

# TMJD: *the Great Imposter*

## A PATIENT'S STORY

**M**aria Beatriz Lawdell, in her youthful sixties, has been a patient of Dr. Ferzli's for the past six months, in a successful effort to improve the quality of her sleep and her life. She had a number of classic night time symptoms: dry mouth, constant and annoying thirst, and poor quality of sleep. She and her husband, Fred, describe her treatment experience and its outcome:

**FRED:** We did the required initial visits where they did special imaging of the neck and the jaw area. Dr. Ferzli put her on two specific mouthpieces, one that they call a daytime device, and the other that they call a nighttime device. And then for the first few months, we did follow-up visits every two weeks. For the past three months, we have done follow-up visits about every three weeks. At this point, Maria has completed the basic visit program, and she will be going back in six months for a routine follow-up to see if all is well. She now has finished the time that she needs to use the daytime device, so she no longer needs the daytime device, but the nighttime device will become a lifelong sleeping practice.

**MARIA:** Before this work with Dr. Ferzli, I couldn't sleep very well every night: I would wake up in the middle of the night, and I was sleeping with my mouth open. Often, I would bite my cheeks and also my tongue. And now, I feel much better. I have more energy than before, let me tell you, because I am resting better than before.

**FRED:** Overall, Dr. Ferzli's program has had a profound effect on Maria's life, and therefore, on my life, as well. Her jaw has repositioned itself to a more stable area and the overall quality of life issues related to digestion, sleep quality, energy, things like that, are much better and stronger.



Maria Beatriz Lawdel

**"SOMETIMES THE JAW JOINT INDUCES A HEADACHE, JAW PAIN, OR EVEN SHOULDER PAIN."**

**T**emporomandibular Joint Disorder—TMJD—is sometimes called the “Great Imposter” because its symptoms are so often the same as those produced by other disorders, including facial and eye pain, neck, shoulder and back pain, sinus congestion, or tinnitus—ringing in the ears.

Explains Dr. Charles Ferzli, DDS, of TMJ & Sleep Therapy Centre in Cary, “The temporomandibular joint, or TMJ, connects your jaw to your skull and it's a great example of how our body's organs all interconnect,

“The TMJ is in very close proximity to the ear. Many of our patients are referred to us by physicians because they have ear problems, but not ear infections. Inflammation in the TMJ can cause ear pain, ear fullness, ringing in the ear, and sometimes a decrease in hearing as well. Treating TMJD will help reduce or eliminate the symptoms that are associated with the ear.

“Because symptoms can be misleading, our extensive patient history asks a wide array of questions to help us determine whether presenting problems are related to TMJD. We always ask patients to write down every symptom that they can think of, even if it doesn't seem to be related to their symptoms. And then we connect the dots. They may have trouble swallowing, pain behind the ear, or headaches that could, in fact, be the result of TMJD.”

### CONNECTIONS

“Our central nervous system connects everything with the cranial nerves,” explains Dr. Ferzli. “Sometimes the jaw joint induces a headache, jaw pain, or even shoulder pain. Our initial assessment helps us deduce the different connections.

“A prospective patient might have trigger points in their back, caused by forward head posturing that, in turn, is caused by clenching teeth. Neck pain, back pain, lower back pain—especially pain from the sacrum area—are all associated with TMJD. People with TMJ problems can also have an impingement of the C5-C6 vertebrae, which can radiate pain into the arm or numbness in the fingers. We try to figure out all those connections and monitor how the patient improves as treatment progresses. In fact, there is a whole-body connection to TMJ problems that emerges as part of patient protocol.”

TMJD is very commonly associated with poor sleep, as well as the inability to breathe well through the nose, Dr. Ferzli notes. “If you're not breathing through your nose at night, it's believed that the oxygen/carbon dioxide balance in the blood is altered, thereby depleting the muscles of oxygen and causing people to clench and grind their teeth more as they sleep. During the night, patients tend to move into different positions, thus affecting their tongue and surrounding area.”

