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## TMJ (Temporo-mandibular joint) Syndrome Information Sheet

The jaw joint, or “TMJ”, is located in front of the ear canal. You can feel it with your finger as you open and close your mouth. When the joint and muscles of chewing become inflamed, usually by grinding, clenching or jaw tension, it can cause pain in the ear or face. The discomfort can be an ache, sharp pains, or both. There is no visible abnormality in TMJ syndrome, and lab tests are not usually helpful. The best initial treatment for TMJ syndrome is the same as for any sore joint: heat, rest and anti-inflammatories.

Heat: Wet a hand towel in hot tap water, wring out and apply to the joint for 10 minutes twice a day.

Rest: Eat soft foods only. Do not chew gum. Do not yawn or open mouth frequently to “test” the joint or to pop your ears. Check your bite during the day to make sure that the upper and lower teeth are slightly separated and that you are not clenching. Ask your bed partner if you grind your teeth at night.

Anti-inflammatories: If you are able to tolerate these medicines, such as Advil, Motrin or Aleve, your doctor may prescribe them. Conversely, if you cannot tolerate these medicines, are allergic, or have been advised previously not to take them, tell your doctor and do not take them if prescribed.

Some oral surgeons specialize in management of TMJ syndrome. If your problem is more severe or chronic, we may recommend that you see an oral surgeon.

Lastly, TMJ is a common condition. Mild cases usually respond to the regimen described above within a couple of weeks. It is essential that you understand that chronic, ongoing symptoms are NOT typical in treatment of **TMJ**. If your symptoms or pain and aching are continuing despite our treatment plan and evaluation by an oral surgeon, it is **IMPERATIVE** that you contact us for re-evaluation. In rare cases, other conditions such as tumors can mimic TMJ syndrome.