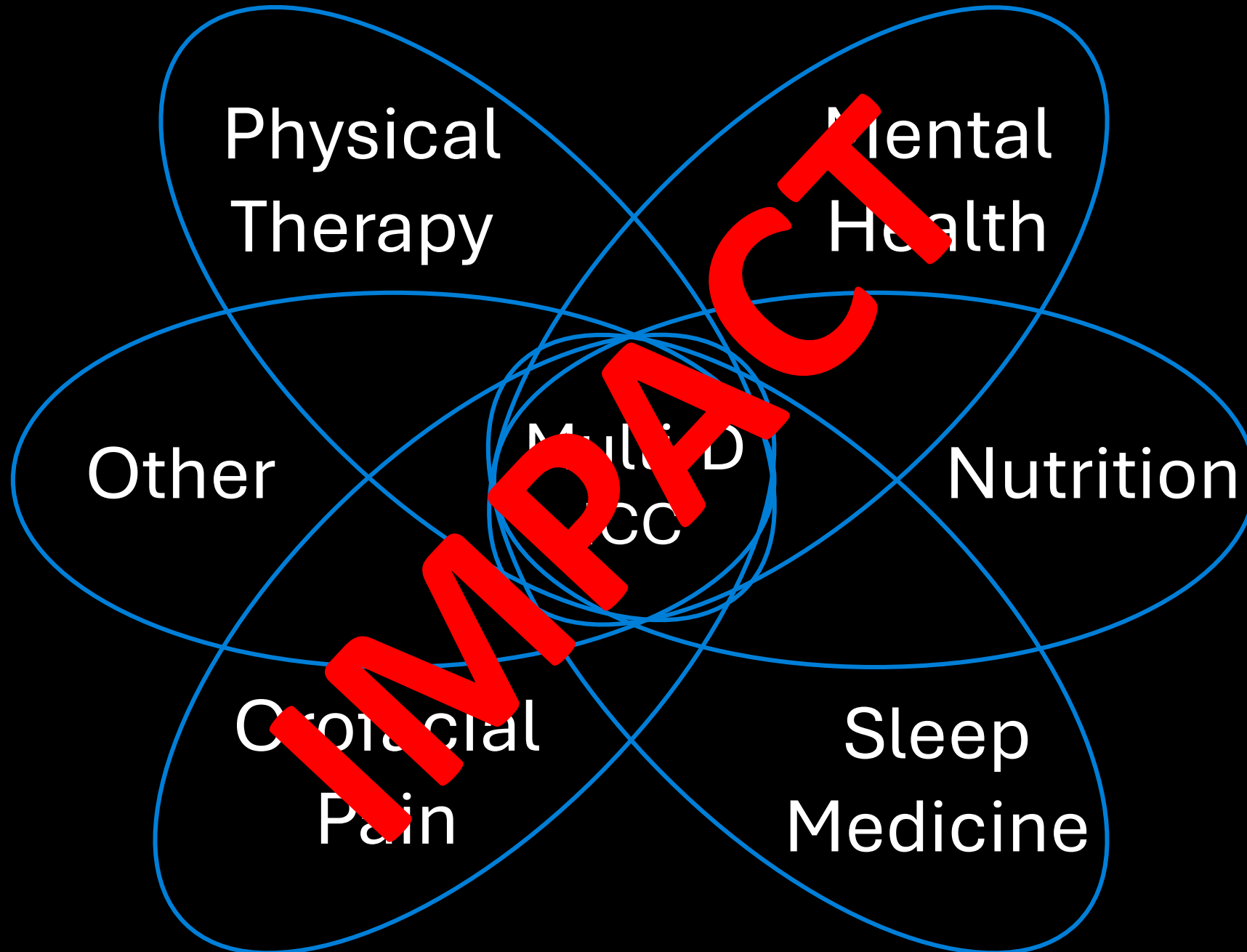
Dental – Tooth or other intraoral pain

Oral Surgery – Facial trauma, TMJ tumor

SNOOP4: systemic symptoms, neurological signs, onset, older age at onset, and postural component
ENT: ear, nose, and throat

Refer

1. Secondary Cause
2. Further Evaluation
3. Multidisciplinary TMD Management



(ICC = Initial Care Clinician)

(Hawkins, 2023)

Referrals to OFP

OFP locations



Okinawa

OFP Community

- Eleven (11) practicing Active-Duty providers (one civilian)
 - Seven (7) Navy
 - One (1) Army
 - Three (3) Air Force
- Currently six (6) in training
 - Two (2) Navy
 - Two (2) Air Force
 - Two (2) Army

