

## **PRACTICAL CLINICAL COURSES**

*A Service of the Gordon J. Christensen  
Career Development Program*

**S3174**

### **Treating Muscular TMD Is Simple**

Gordon J. Christensen, DDS, MSD, PhD

#### **Materials Included:**

C.E. Instruction Sheet  
Products List  
Clinician Responsible  
Goals & Objectives  
Overview  
Supplemental Materials  
AGD Post-Test

**Gordon J. Christensen**  
**PRACTICAL CLINICAL COURSES**

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**PRACTICAL CLINICAL COURSES**  
*Sources of Products Discussed in*  
**S3174 Treating Muscular TMD Is Simple**  
Presented by Gordon J. Christensen, DDS, MSD, PhD

1. **AccuFilm II**  
Parkell, Inc.  
300 Executive Drive  
Edgewood, NY 11717  
(800)243-7446  
(631)249-1134  
[www.parkell.com](http://www.parkell.com)
2. **Madame Butterfly**  
Almore International  
441 19<sup>th</sup> Street S.E.  
Hickory, NC 28602  
(800)547-1511  
[www.almore.com](http://www.almore.com)
3. **TrollFoil by TrollDental**  
Directa USA  
64 Barnabas Road  
Unit 3  
Newtown, CT 06470  
(800)537-8765  
[www.directausa.com](http://www.directausa.com)

***Product names, the products themselves, and company names change rapidly. Please contact the companies shown to confirm current information.***

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## **PROGRAM**

### **S3174 Treating Muscular TMD Is Simple**

#### **CLINICIAN RESPONSIBLE:**

**Gordon J. Christensen, DDS, MSD, PhD**

*Founder and CEO, Practical Clinical Courses*

*Senior Consultant and Previous CEO, CR Foundation*

*Practicing Prosthodontist, Provo, Utah*

#### **GOALS & OBJECTIVES**

At the completion of this video presentation, viewers should be able to:

1. Define and discuss temporomandibular dysfunction (TMD).
2. List potential causes for TMD.
3. Discuss the incidence of TMD.
4. Describe symptoms of TMD.
5. List steps in the diagnosis of TMD.
6. Define and discuss muscular TMD.
7. Discuss potential reasons for bone involvement in TMD.
8. List types of practitioners who treat TMD.
9. Describe a potential sequence of treatment for muscular TMD.
10. Discuss the characteristics of a full-arch resin occlusal splint.
11. Discuss the characteristics of an NTI occlusal splint.
12. Discuss potential challenges present for a splint with a hard outside and soft inside.
13. Discuss potential challenges with a soft splint.
14. Discuss potential challenges for a Sved splint.
15. Discuss potential challenges for a maxillary full-arch splint.
16. Define occlusal equilibration.
17. List the sequence of steps for an occlusal equilibration.
18. List five ADA codes that apply to treatment of muscular TMD.
19. Discuss follow-up needs after treating muscular TMD.
20. Discuss potential success for treatment of muscular TMD.

## **OVERVIEW**

### **S3174 Treating Muscular TMD Is Simple**

Temporomandibular dysfunction (TMD) is a frequently occurring malady in dentistry. It can be divided into two types – muscular and bony. About 80% of the patients with TMD have only muscular involvement, and 80% of TMD patients are women, as shown by many studies. Treatment for muscular TMD is relatively simple and is the subject of this video. Treatment of bony TMD is more complicated and only infrequently completely overcome. Practitioners are encouraged to treat muscular TMD whenever encountered to avoid joint degeneration into bony TMD.

