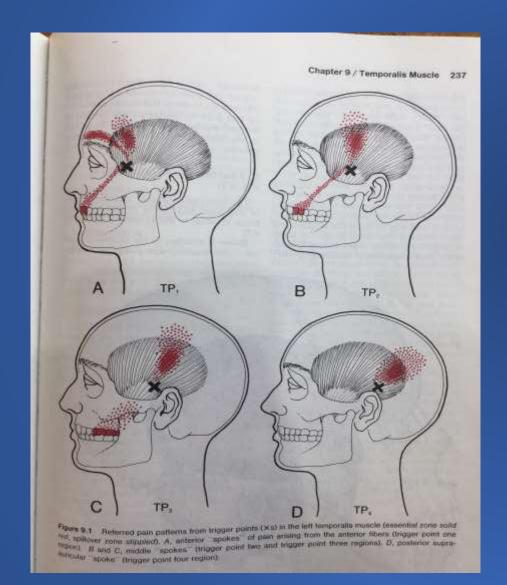
Temporalis Trigger Point referral sites

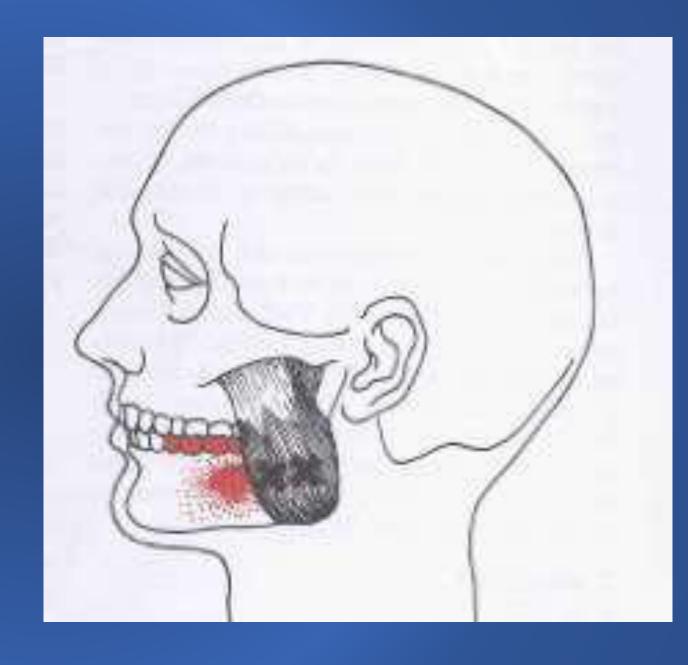


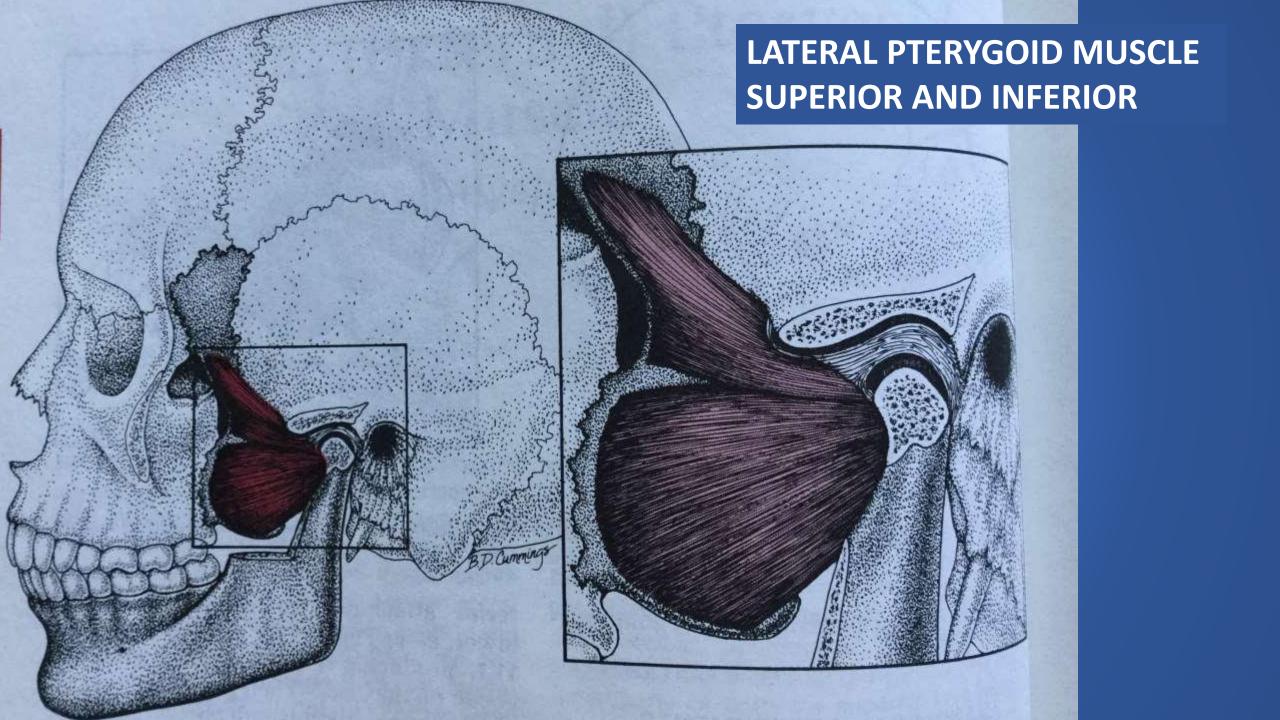
Janet Travell injected saline solution into muscles, simulating Trigger points, and mapped the pain felt. NB note the referral to the Maxillary teeth **MYOFASCIAL PAIN**