Specialty Training in Orofacial Pain

- Primary military training program at Naval Postgraduate Dental School (NPDS)
 - 3-year residency
 - 2-year fellowship

Referral Processes

Patient Pools (Dental)

1. Click “communicate”
2. In “To” line select “Pool”, then “Walter Reed NPDS Orofacial Pain”
3. Select “MESSAGING and SCHEDULING” tabs; Add; Ok
4. Refer to Clinic 0067 Walter Reed Orofacial Pain Clinic for

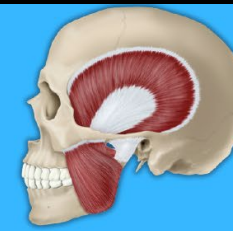
Referral 2.0 (Medical)

1. Dental, Adjunctive Care
2. Refer to Clinic 0067 Walter Reed Orofacial Pain Clinic for

IMPACT

Temporomandibular Disorders Education

For Initial Care Clinicians



Module 1

Understanding TMD

- ✓ Prevalence & Impact
- ✓ TMD Anatomy
- ✓ Pain Physiology
- ✓ Comorbidities & Risk Factors

Module 2

TMD Assessment

- ✓ TMD Screening
- ✓ TMD History Taking
- ✓ TMD Examination
- ✓ Diagnostic Testing

Module 3

TMD Diagnosis

- ✓ Muscle Diagnoses
- ✓ TM Joint Diagnoses
- ✓ TMD Mimickers

Module 4

TMD Management

- ✓ First Line Management Strategies
- ✓ TMD Self-Care & Sleep Hygiene
- ✓ Initial Pharmacotherapy
- ✓ Referrals & Multidisciplinary Care

Learn high-value strategies to effectively care for TMD patients in your primary care practice

DHA-US-1342

5-hours CE credit
Sequential Completion



DHA-US-1342-R

No CE Credit
Flexible Access

Learn high-value strategies to effectively care for TMD patients in your primary care practice

DHA-US-1342

5-hours CE credit
Sequential Completion



DHA-US-1342-R

No CE Credit
Flexible Access

Enhancing Temporomandibular Disorders Education for Initial Care
Clinicians through Interprofessional Education. *MedEdPORTAL*. (In Press)



History - Relevant Chief Complaint Information

Onset: _____ Trauma? Y / N Stressor @ Onset? Y / N

Previous Treatment: _____

Impact: Pain (Intensity): ____/10 Enjoyment (Interference): ____/10 General Activity (Interference): ____/10

Chief Complaint Description

| | |
|----------------------|--|
| Location | |
| Character | |
| Frequency / Duration | |
| Temporal Pattern | |
| Intensity | Now: /10 Avg: /10 |
| Aggravating | |
| Alleviating | |
| Associated Sx | |

Med History / Meds: _____

Perpetuating Factors: _____

Sleep Difficulties? Y/N _____ (Y - Sleep Quality: ____)

Sleep Hygiene: _____

Body Pain? Y/N Fibromyalgia, Head, Neck, Stomach, Pelvic, Back, Or

Psych/Social Vulnerability? Y/N _____ (Y - PHQ

Stress Level: (____/10) _____, Job: _____, Fam

Activity Level: _____

Oral Parafunction? Y/N Teeth Together Y/N, Tongue to Palate Y/N, I

Hydrated? Y/N, Nutrition: _____ Caffe

Examination

General Appearance: _____, Red fl:

Palpation Pain (Includes discomfort or tenderness)

| Muscle | Left | Right | Familiar | Referral (location) |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Masseter | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Temporalis | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Temporal Tendon | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TMJ (static/dynamic) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Trapezius | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SCM | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Jaw Range of Motion

Opening: Comfortable _____ mm

Unassisted _____ mm Painful? Y / N Familiar? Y / N

Assisted _____ mm Painful? Y / N Familiar? Y / N

Excursive:

Protrusive _____ mm Painful? Y / N Familiar? Y / N

Left _____ mm Painful? Y / N Familiar? Y / N

Right _____ mm Painful? Y / N Familiar? Y / N Location _____

Jaw Opening Pattern

- ☐ Straight
- ☐ Corrected Deviation (R / L)
- ☐ Uncorrected Deviation (R / L)

TMJ Noises

- ☐ Click/Pop (R / L) Painful (Y / N) Familiar (Y / N)
- ☐ Crepitus (R / L) Painful (Y / N) Familiar (Y / N)

