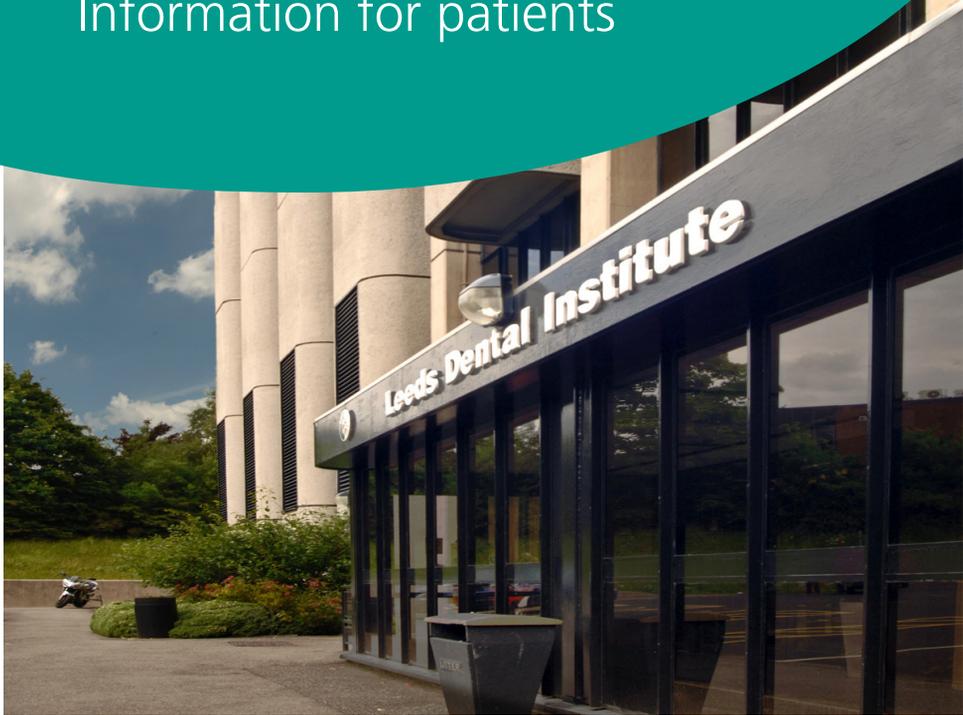




The Leeds
Teaching Hospitals
NHS Trust

Clenching and grinding your teeth (bruxism)

Information for patients





Clenching and grinding the teeth (bruxism) is common; around 1 in 10 people do this while sleeping (sleep bruxism), and up to 1 in 5 people clench their teeth while awake (awake bruxism).

This leaflet provides information about signs and symptoms of bruxism, along with guidance on management.





How do I know if I have sleep bruxism?

Many people who grind their teeth don't realise that they do this. Some signs and symptoms are:

- Sometimes grinding your teeth can make a noise: sleeping partners might tell you they have heard it
- Ridges on the insides of your cheeks or 'tooth-prints' on the sides of your tongue.
- Worn, cracked or broken teeth or fillings
- Stiff or sore jaw muscles when you wake up
- Headaches
- Sore, sensitive or loose teeth (you should see a dentist to rule out problems like gum disease or tooth decay)



Why do I have sleep bruxism?



Sleep bruxism happens due to brain activity while you are asleep. You have no control over this. The brain signals for bruxism happen in the lighter stages of sleep.

You might find that your bruxism is worse if you are not sleeping well, for example:

- If you are feeling stressed or anxious
- If you have trouble staying asleep
- If you are frequently woken up in the night by other people or by other health conditions

Caffeine, alcohol and smoking can increase the risk of sleep bruxism.



People with some other conditions including obstructive sleep apnoea and acid reflux may be more likely to have sleep bruxism.

Some neurological conditions such as Parkinson's disease increase the risk of bruxism.

Can I stop myself grinding my teeth?

There is no way of stopping the brain signals that trigger the bruxism activity. However, sleep bruxism itself is not necessarily a problem and does not damage the muscles or jaw joints.

You would only need treatment if bruxism is causing pain or problems with your teeth. Your dentist will talk to you about any damage to your teeth that looks like it is being caused by bruxism.

Treatment usually focusses on the problems caused by bruxism, rather than on trying to stop it.

Temporomandibular Disorders (TMD)

Temporomandibular disorders (TMD) are problems affecting the jaw joints and jaw muscles. Bruxism **does not cause** TMD. It does not damage the jaw joints or jaw muscles. However, if you already have TMD, then bruxism can make your symptoms worse.

Please see our **Temporomandibular Disorders patient information leaflet** for further information.

Treatment options for bruxism

Avoiding daytime clenching

Awake bruxism is a subconscious habit, but with practice you can stop yourself from doing this. It takes time to change habits, so you will need to keep trying!

- During the day, maintain a good posture with your neck straight and shoulders relaxed.
- Keep your jaw muscles relaxed and your teeth slightly apart.
- Try to find ways of reminding yourself to do this. Some ideas include:
 - Ask family or friends to tell you if they see your jaw muscles clenching.
 - Set alarms on your phone throughout the day.
 - Putting stickers around your house or workplace. Then when you see these stickers, they will remind you to relax your jaw muscles.

Splints

Dental splints (sometimes called 'biteguards') are worn over your teeth while you sleep.

A splint will help protect your teeth from wear or fracture, and can help with pain from bruxism.

It is important that a splint is made by a dentist. Splints which do not fit properly can cause problems with your teeth or gums.

Soft splint is made from a slightly flexible material- a bit like a thin sports gumshield.

Some people find that soft splints make them clench or grind more, which can make jaw pain worse. Some people find that they wear through their soft splint very quickly.

Stabilisation splint is made from a hard plastic which helps it last longer. It is made so that your teeth meet evenly against the biting surface of the splint.

Mandibular advancement device (MAD) covers both the top and bottom teeth and holds your bottom jaw slightly forward. These might be recommended for people with suspected or confirmed obstructive sleep apnoea.

Medicines

Botulinum toxin type A (Botox) injection into the jaw muscles can be used to relax the muscles in the short term. Botox is not suitable for everyone. Botox treatment for bruxism is not available in the Leeds Dental Institute.

Some medicines including sedatives, anticonvulsants and muscle relaxants have the effect of reducing bruxism activity. Medicines are unlikely to be prescribed for bruxism, but this could be an additional effect of medicines taken for other reasons.

Contact us

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Your comments and concerns

Website: www.leedsth.nhs.uk/contact-us/feedback/

If you have any questions at all, please do not hesitate to ask- we are all here to help you.



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© The Leeds Teaching Hospitals NHS Trust • 1st Edition Version 1
Developed by: Leeds Dental Institute
Produced by: Medical Illustration Services • MID code: 20260123_010/RC

LN006166
Publication date
03/2026
Review date
03/2029