Masseter Muscle

Powerful chewing muscle
Trigger points refer pain to mandibular teeth

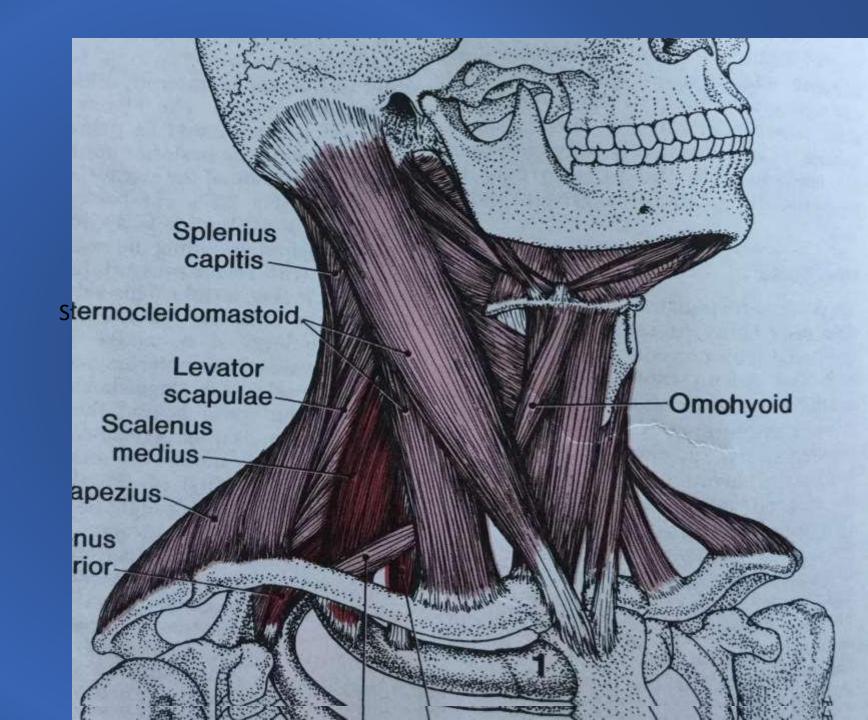
SITE OF PAIN vs SOURCE

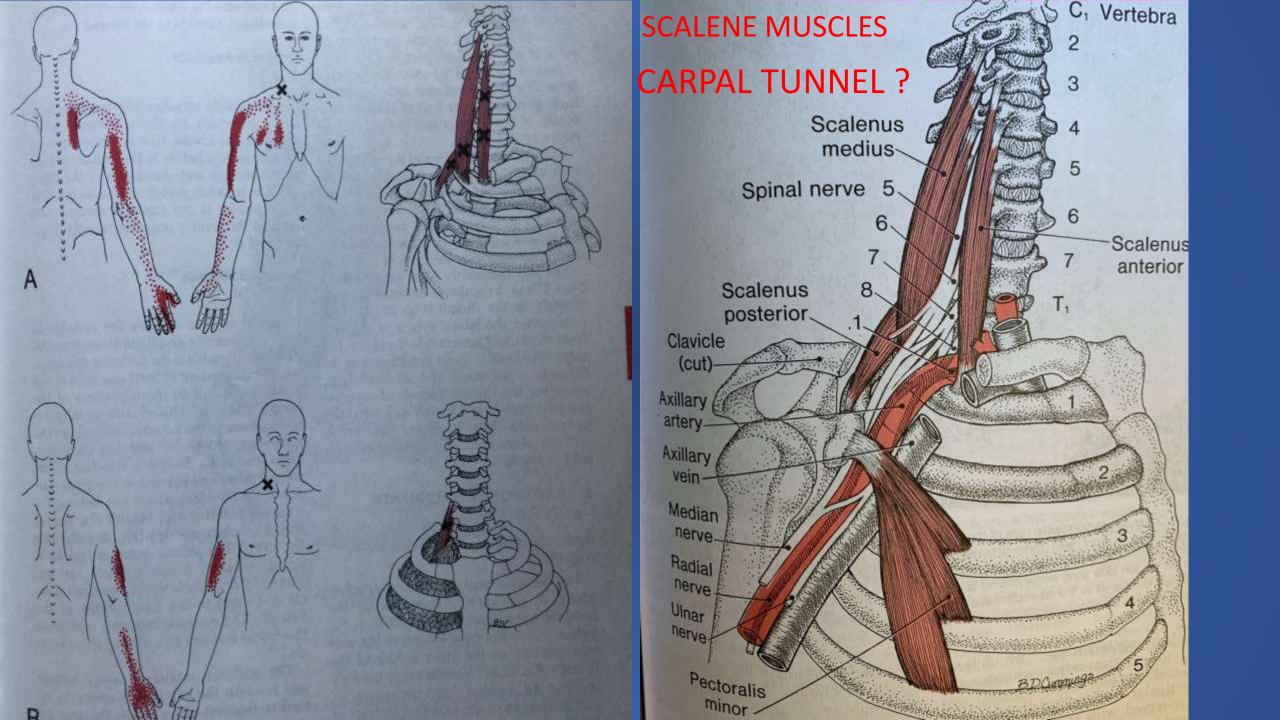




Neck muscles:

