

## Temporomandibular Disorder (TMD) in Children

### TMD / TMJ TEMPOROMANDIBULAR JOINT DISORDER



#### What is TMD?

Temporomandibular Disorder (TMD) refers to problems affecting the **jaw joint** (temporomandibular joint / TMJ), the **muscles** around the jaw, or both.

Children with TMD may have pain, clicking, or difficulty opening their mouth.

TMD is **common and usually not serious**. With the right advice, most children get better without needing specialist treatment.

#### What Causes TMD in Children?

TMD can occur due to one or more of the following:

- **Jaw muscle strain** (chewing hard foods, gum chewing)
- **Teeth grinding or clenching** (often during sleep)
- **Poor posture** (especially long screen time, leaning forward)
- **Stress or anxiety** (leading to jaw tension)
- **Recent dental work • Injury to the jaw**
- **Growth and development changes** during adolescence Sometimes no

clear cause is found — this is normal.

### Common Symptoms

A child with TMD may experience:

- Jaw pain (one or both sides)
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- Clicking, popping, or grinding sounds in the jaw
  - Locking or catching sensation
  - Pain when chewing or talking
  - Headaches
  - Ear pain or a feeling of fullness (with normal ear examination)
  - Facial or neck muscle tightness

Symptoms may come and go, or flare during stress, illness, or after increased jaw use.

### How is TMD Diagnosed?

Diagnosis is usually made from:

- A **physical examination**
  - Asking about symptoms and habits
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- Checking the jaw movement and muscles

Scans or X-rays are **not normally needed** unless another condition is suspected.

### Treatment

Most children improve with simple, conservative management.

#### 1. Rest the Jaw

- Avoid chewy, hard, or sticky foods (gum, tough meats, large sandwiches).

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- Choose softer foods temporarily (pasta, yoghurt, soups).
  - Avoid wide mouth opening (large bites, yawning widely).

## **2. Heat or Ice**

- Warm compress on the jaw for **10–15 minutes** to relax muscles.
- Ice can help during painful flare-ups (use for 5–10 minutes, wrapped in cloth).

## **3. Pain Relief**

- Paracetamol or ibuprofen can be used short-term (follow age-appropriate dosing).

## **4. Encourage Good Habits**

- Avoid chewing gum.
- Reduce nail biting, pen chewing, or leaning on the jaw.
- Practice relaxed jaw position: **“lips together, teeth apart.”**

## **5. Improve Posture**

- Encourage breaks during screen time.
- Sit with back supported and head upright.
- Avoid slumping or lying on the stomach to watch screens.

## **6. Gentle Exercises**

Do these **once or twice daily**:

### **Relaxed Jaw Breathing**

- Place tongue lightly on the roof of the mouth.
- Slowly open and close the mouth while keeping muscles relaxed.

### **Controlled Opening Exercise**

- Place a finger between upper and lower teeth.
- Open and close the mouth in a straight line without deviation.

### **Side-to-Side Movements**

- Move the jaw gently side to side.
- Avoid causing pain.

## **Lifestyle Factors**

- Stress and anxiety can increase jaw tension.

- Encourage relaxation activities, good sleep routines, and breaks from schoolwork/screens.

### **When to Seek Further Help**

Contact your GP, dentist, or physiotherapist if:

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- Pain is severe or ongoing after **6–8 weeks** of self-care
  - The jaw locks open or shut
  - There is significant difficulty eating
  - Headaches or ear symptoms worsen
  - There are signs of trauma or injury
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- Your child develops new neurological symptoms (rare)

Referral to a dental specialist, orthodontist, or paediatric pain service may be considered for persistent cases.

### **Prognosis**

- Most children recover fully with simple measures.
  - TMD does **not damage the jaw joint** in most cases.
  - Symptoms may come and go but usually settle with growth, posture improvement, and reducing habits like clenching.
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