

# Temporomandibular disorders (TMD)

Information for patients



Leeds Dental  
Institute



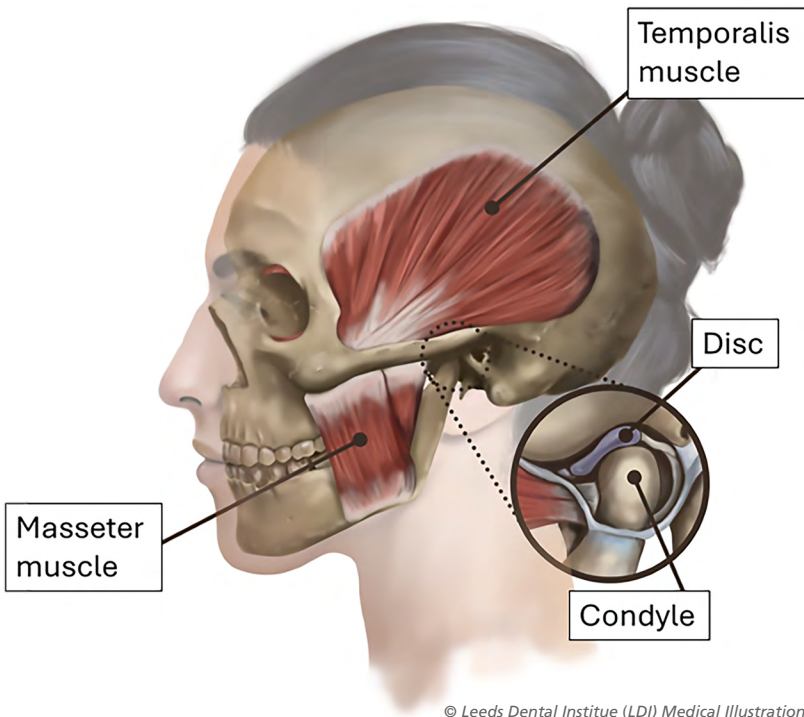
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This leaflet provides information about disorders affecting the jaw joints (temporomandibular disorders, or TMD).

### What are temporomandibular disorders (TMD)?

The jaw joint is called the temporomandibular joint, or TMJ. Temporomandibular disorders (TMD) are a group of conditions that affect the jaw joints or the muscles around them. TMD is common: about 1 in 15 people in the UK have it.

In the past, TMD was sometimes called Temporomandibular Joint Pain Dysfunction Syndrome (TMJ/PDS) or simply 'TMJ.'



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## What are the symptoms?

Depending on the type of TMD, you might:

- Have pain in your jaw
- Hear clicking or popping sounds from the jaw joint
- Find it hard to open your mouth or move your jaw

The most common TMD is pain in the muscles. Other types can affect the bones of the jaw joint or the small disc of cartilage inside the joint. Some people have a mix of muscle and joint problems.

## Painful muscular TMD

The most common TMD is muscle pain. This is called muscular TMD, myogenous TMD (**m-TMD**), or myalgia.

Symptoms can include:

- Pain or tightness in your jaw
- Trouble chewing or opening your mouth.
- Pain in your teeth, face or around your eyes
- Earache or headaches
- Pain in your neck, shoulders or back.

## What causes m-TMD?

There is usually no single cause. Many things can add to the problem.

Injuries to the jaw joint or long dental appointments can sometimes cause short term pain. This usually gets better by itself.

You can help the pain settle by:

- Resting your jaw
- Gently massaging the sore muscles
- Avoiding hard or chewy foods for two weeks

Sometimes, pain lasts longer than three months - this is called **chronic pain**.

Chronic TMD can start without an injury. Body, mind and lifestyle all play a role. These should all be thought about when planning treatment.

Some people with TMD also have other conditions like:

- Fibromyalgia
- Chronic fatigue syndrome
- Migraine
- Irritable bowel syndrome
- Anxiety, depression or PTSD

Clenching or grinding your teeth (called bruxism) does not cause TMD but can make it worse.

## Will it get better?

**Yes** - most people's symptoms improve.

Your symptoms might come and go. You might notice that things feel worse when you are:

- Stressed
- Sleeping badly

- Run down
- Unwell with other health problems

## What treatment might be considered?

There are different ways to help TMD. Not every treatment is right for everyone. Some people find one thing works. Others need to try a few things together.

The most important part of treatment is what you do at home every day. This is called **supported self-management**. You'll be given advice to help you manage your symptoms now, and during any flare-ups in the future.