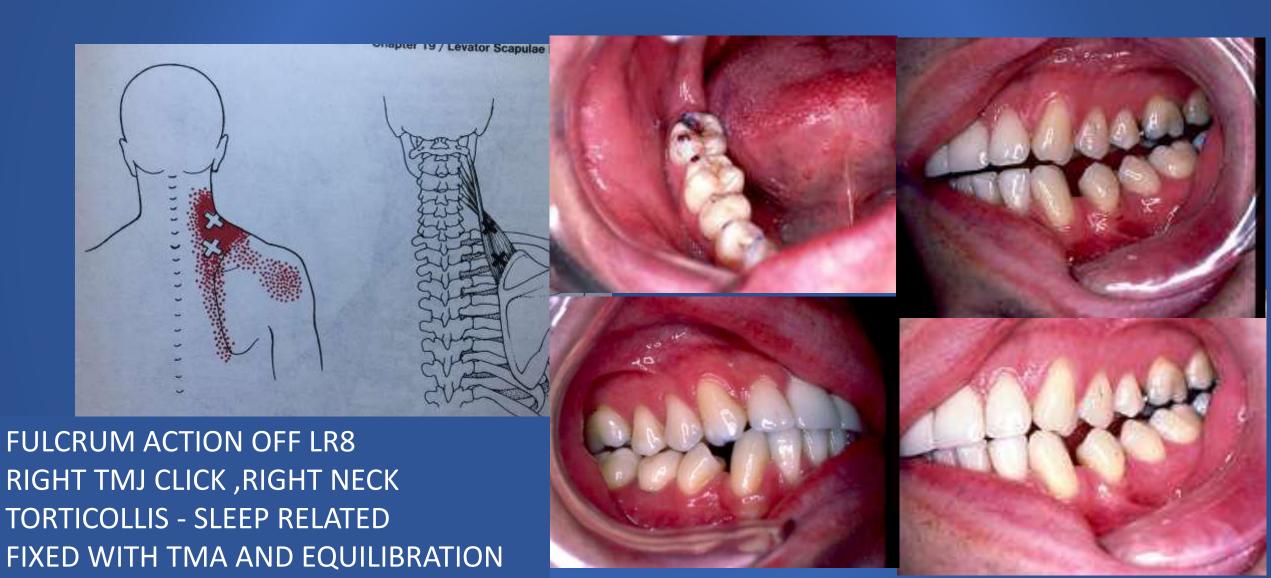
SternoCleido-Mastoid, Scalene, Infra-hyoid, Trapezius, Digastric







10 yrs Intermittent Torticollis, Wry neck (PB 1983)



How do I assess the occlusal function?