Cervical Screening Limited Movement (Y/N), Pain (Y/N), Familiar (Y/N) _____

Intraoral Screening (Teeth / Gingiva / Other), Recent Dental Work? Y/N _____

Diagnostic Testing

Panoramic _____ CT/CBCT _____ TMJ MRI _____ AT Nerve Block _____ Other _____

Findings: _____

Diagnoses

| Pain Disorder(s) | Notes |
|---|-------|
| <input type="checkbox"/> None | |
| <input type="checkbox"/> Myalgia (R/L) <input type="checkbox"/> Temporal Tendonitis (R/L) <input type="checkbox"/> Myofascial Pain w/ Referral <input type="checkbox"/> Centrally-Mediated Myalgia | |
| <input type="checkbox"/> TMJ Arthralgia (R/L) | |

| TMJ Disorder(s) | Notes |
|--|-------|
| <input type="checkbox"/> None | |
| Disc Displacement <input type="checkbox"/> w/ Reduction (R/L) <input type="checkbox"/> w/ Red. w/ Intermittent Locking (R/L) <input type="checkbox"/> w/o Red., w/ limited opening (R/L) <input type="checkbox"/> w/o Red., w/o limited opening (R/L) | |
| <input type="checkbox"/> TMJ Subluxation (R/L) | |
| <input type="checkbox"/> Degenerative Joint Disease (R/L) | |

Notes: _____

Assessment

Prognosis: Good, Guarded, Poor

Plan

| Management Option(s) | Notes and Resources |
|---------------------------------------|---|
| <input type="checkbox"/> Education | <input type="checkbox"/> Diagnoses <input type="checkbox"/> Physiology & Risk Factors (provide poster handout) |
| <input type="checkbox"/> Self-Care | <input type="checkbox"/> Habit Awareness Training (provide infographic & video) <input type="checkbox"/> Heat, Massage, Gentle Movement, Diet Modification <input type="checkbox"/> Sleep Hygiene Instruction <input type="checkbox"/> Physical Activity <input type="checkbox"/> Nutrition Modification <input type="checkbox"/> Diaphragmatic Breathing Training |
| <input type="checkbox"/> Medication | <input type="checkbox"/> Topical Diclofenac (1-2 week trial for TMJ Arthralgia) <input type="checkbox"/> NSAID (1-2 week clock-regulated trial for TMJ Arthralgia) <input type="checkbox"/> Muscle Relaxant(s) (2-4 week trial - medication taken daily) <input type="checkbox"/> Methocarbamol (daytime) <input type="checkbox"/> Cyclobenzaprine (nighttime) <input type="checkbox"/> Tricyclic Antidepressant (3-6 month trial - medication taken daily) <input type="checkbox"/> Amitriptyline (nighttime) <input type="checkbox"/> Nootriptyline (nighttime) <input type="checkbox"/> Gabapentinoid <input type="checkbox"/> Gabapentin (nighttime or t.i.d.) |
| <input type="checkbox"/> Intervention | |
| <input type="checkbox"/> Referral | <input type="checkbox"/> Physician (Primary) <input type="checkbox"/> Dentist <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Mental Health <input type="checkbox"/> Sleep Medicine <input type="checkbox"/> Nutrition <input type="checkbox"/> Orofacial Pain <input type="checkbox"/> Specialty Care - Other _____ |

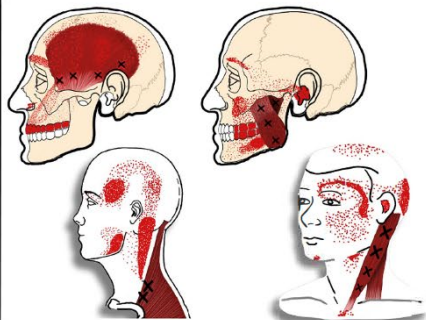
Follow-up Timeline: 1 week, 1 month, Other _____

Follow-up Considerations: _____

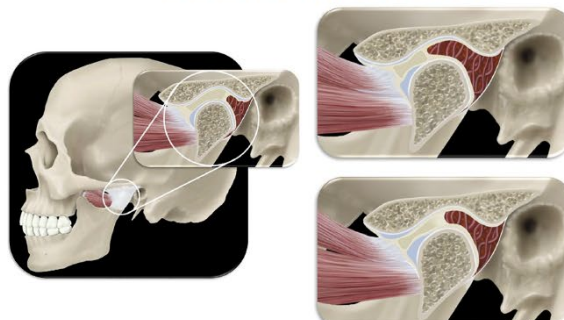
This work was prepared as part of official military duties. This document reflects the views of the authors and does not reflect the policies of the U.S. Government, Department of Defense, U.S. Navy, or Uniformed Services University of the Health Sciences.

