

Clinical Perspective

Self-Assessment Test: Temporomandibular Joint

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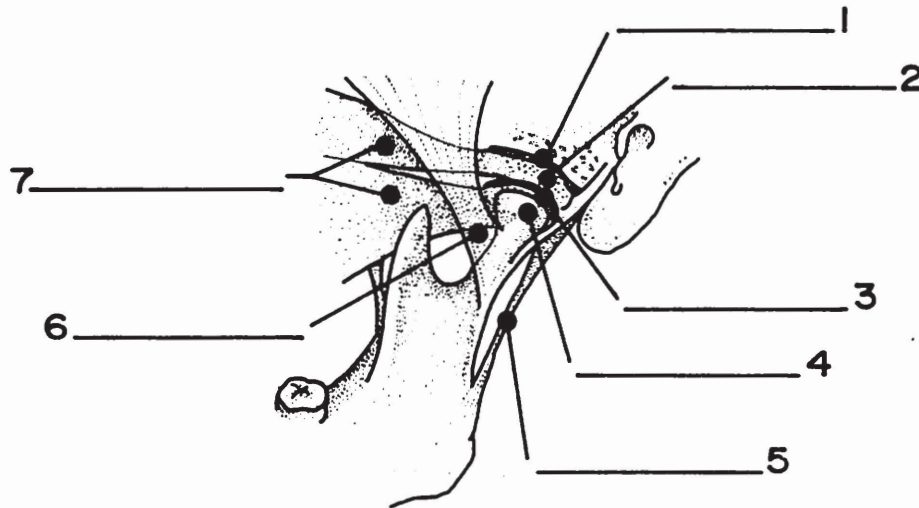
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Self-assessment test

Temporomandibular Joint

(For Answers see page 24)



PART A

1. On the above diagram match the labelled areas to the appropriate structures listed below:
 - a) Synovial cavity _____.
 - b) Pterygoid muscle _____.
 - c) Condyle head _____.
 - d) Temporomandibular ligament _____.
 - e) Articular disc _____.
 - f) Stylomandibular ligament _____.
2. Symmetrical movements of the mandible include:
 - a) Protrusive-retrusive
 - b) Lateral-protrusive
 - c) Opening-closing
 - d) A and C
 - e) A and B
 - f) All of the above
3. When the mandible at rest is moved to the patient's left, the right condyle is termed the:
 - a) contralateral condyle
 - b) ipsilateral condyle
 - c) non-working condyle
 - d) A and C
 - e) B and C
4. Which of the following could not be considered trigger factors in the diagnosis of TMJ (Myofascial pain dysfunction syndrome - MPD)?
 - a) stress
 - b) premature contact
 - c) muscle spasm
 - d) loss of posterior teeth
 - e) anterior overjet
 - f) all of the above could be considered trigger factors

5. Hypnosis, as a treatment modality for TMJ dysfunction, is effective in that it:
 - a) produces relaxation and relief from anxiety
 - b) is capable of reducing pain itself
 - c) is a complete treatment in itself
 - d) A and B
 - e) all of the above

PART B - TRUE OR FALSE

- _____ 6. Pain is always associated with TMJ dysfunction.
- _____ 7. Biofeedback has been successful in the treatment of TMJ dysfunction.
- _____ 8. TMJ dysfunction-pain syndrome usually occurs at random without a pattern of occurrence and with no relation to function.
- _____ 9. Complete denture patients do not suffer TMJ disorders.
- _____ 10. There is no need to exercise special procedures to minimize muscle and joint injury while performing dental treatment (including dental prophylaxis) in successfully treated TMJ patients.

Selected Bibliography:

- Kraus, B.S.; Jordan, R.E.; Abrams, L.; "Dental Anatomy and Occlusion". Baltimore, Maryland; The Williams and Wilkins, Co., 1969.
- Mikhail, Mongi and Rosen, Harry. "History and etiology of myofascial pain - dysfunction syndrome." The Journal of Prosthetic Dentistry, Vol. 44, No. 4: 838-444, 1980.

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Answer Key:

1. a - 1 & 3; b - 7, c - 4, d - 6, e - 2, f - 5; 2. d; 3. d;
4. e; 5. d; 6. F; 7. T; 8. F; 9. F; 10. F.

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