## Supported self-management

These are the key things you can do to help your TMD. Try to do them **every day** - being consistent really helps.

### Daily habits

- Try not to chew gum, bite your fingernails or lips, or chew on pen tops. These strain the muscles.
- Sit and stand with good posture - neck straight, shoulders relaxed and down
- Keep your jaw relaxed during the day and let your teeth rest slightly apart
- If your jaw is sore, eat softer foods and avoid opening your mouth very wide when yawning

## Heat or cold packs

- Use a heat pack (or a warm, damp face cloth) on the painful area for **10–15 minutes, twice a day**. This helps blood flow and relaxes muscles.
- Some people prefer cold packs. Wrap a cold pack or ice in a cloth and hold it on the area for **5–10 minutes**, until it starts to feel numb.
- Try **heat for a week**, then **cold for a week**, to see which works best for you.

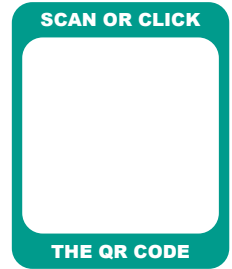
## Massages and exercises

- Gently massage the sore muscles (masseter or temporalis) **2–3 times** a day for a minute or two.
- Use your palm or knuckles to press downwards on the sore areas.
- If you feel little ‘knots’ in the muscle, use your fingertips to gently rub them.
- Simple jaw exercises can help. We will show you which ones to try.

**Do your heat or cold therapy, massage and exercises every day**, even if the pain is not there. It helps stop pain from coming back.

Scan or click the following QR code to find videos and more advice from Newcastle University about self-physiotherapy and massage:

[https://www.youtube.com/playlist?list=PL0Zkwy\\_9eK9dUJbeyARqIxupd8i53EbJ](https://www.youtube.com/playlist?list=PL0Zkwy_9eK9dUJbeyARqIxupd8i53EbJ)



## General wellbeing

Feeling tired, stressed or unwell can make your symptoms worse. To help your body heal:

- Try to get enough sleep
- Eat as well as you can
- Find ways to relax
- Be kind to yourself

Your mental health is important. We can help guide you to support if you are struggling.

## Sleep

Poor sleep quality can make pain worse. Try:

- Having a relaxing bedtime routine
- Avoiding any screentime for an hour before going to sleep
- Cutting down on caffeine, especially in the evenings

## Self-Management Pain Guide

TMD can cause stress and worry. It can stop you from doing the things you enjoy.

We have a free guide to help you learn how to manage long-term jaw and face pain. This includes real stories from people who also live with TMD.

<https://medicinehealth.leeds.ac.uk/dentistry-research-innovation/dir-record/research-projects/1764/improving-outcomes-for-chronic-orofacial-pain-including-temporomandibular-disorders-the-tmd-study>



**Self-management of Chronic Orofacial Pain including TMD** *Authors Karina Lovell, David Richards, Phil Keeley, Joanna Goldthorpe and Vishal Aggarwal*  
(© 2019 The University of Manchester and the University of Leeds)

## Other treatment options

If your home care (self-management) hasn't helped enough, we might suggest other treatments to try as well.

These include:

- Talking therapy
- Physiotherapy
- Splint therapy
- Oral medications
- Botox injection (not available at the Leeds Dental Institute)

Your dental team will talk to you about what might help.

These treatments work best **when you are also doing your self-management every day** (massages, exercises and heat/cold therapy).

## Physiotherapy

Physiotherapy can be really helpful for m-TMD. Your own self-management - massages, exercises and using heat or cold - are all types of physiotherapy.

Sometimes we might suggest seeing a physiotherapist. This can be useful if you also have problems with your neck, shoulders or back.

Some physiotherapy may be available under the NHS.

## Splint therapy

A **splint** (also called a biteguard) is a plastic device worn over your teeth at night. It may help if you **clench or grind** your teeth (called bruxism). Bruxism doesn't cause TMD, but it can make symptoms worse.

More information is available in our Bruxism patient information leaflet.

Your dentist will talk to you about whether a splint could help and which type is best for you.

## Talking therapy

TMD can make people feel stressed, anxious or low. Talking to someone about how it's affecting your life may help.

Other mental health issues, like anxiety, depression or PTSD can make TMD symptoms worse.

You might benefit from **pain management psychology** or other support. We can help you find the right support, you may be able to refer yourself, or we might ask your GP to refer you.