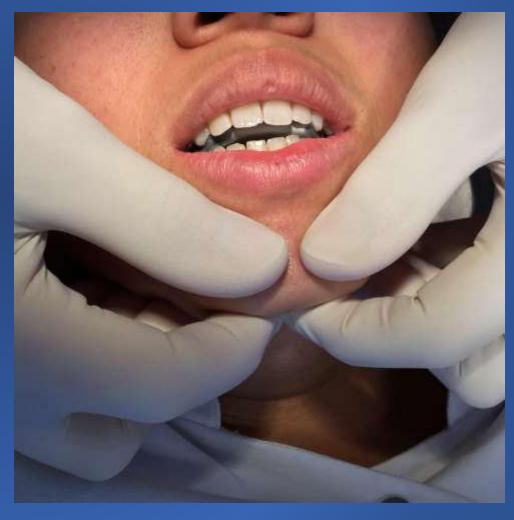
- 1. History and symptoms, eg headaches, neck aches, facial pain
- 2. Dental examination
- 3. Muscle and TMJ examination
- Study models mounted in CENTRIC RELATION on an anatomical articulator



Accurate Stone models, from alginate impressions in metal rim-lock trays, poured within 10 minutes

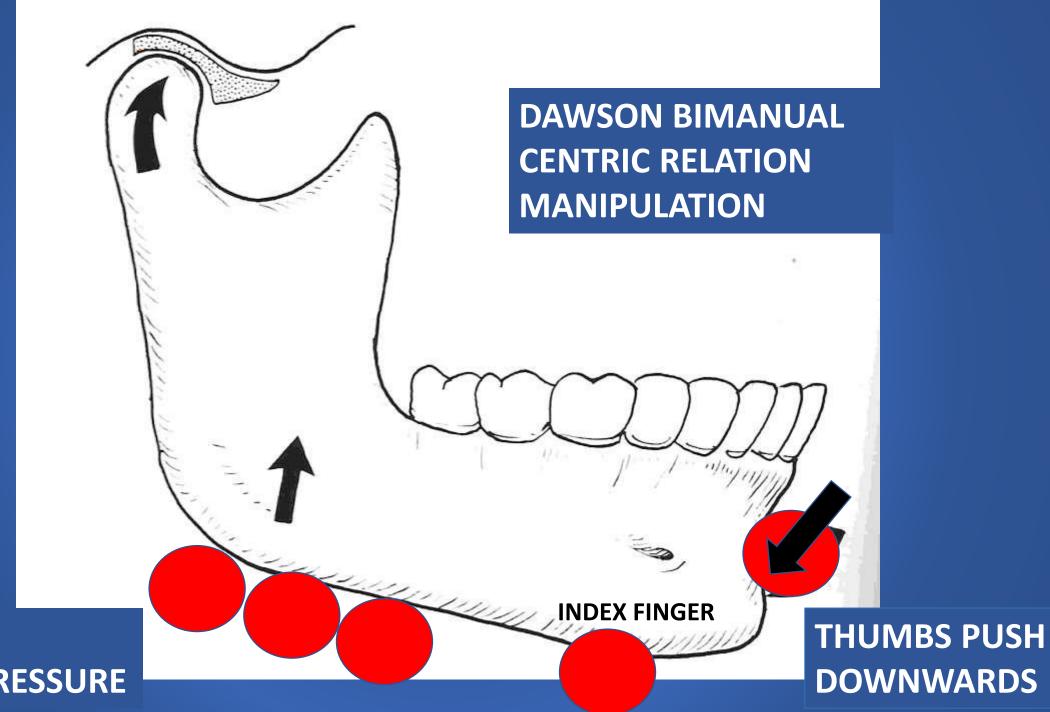
Centric Relation Record "DAWSON" manipulation on soft Aluwax





CENTRIC RELATION

The relationship of the mandible to the maxilla when the PROPERLY ALIGNED condyle-disc assemblies are in the most superior position against the eminentia, irrespective of tooth position or vertical dimension.