DIAGNOSIS

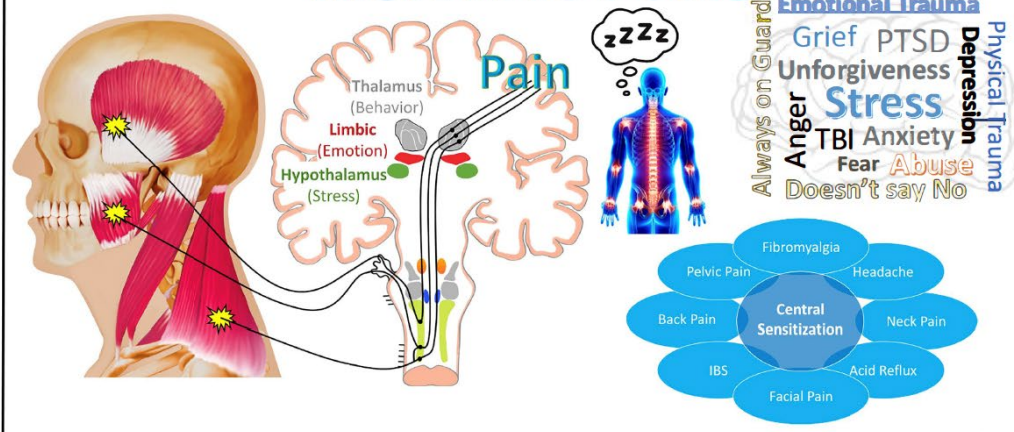
Muscle Pain



TMJ Disorder



RISK FACTORS

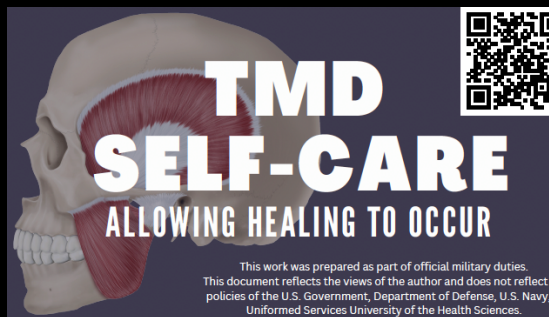


MANAGEMENT

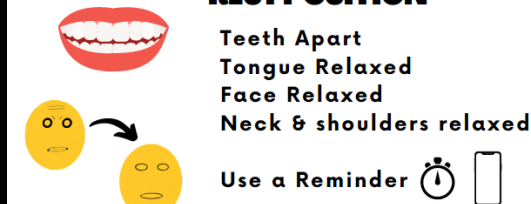
- Rehabilitation involves a team approach between you and your doctors
- Referrals to appropriate specialists may be beneficial to your overall care

Self-Care

- Healthy lifestyle behaviors & modifying risk factors are very important



REST POSITION



APPLY HEAT & MASSAGE

Place heat on the painful muscles
2-4 x per day for 3-5 minutes

Gently massage the muscles

GENTLE MOVEMENT

Gently move your mouth
up & down, side to side

Stretch using your fingers,
but do not increase your pain

Learn to listen to your body

CAUTION

Be mindful when using your jaw:

- Avoid gum, nail biting, etc
- Minimize aggravating foods
- Avoid stimulants

TAKE BREAKS

Take a break from your daily tasks

- Belly breathe
- Go for a walk
- Stretch



Key Takeaways

- TMD is a common condition that impacts warfighter health and readiness
- Many TMD patients have comorbid mental health, pain, and sleep challenges
- TMD can be quickly screened for in a primary care practice
- Self-management tools can effectively be taught by the initial care clinician

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Questions

How to Obtain CE/CME Credits

2024 OCT CCSS: Fostering Quality and Excellence in Military-Specific Care

To receive CE/CME credit, you must register by 0800 ET on 18 October 2024, to qualify for the receipt of CE/CME credit or certificate of attendance. Complete the course evaluation and posttest for the session(s) you attended by **11:59 PM ET on Thursday, 31 October 2024**, to receive CE/CME credit or a certificate of attendance.

1. [Log in](#) to your account.
2. Go to the [main event page](#) and select the session you want to complete under the TAKE COURSE tab.
3. On the session page, click TAKE COURSE under the TAKE COURSE tab.
4. Progress through the required course items by clicking START under the Course Progress menu tabs located on the left of the screen or by clicking Start Course at the bottom of the page.
5. Complete the evaluation and pass the posttest with a score of 80% or above to select your credits and download your certificate.

All completed courses and certificates are available in [your account](#). Refer to your [Pending Activities](#) for sessions you have yet to complete. You must complete the required course items by Thursday, 31 October 2024, to receive credit.

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