The Effectiveness Of Exercise Therapy For Temporomandibular Disorders

A report submitted to the University of Adelaide in partial fulfillment of the requirements for the degree of

DOCTOR OF CLINICAL DENTISTRY

Sofie Chau Diem Bui

BDent (Hons) (U.Syd), BPhty (U.Q)

Faculty of Health Science
Dental School



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ABSTRACT

Background: Therapeutic exercises have been used by Physiotherapists to manage musculoskeletal disorders, specifically Temporomandibular Disorders (TMD) for some time but they are less commonly used in dental practice. The current evidence about home exercise programs to treat TMD is weak despite some generally recognised benefits such as low cost, reversibility and reinforcement of the patient's coping skill, essential for management of chronic conditions like TMDs.

Objective: To evaluate the effectiveness of home exercise programs used as part of dental management for TMDs.

Methods: A search of the Cochrane Central Register of Controlled Trials (Cochrane Library Issue 7, 2012), Medline, Web of Knowledge and Scopus databases (January 1966 to February 2012) and reference lists of articles. Only randomized and quasi-randomised controlled trials published in English that compare exercise therapy to treatments without exercise therapy for TMDs were included. Two authors independently assessed the suitability of trials for final inclusion and also contacted study authors for additional information as required.

Results: Eleven trials involving 688 people were included. Two trials compared exercise programs to no-treatment control subjects for Anterior Disc-Displacement with Reduction (ADDwR). A significant risk ratio of 0.44 (0.29-0.59) (44% improvement rate) for improvement in clicking after at least four weeks of exercise therapy was revealed. Three trials compared exercise programs for Anterior Disc-Displacement without Reduction (ADDwoR) with no-treatment control subjects. An overall improvement in the pain-free range of maximal mouth opening with exercise intervention was observed although the differences were not statistically significant in one of three trials. Six trials compared exercise programs for Myofascial Pain patients with no-treatment controls. A standardised mean difference in jaw pain score of 0.73 (95% CI -0.63 – 2.10) indicates no effect from exercise therapy for this TMD subgroup.

Conclusion: Exercise therapy appears to be effective for treatment of some TMD subcategories and unlikely to present any adverse outcomes.

DECLARATION

I, Sofie Chau Diem Bui certify that this work contains no material which has been

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Date: 17th July 2013

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