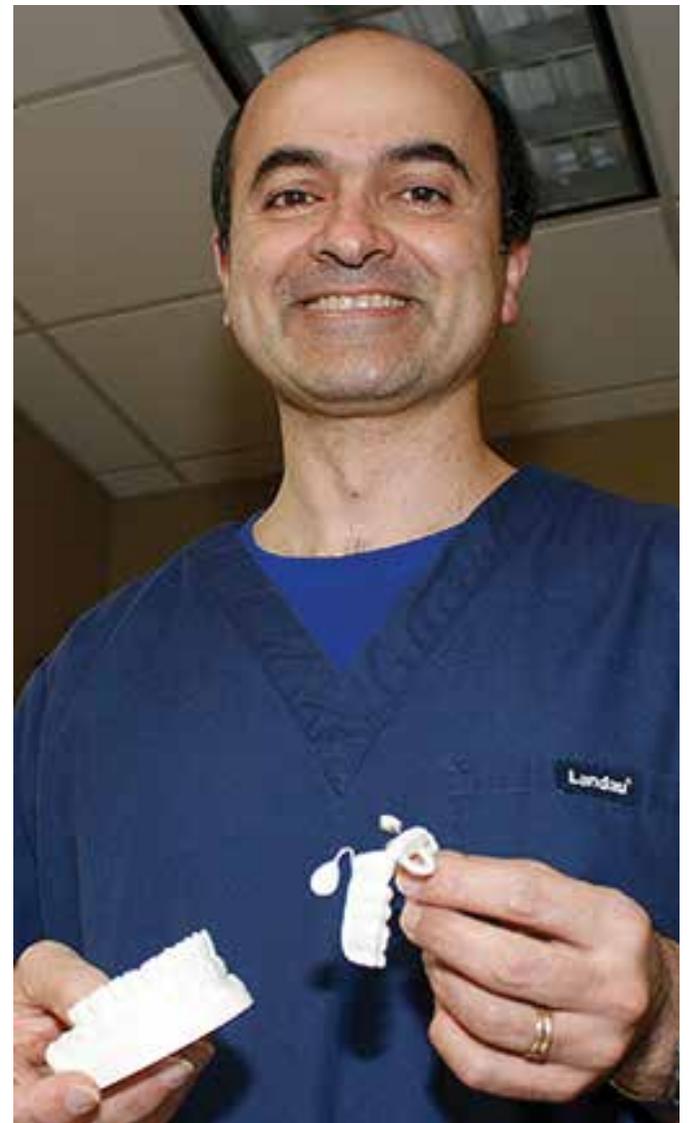
### TMJ AND DIET

Additionally, he notes, “not eating healthy food can exacerbate inflammation in the body, resulting in further pain while impeding nose breathing, which causes further nasal congestion and inflammation—often resulting in clenching of the teeth. These things are all connected.”

A classic example of this, says Dr. Ferzli, was “a patient who came to see me who was complaining of digestive problems. She had been to a gastroenterologist, who put her on acid reflux pills and fiber. Once we started treating her, we discovered that the fifth cranial nerve was responsible for her aggravated TMJD. It connects at the base of the neck to the vagus nerve, which relates to all of the internal organs. Calming the fifth cranial nerve indirectly calms the digestive tract. People who have digestive problems do better once we treat their TMJD. This patient ecstatically informed me that I fixed her GI problems, as well as other problems that I didn't even know she had.”

### THE MANY FACES OF TMJD

People frequently aren't aware of the variety of problems caused or exacerbated by TMJD. Because the temporomandibular joint is close to the ear, Dr. Ferzli explains, some people with TMJ issues experience vertigo and dizziness. “They don't understand how treating the temporomandibular joint with



Dr. Ferzli holding the mouth appliances that often impact quality of life.

an oral appliance can help their balance,” he explains. “In fact, three things can affect someone's balance: their vision, their TMJ, and their feet. After treatment, people tell us that they used to bump into walls and they don't do that anymore.

“TMJ problems have also been connected to motor movement disorders and Parkinson's disease,” he says. “We're not treating these conditions, but we are treating the TMJD, with the side benefit being that people with tics and Tourette's syndrome improve greatly. The fifth cranial nerve causes a lot of inflammation and treating the condition with oral devices to restore balance helps calm the nervous system. Quite often we can get rid of all the symptoms so they're not even noticeable. When we treat kids with tics, people can hardly tell they have them. When we calm the trigeminal nervous system, Parkinson's patients have less movement disorders, as well.

“Because our brain protects us from feeling pain, we put our bodies into certain positions to be pain free. Once you decompress the system,” Dr. Ferzli states, “things most often change for the better.”

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