3 FINGERS
UPWARD PRESSURE

Upper Study Model transferred to Semi-Adjustable Articulator with Ear-Bow



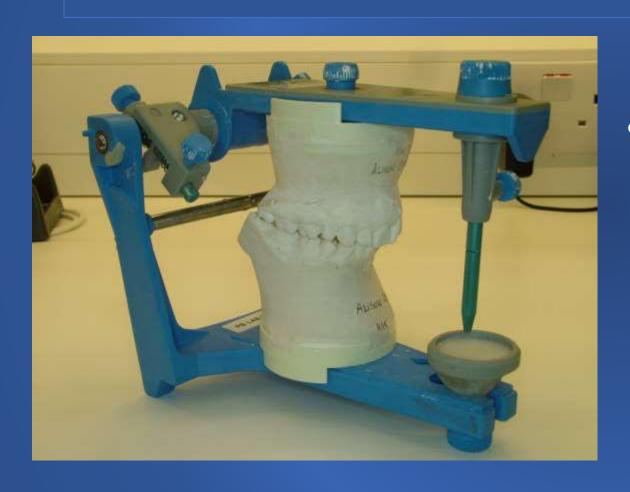


Mounting Lower model to upper with Centric Relation Bite





Models mounted in Centric Relation



 To analyse the true dental articulation when the condyle is seated in the Glenoid Fossa, without any muscle reaction

How do I assess the occlusal function?

- 1. History and symptoms, eg headaches, neck aches, facial pain
- 2. Dental examination
- 3. Muscle and TMJ examination
- 4. Study models mounted in CENTRIC RELATION on an anatomical articulator
- 5. Construct and fit a PERMISSIVE OCCLUSAL APPLIANCE

Tanner appliance made from "Triad Transheet" Colorless LC acrylic on foil spaced model

to allow space to reline in the mouth with Triad gel



The Tanner Mandibular Appliance

 PASSIVE/PERMISSIVE APPLIANCE applies an optimal CENTRIC RELATION occlusion to help with diagnosis of muscular issues arising from negative proprioceptive reaction

• ie THE TANNER APPLIANCE, provides ideal occlusion in harmony with muscles



A CLIP ON PERFECT BITE

The TANNER APPLIANCE A CLIP-ON PERFECT BITE

EMPIRICALLY ASKS THE QUESTION:

HOW WOULD HAVING A PERFECTED BITE AFFECT YOU?

A diagnostic treatment appliance

 Provides an indirect, reversible, method of altering the occlusion until a correct TMJ condylar position is determined and confirmed

- Illows healing and til sue repair of joints muscles and ligaments llows adjunctive the apies to be started by neutralising occlusa arafunctional and dy functional forces, eg Ab treatment llps in understanding of accturnal bruxing habits, and offers a tective cover
- Applies immediate relief to a distressed dentition and periodon
 Can be used for Orthodontic retention, pre-equilibration

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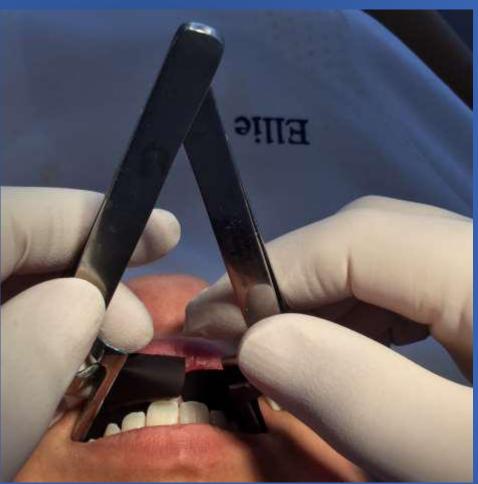
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Bausch Articulating papers to mark bite contacts





MARKING SEQUENCE

1 DRY – TISSUE

2 MARK ALL EXCURSIONS—BLUE

3 TAP TWICE ON RED Habit bite

4 MANIPULATE JAW ON GREEN = CRO The Tanner Appliance



THE CLIP-ON PERFECT BITE

Anterior Deprogrammer

- Fits over the anterior teeth
- reduces clenching and bruxing forces
- direct effect on Temporalis & Masseter (emg studies)
- Only temporary use
- –partial coverage could allow unwanted bite changes with prolonged wear





Triad putty smoothed over front teeth with cotton rolls deprogramming, and maintaining TMJs in CRO



Triad polymerized with Light





Adjusted and ready for polishing

Roy, AO Referral, 15 year Trigeminal Neuralgia history, taking maximum Tegretol





CRO BITE RECORD

AQUIRED OCCLUSION ANTERIOR CROSS BITE