



Temporomandibular disorders: A new list of key points to summarize the standard of care

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ABSTRACT

This letter is being sent to editors of major dental journals around the world. Attached to it is an Announcement that summarizes a recently published position paper which deals with the topic of standards of care for Temporomandibular Disorders (TMDs). That paper, entitled “Temporomandibular disorders: INfORM/IADR key points for good clinical practice based on standard of care”, was developed by a group of expert researchers and clinicians over a one-year period. The full paper describing the outcome of this project was published in CRANIO – The Journal of Craniomandibular and Sleep Practice (1), and is available as an open access paper at the following link. <https://www.tandfonline.com/doi/full/10.1080/08869634.2024.2405298?src=exp-la>

Dear Editor-in-Chief,

This letter is being sent to you as well as to other editors of major dental journals around the world. Attached to it is an Announcement that summarizes a recently published position paper which deals with the topic of standards of care for Temporomandibular Disorders (TMDs). That paper, entitled “Temporomandibular disorders: INfORM/IADR key points for good clinical practice based on standard of care”, was developed by a group of expert researchers and clinicians over a one-year period. As the title indicates, this was a formal process that worked to achieve the following objective: “To present a list of key points for good Temporomandibular Disorders (TMDs) clinical practice on behalf of the International Network for Orofacial Pain and Related Disorders Methodology (INfORM) group of the International Association for Dental, Oral and Craniofacial Research (IADR).” This was the first formal scientific effort to address this topic since the AADR Science Information Statement of 2010.

The full paper describing the outcome of this project was published in CRANIO – The Journal of Craniomandibular and Sleep Practice [1], and is available as an open access paper at the following link.

<https://www.tandfonline.com/doi/full/10.1080/08869634.2024.2405298?src=exp-la>.

Our request to you and all other editors is to publish this brief one-page Announcement that summarizes the key points while briefly describing how they were developed, with a link to the full article. Since this Announcement is not copyrighted, it can freely be published in many journals, thereby enabling your readers to not only become aware of this important development, but also to access and read the entire paper later.

On behalf of the INfORM group, we thank you for your consideration of this request, and we look forward to receiving your response.

Sincerely,

The authors.

ANNOUNCEMENT.

CARE STANDARDS FOR TMD MANAGEMENT UPDATED BY EXPERT GROUP.

An open working group discussion was held at the IADR General

Session in New Orleans (March 2024), where members of the INfORM network finalized the proposal of a list of 10 key points for good clinical practice for the field of temporomandibular disorders (TMDs). These 10 points represent a summary of the current standard of care for TMD management (1) <https://www.tandfonline.com/doi/full/10.1080/08869634.2024.2405298?src=exp-la>.

The list of key points and their main contents include:

- one statement on general principles: patient-centered decision-making as well patient engagement and understanding of expectations are critical aspects in the management of TMDs;
- two statements on etiology: TMDs are disorders of musculoskeletal origin that occur within a biopsychosocial framework and are precipitated by a multifactorial etiology;
- three statements on diagnosis: diagnosis of TMDs should be based on a careful and standardized oral history and clinical assessment. Imaging procedures should be considered in all cases when that imaging (MRI for soft, CBCT for bone tissues) has the potential to impact the treatment plan and outcome. Currently, the use of electronic devices for diagnosis is not supported;
- three statements on treatment: outcomes should be evaluated in terms of pain reduction and improved function as well as decrease of relapses and psychosocial impact. Primary approaches should be conservative whenever possible, with a combination of counseling, cognitive-behavioral treatments, provisional use of oral appliances, and pharmacological control of pain. Surgery may be needed in a selected minority of cases. Dental and/or surgical techniques to correct occlusion and/or mandible position are not supported;
- one statement on TMDs within the broader aspects of orofacial pain: cases of pain chronicity or presence of concurrent multiple pain conditions should be managed by expert practitioners and/or referred to the proper specialist

These key points, in their simplicity, will assist general dental practitioners to advance their understanding and prevent inappropriate treatment. They can be viewed as a guiding template for other national

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and international associations to prepare guidelines and recommendations on management of TMDs; those can be adapted to the different cultural, social, educational, and healthcare requirements in various countries around the world.

Ethical declaration


The authors declare that this manuscript has been written in accordance to ethical principles.

Conflict of interest

The authors declare that they do not have any conflicts of interest.

Reference

- [1] Manfredini D, Häggman-Henrikson B, Al Jaghsi A, Baad-Hansen L, Beecroft E, Bijelic T, et al. International network for orofacial pain and related disorders methodology. Temporomandibular disorders: INfORM/IADR key points for good clinical practice based on standard of care. *Cranio* 2024;1–5. <https://doi.org/10.1080/08869634.2024.2405298>.

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