The following and other topics are included in this video:

- Definition of temporomandibular dysfunction (TMD)
- Potential causes for TMD
- Incidence of TMD
- Symptoms of TMD
- Steps in the diagnosis of TMD
- Muscular TMD
- Potential reasons for bone involvement in TMD
- Types of practitioners who treat TMD
- A potential sequence of treatment for muscular TMD
- Characteristics of a full-arch resin occlusal splint
- Characteristics of an NTI occlusal splint
- Potential challenges present for a splint with a hard outside and soft inside
- Potential challenges with a soft splint
- Potential challenges for a Sved splint
- Potential challenges for a maxillary full-arch splint
- Occlusal equilibration
- The sequence of steps for an occlusal equilibration
- ADA codes that apply to treatment of muscular TMD
- Follow-up needs after treating muscular TMD
- Potential success for treatment of muscular TMD

## **SUPPLEMENTAL MATERIALS**

### **S3174 Treating Muscular TMD Is Simple**

1. Christensen GJ. Ask Dr. Christensen: Zirconia crowns: The good and the bad. Dental Economics. 2024 Nov/Dec;114(10):50-51, 58.
2. Christensen GJ. Ask Dr. Christensen: Can local anesthetic injections be painless? Dental Economics. 2024 Sep;114(9):53-5.
3. Alowaimer HA, Al Shutwi SS, Alsaegh MK, Alruwaili OM, Alrashed AR, AlQahtani SH, Batais MS. Comparative Efficacy of Non-Invasive Therapies in Temporomandibular Joint Dysfunction: A Systematic Review. Cureus. 2024 Mar 22;16(3):e56713. doi: 10.7759/cureus.56713. eCollection 2024 Mar.
4. Christensen GJ. Ask Dr. Christensen: Solving zirconia occlusion challenges. Dental Economics. 2023 Dec;113(12):40-4.
5. Christensen GJ. Ask Dr. Christensen: Solving challenges with zirconia and lithium disilicate crowns. Dental Economics. 2023 Oct;113(10):35-8.
6. González-Sánchez B, Monterey PG, Ramírez-Durán MDV, Garrido-Ardila EM, Rodríguez-Mansilla J, Jiménez-Palomares M. Temporomandibular Joint Dysfunctions: A Systematic Review of Treatment Approaches. J Clin Med. 2023 Jun 20;12(12):4156. doi: 10.3390/jcm12124156.
7. Christensen GJ. Ask Dr. Christensen: Occlusion and caries: Continuing zirconia challenges. Dental Economics. 2023 Feb;113(2):52-4.
8. Wadhokar OC, Patil DS. Current Trends in the Management of Temporomandibular Joint Dysfunction: A Review. Cureus. 2022 Sep 19;14(9):e29314. doi: 10.7759/cureus.29314. eCollection 2022 Sep.
9. Urbański P, Trybulec B, Pihut M. The Application of Manual Techniques in Masticatory Muscles Relaxation as Adjunctive Therapy in the Treatment of Temporomandibular Joint Disorders. Int J Environ Res Public Health. 2021 Dec 8;18(24):12970. doi: 10.3390/ijerph182412970.

## **POST-TEST**

### **S3174 Treating Muscular TMD Is Simple**

1. About 80% of TMD cases are females.
  - a. True
  - b. False
2. A symptom of muscular TMD is:
  - a. Ankylosis of the TM joints
  - b. Pain in the masseter muscles
  - c. Crepitus heard in the joints
  - d. All the above
3. Muscular TMD is relatively easy to treat if recognized early in its development.
  - a. True
  - b. False
4. Treatment for muscular TMD is usually painful.
  - a. True
  - b. False
5. Physical therapy is frequently capable of temporarily relieving pain of muscular TMD.
  - a. True
  - b. False
6. An occlusal splint is \_\_\_\_\_ indicated for treatment of muscular TMD.
  - a. usually
  - b. infrequently
  - c. always
  - d. never
7. Treatment time for muscular TMD can range from a few days to several weeks.
  - a. True
  - b. False

**POST-TEST (CONT'D)**

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8. Complete diagnosis of muscular TMD was suggested to include:
- a. A cone beam radiograph
  - b. A panoramic radiograph
  - c. Periapical radiographs of any suspect teeth
  - d. All the above
9. An occlusal equilibration is \_\_\_\_\_ indicated for treatment of muscular TMD.
- a. always
  - b. never
  - c. frequently
  - d. infrequently
10. Muscular relaxants are necessary for muscular TMD.
- a. True
  - b. False

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