

Seeking the Source *of Pain*

Finding the source of pain can be challenging—a challenge met on a daily basis by Dr. Charles Ferzli, owner of the TMJ & Sleep Therapy Centre of Raleigh-Durham, based in Cary.

“We deal with the pain of our patients on an ongoing basis,” Dr. Ferzli says. “And patients come to us with pain in all of its varieties—including jaw pain, headaches, neck pain, back pain. Whatever the type of pain, our first priority is to find the originating source of the patient’s discomfort.”

“To do this, we have a variety of tools at our disposal, and we always start with the basics—a thorough physical exam beginning with palpation. We can learn a lot based on how the muscles feel, how the bones feel when they move, if there is pain on initial pressure to the area or if there is referred pain when I palpate a different area.”

“Then, we gather additional information using a jaw vibration analysis,” he continues. “This is a machine that measures the vibrations the jaw makes with movement and helps us figure out if the pain is being caused by a dysfunctional joint, a displaced disc, or the grinding of bone on bone. We will then look at morphological changes on an X-ray, and that image will help support our findings and paint a more complete picture of what is going on.”

THE EXPERIENCE OF PAIN

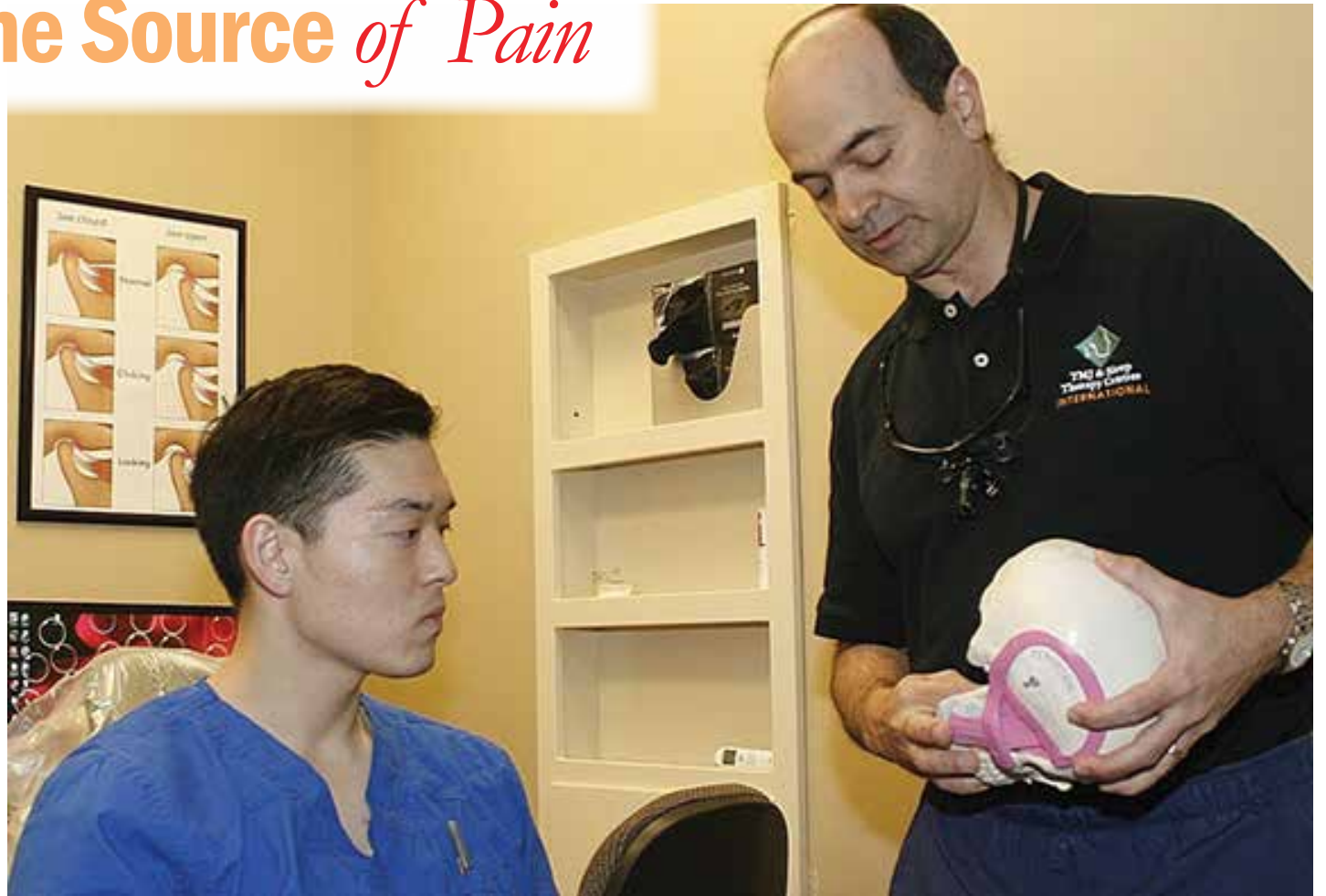
These tools of analysis are necessary because the experience of pain by nature is both subjective and unreliable, he points out. “A patient I have now seen for years came to me originally with a five-year history of debilitating headaches. She had been treated for migraines for years, which never really helped her discomfort, and had been seen by neurologists. She’d had MRIs and all sorts of testing done, but none of these approaches successfully identified the problem or helped ease the pain.”

