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TMJ/Orofacial Pain & Dental Sleep Medicine

Spring 2016

Headache Attributed to Masticatory Myofascial Pain

Porporatti AL, Stuginski-Barbosa J, et al.

J Oral Facial Pain Headache. 2015 Fall;29(4):323-30

The purpose of this study was to describe the characteristics of headaches attributed to temporomandibular disorders (TMD) and assess the effects of two management strategies used for the management of TMD on headache intensity and frequency. The initial sample (n=60) of this randomized controlled trial comprised patients with masticatory myofascial pain according to the Research Diagnostic Criteria for TMD (RDC/TMD), and headache. The patients were divided into two groups: group 1 received only counseling for behavioral changes, and group 2 received counseling and an occlusal appliance. A 5-month followup period included three assessments. TMD-related headache characteristics, eg., headache intensity (scored on a visual analog scale [VAS]) and frequency were measured by a questionnaire.

Results found that the main clinical features of headache attributed to masticatory myofascial pain were the long duration (≥ 4 hours), frontotemporal bilateral location, and a pressing/tightening quality. Forty-one subjects (group 1, 17 subjects; group 2, 24 subjects) were included in the final analysis. There was a reduction in headache intensity and frequency, with no significant differences between groups. The mean baseline VAS was 7.6 for group 1 and 6.5 for group 2; final values were 3.1 and 2.5 respectively.

Headache attributed to masticatory myofascial pain was mainly characterized by long duration, frontotemporal bilateral location, and a pressing/tightening quality. Also, counseling and behavioral management of masticatory myofascial pain improved headache, regardless of the use of an occlusal appliance.