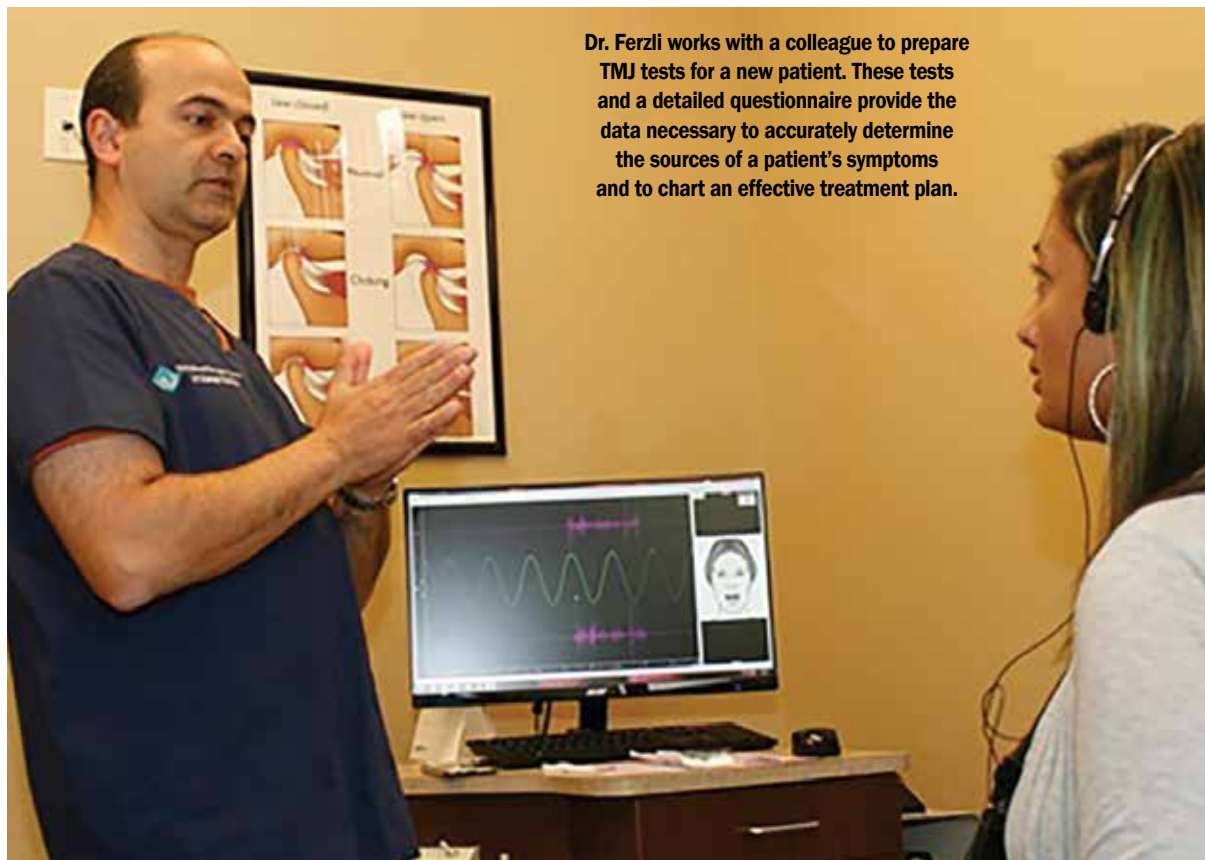


Identifying and Connecting *Root Problems for Lasting Relief*



Dr. Ferzli works with a colleague to prepare TMJ tests for a new patient. These tests and a detailed questionnaire provide the data necessary to accurately determine the sources of a patient's symptoms and to chart an effective treatment plan.

“Persistent headaches and jaw pain are rarely caused by a single problem; healing cannot be achieved by treating one symptom alone.”

In another era, observes Dr. Charles Ferzli, of the TMJ & Sleep Therapy Centre in Cary, “over-the-counter healing” meant a walk down the aisles of a pharmacy, examining options for symptom relief. Today, the Internet is the primary resource for those seeking explanations and treatment options for symptoms.

“However,” he notes, “while there is a great deal of valuable information available on-line the information overload is overwhelming. And—maybe more important—treating head and jaw pain is a complex challenge that isn’t easily explained and doesn’t respond to single remedies.

“Persistent headaches and jaw pain are rarely caused by a single problem,” explains Dr. Ferzli. “Most often, there are multiple factors—interacting with one another—causing the pain. These might include dental and jaw issues, sleep problems, diet, allergies, even medications. Ultimately, healing cannot be achieved by treating one symptom alone.”

DETERMINING THE CAUSE

The healing process, says Dr. Ferzli, begins with a detailed process to determine

the root cause—or, more likely, *causes*—of the patient’s problem. Step one, he says, is to rule out certain organic causes.

