Manual of Temporomandibular Disorders, Second Edition

by Edward F. Wright Wiley Blackwell, 2010

The target readership for this book, as described by the author, is the average dentist or dental student. It fulfills this goal competently. The subject matter is developed and addressed in a clear and concise manner with page after page of clinical pearls from the author's experience; the book could serve as a chairside manual for the student and general dentist. Most of the controversy that still exists in the field of temporomandibular disorders (TMD) is at least referenced and steered to what is accepted in the academic TMD/orofacial pain community. Each chapter begins with a series of questions and answers that lead into the chapter's subject matter. The chapter layout highlights clinical procedures to identify patient problems, examination procedures, tests, and treatment recommendations. At the end of each chapter, the author has given references to the scientific literature that the reader can research in trying to understand more of each topic presented.

It must be understood that this book is more clinical than basic science oriented but this was the goal of the author. If a graduate student or an orofacial pain resident is looking for a detailed book on the science and associated anatomy, neuroanatomy, blood supply, or pain theory related to TMD, he or she will need to go to other references.

The recommended examination and treatment protocols hew to conservative, generally noninvasive procedures that a general dentist or student would be comfortable in performing. For example, chapter 3 gives a good description of the examination process and is supported extensively with photographs and diagrams to help the student understand the issues discussed. The author, however, instructs on the palpation of the lateral pterygoid muscle on page 51 and shows the palpation in Figure 3.23 but this technique is not generally accepted as actually palpating the lateral pterygoid muscle since the muscle is not actually palpable in this manner.

On pages 143 to 145 the author has a good discussion of the controversial NTI oral appliance that would be very useful for all dentists to read. The appendix contains useful information that readers can implement into their practices.

One subject that is inadequately addressed and is a key component of examination and treatment protocols is myofascial pain. The author does not clearly define or discuss the accepted examination protocols to confirm the presence of myofascial pain, nor do the treatment recommendations coincide with treatment recommendations suggested in the myofascial pain literature, eg, Travell & Simons' Myofascial Pain and Dysfunction: The Trigger Point Manual.¹ For example, early on, the author notes that most of the problems related to patient pain complaints were muscle pain. In his suggested examination process, the myofascial pain trigger points are described but the referral criteria for each of the trigger points is not clearly defined, nor are the confirmatory tests, such as response to trigger point injections or Spray and Stretch that are clearly outlined as criteria for making a diagnosis of myofascial pain, in the relevant literature. In addition, he recommends using 2% lidocaine for the trigger point injections which is not recommended in that literature due to its myotoxic effect at that concentration. The myofascial pain literature recommends muscle stretching as the first-line treatment but the author suggests massage. The author early in the book states that treating cervical muscle pain conditions is within the purview of dentists but fails in chapter 14 to review cervical stretching protocols, primarily focusing instead on the chewing muscles. It is understandable, however, since some state boards in the United States consider dentistry as limited to teeth and jaws and do not include cervical muscles as part of the dentist's purview even though many of these muscles refer pain into the jaw and must be treated if the jaw pain is to improve.

In general, I would recommend this book for general dentists, dental students, and first year orofacial pain residents. It will provide them with a conservative clinical approach to diagnosing and treating TMD and, despite the lapses, will give an overall reasonable, careful, and acceptable process for diagnosis and treatment of this still controversial subject.

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Reference

 Simons DG, Travell JG, Simons LS, Cummings BD. Travell & Simons' Myofascial Pain and Dysfunction: The Trigger Point Manual. Philadelphia: Lippincott Williams & Wilkins, 1998.