## Medicines

Different medicines can sometimes help with TMD:

- **Anti-inflammatory medicines** (like ibuprofen) may help during flare-ups. Check with your dentist, doctor or pharmacist before taking them. They're not safe for everyone, especially if you have asthma, stomach ulcers or take other medicines.
- Other options may include:
  - Muscle relaxants
  - Nerve pain medicines
  - Low-dose antidepressants

We would write to your GP if we think one of these might help you.

## Botox

Botulinum toxin type A, or Botox, can be injected into the jaw muscles. This helps them relax and may reduce pain for a short time. Botox is not suitable for everyone.

## Jaw clicking and locking

### Why is my jaw clicking?

The jaw joint (called the TMJ) connects your lower jaw to your skull. There is a small piece of **cartilage** (a soft, rubbery tissue) between the bones of the jaw joint, shaped like a disc. This helps the joint move smoothly when you open and close your mouth.

Sometimes this piece of cartilage can slip out of place. This is called a **disc displacement**. When you open your mouth, it might make a clicking or popping noise as the cartilage moves back into place. Some people get a click when they open their mouth; others when they close their mouth; or both.

Disc displacement can be more likely if your joints are naturally flexible (hypermobile).

The disc of cartilage is supported by one of the jaw muscles. If this muscle is very tense, it might pull the disc forwards out of place.

## Why does my jaw get stuck?

If the cartilage disc **doesn't move back into place**, your jaw might get **stuck**.

This is called **jaw locking**. You may only be able to open your mouth a little way. Sometimes this gets better on its own.

Some people find they can **wiggle their jaw** to get it working again.

## Should I be worried about my jaw clicking?

**No**. Clicking from the jaw is **very common** and is usually not a problem. For most people, jaw clicking stays the same over time and doesn't get worse.

However, some people get pain with the clicking, or their jaw locks more often. If that happens, treatment may be needed, but it's not possible to know if this will happen to you.

Try not to open your mouth too wide (for example, when yawning). Don't keep testing to see if it's still clicking.

## What treatment might be considered?

This depends on your symptoms. Your dental team may suggest:

- X-ray or an MRI scans of the jaw joint and the cartilage disc to confirm a diagnosis
- Jaw exercises to help improve movement
- That you see a physiotherapist

In more severe cases, or if other treatments haven't helped, surgery might be considered.

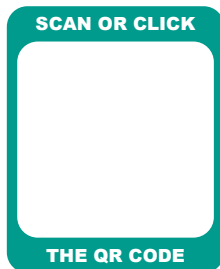
Surgery might be an option for problems issues with the jaw joint itself (either the disc of cartilage or the bones of the joint). Surgery is not recommended for problems with the muscles (m-TMD).

If surgery is an option, your team will explain everything and help you decide what's best.

## Useful links

NHS Live Well: 10 ways to reduce pain

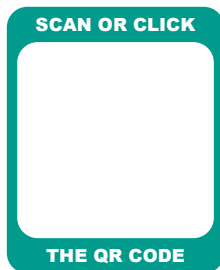
<https://www.nhs.uk/live-well/pain/10-ways-to-ease-pain/>



## Find a TMD physiotherapist

The Association of Chartered Physiotherapists in TMD (ACPTMD) - <https://acptmd.co.uk>

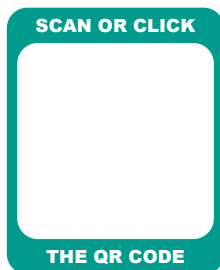
This website has information about TMD and can help you find a physiotherapist with a special interest in treating TMD.



## Help with sleep problems

Bad sleep can make pain worse. This NHS site has tips to help you sleep better.

<https://www.nhs.uk/every-mind-matters/mental-health-issues/sleep/>



## Contact us

The Worsley Building, Clarendon Way, Leeds LS2 9LU

Leeds Dental Institute Switchboard: (0113) 2440111

Website:

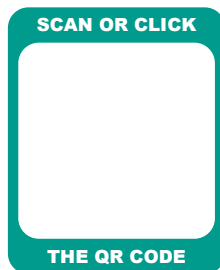
<https://www.leedsth.nhs.uk/hospitals/leeds-dental-institute/>



## Your comments and concerns

Website:

<https://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.



## What did you think of your care?

**Visit:** [www.leedsth.nhs.uk/patients/support/feedback-complaints/friends-family-test/](http://www.leedsth.nhs.uk/patients/support/feedback-complaints/friends-family-test/)

***Scan or click the QR code - Your views matter***

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