“She had finally been referred to me by an ENT provider, and it turned out she had significant inflammation in the joints of her jaw, causing compression. She never noticed jaw pain, but by addressing that inflammation, her headaches resolved.”

This is not an uncommon story in Dr. Ferzli’s practice. “Ear pain,” he explains, “is often referred from the mandibular joint, jaw pain is often from a tooth infection, and headaches may be from an issue with the neck, teeth, or jaw. So, you can see why determining the source of a problem is so important in order to actually resolve the pain.”

NO FEAR, NO PAIN

Being afraid of the dentist isn’t just a cliché, it’s a fact of life for many people. Using innovative techniques and technology, Dr. Ferzli works not only to effectively manage dental and procedural pain, but to ease the fear and anxiety related to that pain as well.



Dr. Ferzli uses many models and instruments to help patients understand the source of their painful discomfort—and the best paths to relief.

“I believe it’s important to address fear and anxiety with the patient right up front, as an important first step in resolving the presenting issues, he says. “If, in fact, pain and anxiety are an issue—as they are for many—there are things we can do to help.”

“For example, a technology called Alpha Stim is a very effective tool we use to reduce anxiety. It works by connecting small electrodes to the ear lobes that send out a small electrical signal. It feels like very minor tingling on the earlobes, and some patients feel nothing at all. These signals are received by the brain inducing the release of calming hormones such as serotonin, norepinephrine, and dopamine—which create a sense of calm and euphoria, thereby decreasing fear and anxiety.”

“This system is also helpful for easing depression, insomnia, and generalized anxiety,” Dr. Ferzli notes. “It’s a wonderful way to help regulate the autonomic nervous system without the use of medications.”

Dark glasses for the patient, along with a calming environment are supplemental methods Dr. Ferzli may employ before beginning a dental procedure. “Topical anesthetic will then be used,” he continues, “so the injection of a deeper anesthetic won’t be felt. And nitrous oxide can at times be helpful as well. For example, if someone comes to us with a jaw that is too tightly locked to open comfortably, getting that musculature to relax is paramount. Nitrous oxide gas is a great option in this situation. Once that is administered, we are able to use electrical acupuncture to further relax the system, and a laser to reduce inflammation and the neurological response to the muscles. At that point, the jaw usually unlocks on its own without further intervention necessary.”

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TRIGGER POINT AND PROLOTHERAPY

Trigger point therapy is a gentle, non-invasive approach that is reflected in both Dr. Ferzli’s demeanor and his practice environment. So, it is not surprising that even when a slightly more invasive measure is recommended, its purpose is to ultimately reduce the amount of systemic medications he is introducing into the patient’s body.

“Trigger point injections are a great way to manage pain and reduce the use of anti-inflammatory and antibiotic medications,” he explains. “Prolotherapy injections to the site help the body use its own mechanisms of healing to naturally reduce inflammation and pain, and to repair damage.”

“Prolotherapy works by injecting dextrose into the joint, triggering the immune system. Once the immune system is more aware there is a problem at that site, it will concentrate efforts by sending ‘repairmen’—immune cells tasked with inflammation reduction, pain control, and tissue repair.”

“The body is designed to heal itself,” Dr. Ferzli concludes. “Sometimes it just needs some help to wake up and get going. Other times, I need to go in to fix a problem. In either case, the management of pain is not an obstacle to effective treatment if you have the tools and know how to use them.”

THE OPIOID EPIDEMIC

The use and misuse of opioids for pain relief is a critical issue for all providers, Dr. Ferzli says, noting that “we don’t usually prescribe any opioids in our clinic. Actually, most of our philosophy of care revolves around taking care of a patient’s pain through physical medicine, rather than the use of drugs. We simply do not like to prescribe drugs for our patients when we understand that we can address their problems with physical medicine. We are, in fact, always seeking to treat the source of a patient’s pain, as opposed to simply managing their pain. h&h

For more information, contact:
Charles Ferzli, DDS, FAACP, DABCP,
DABCDMS, DABDSM
TMJ & SLEEP THERAPY CENTRE
OF RALEIGH-DURHAM
1150 NW Maynard Road, Suite 140
Cary, NC 27513
Telephone: (919) 323-4242
RaleighTMJandSleep@gmail.com
www.RaleighTMJandSleep.com