“Many of the patients who come to us with head and neck pain have already seen a neurologist and, often, have been to just about every medical specialist they can think of seeking relief,” says Dr. Ferzli. “Most often, the specialists have ruled out all organic causes of headaches—which means that the presenting condition is almost certainly not caused by a cancer or growth of any kind. But while that’s comforting, it’s also very frustrating when no one can tell them why they are in such pain or how they can fix the problem.”

Although primary care doctors often turn to medication when a problem can’t be found, “Our goal,” says Dr. Ferzli, “is to determine the source of the pain and then to design a treatment plan to address it.”

But he cautions that headaches are not easily diagnosed without a comprehensive history. “We start,” he says, “with a questionnaire seeking information on over 100 different health conditions—which underscores the important connections between body parts and systems. Red flags include anything related to jaw pain, facial pain, headaches, difficulty opening the jaw, or clicking or popping sounds; they also include sleep problems and allergies. The interrelationships—and equal importance—of TMJ, sleep issues, inflammation, prescriptions, OTC medications, and diet are key.

“TMJD (temporomandibular joint disorder),” observes Dr. Ferzli, “is perhaps one of the best examples of that

interconnectivity. It has been called ‘the great imposter’ because its symptoms are so often the same as those for many other disorders. And often it is closely associated with other health issues, such as sleep apnea.”

SLEEP ISSUES AND INFLAMMATION

In his search for causes of TMJ pain, Dr. Ferzli frequently uncovers sleep issues, even in people who don’t think they have them. Fatigue, difficulty falling or staying asleep, or waking up feeling tired can all indicate a problem. Another possible cue is the use of high blood pressure medications, which may indicate an airway problem that could affect sleep.

“In my experience,” notes Dr. Ferzli, “systemic inflammation is the most common cause of sleep issues and pain. Inflammation elevates cortisol levels, which can interfere with the ability to fall asleep easily. Diet, allergies, environmental factors, and poor sleep hygiene can all contribute to increased cortisol levels. And lack of proper nasal breathing also promotes inflammation in the body.

“Again and again,” he observes with a smile, “we can see power of these connections. What’s equally important is to understand that—just as multiple factors come together resulting in pain and disease—healing is also multi-factorial. Improved sleep can help with jaw pain; diet adjustments help reduce inflammation; oral appliances can relieve pain and improve sleep. Our goal is to design the right combination of changes and therapies to set each patient on a permanent healing path.” *h&h*

LONG-LASTING PAIN RELIEF AT LONG LAST

For a 58-year-old patient we’ll call Julia, finding her way to Dr. Ferzli represented the beginning of the end of years of unremitting pain. “I had been dealing with TMJ pain for years,” Julia says. “And I’d been to several doctors, but it hadn’t helped much. I got a little relief from pain medication and massages, and my dentist prescribed a mouthpiece. But the pain continued and then, after a series of rear-end car crashes, and the stress of the pandemic, it got much worse. What brought me to Dr. Ferzli was not only the jaw pain, but extreme neck pain and headaches—it felt like I had a knot on top of my head pressing down. And I was concerned about how much Advil I needed just to function.

“When I first arrived, the pain was about a nine on a one-to-ten scale,” recalls Julia. “Now, about eight months later, I’m not totally pain free, but when I’m having pain, it’s more like a two on that scale. The process took time, but it has made a huge difference.”

But Julia acknowledges that she was skeptical at first about Dr. Ferzli’s healing plan. “I thought: ‘Do I really have to eat with a mouthpiece?!’ But he showed me the X-rays and explained why it would help, and even though it took months of wearing it all the time—even while eating—it did work.”

That mouthpiece was just one part of Dr. Ferzli’s comprehensive plan to address Julia’s problems. “I wore one mouthpiece during the day and a different one at night,” she says. “I also got laser treatments for the pain in my jaw and neck muscles. And he ordered a sleep study to find out if sleep problems were caused by the TMJ pain or maybe were contributing to it. What we found was that the pain was interfering with my ability to enter deep sleep.”

Dr. Ferzli explained to her how sleep, breathing, and even diet all related to her pain and other symptoms. He even advised her to avoid refined carbohydrates, which can increase swelling and pain. “It was difficult,” Julia admits, “but what was so nice about it is that he—and all his staff—are so helpful. They guided me step by step through the whole process and were always available when I needed help or had questions.”

After three or four months, Julia found that her pain started to lessen and she began to sleep better. “I was shocked,” she recalls, “because all of a sudden I was dreaming again. And, slowly but surely, everything started coming back.” Now, five months later, Julia no longer wears the daytime appliance except as an emergency backup on a bad day. But she will continue to wear the nighttime appliance and follow Dr. Ferzli’s instructions to promote better breathing and airflow, as well as to reduce inflammation.

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