Vita
HEAD NECK & FACIAL
Pain Relief Center

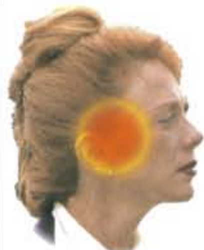
HEALTHCARE PROFESSIONAL BULLETIN

VOL. 2, NO. 2 Summer 2008

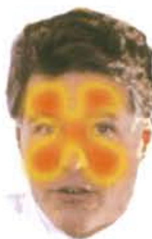
Published by **Louis R. Vita, D.D.S.**
Fellow Academy of General Dentistry
TMJ-Facial Pain

Location is Key...
Headaches, a REAL pain!

TMJ pain is at temples, in front of ears.



Sinus pain is behind browbone and/or cheekbones.



Cluster pain is in and around one eye.

Tension pain is like a band squeezing the head.

Migraine pain, nausea and visual changes are typical of classic form.

Neck pain is at the top and/or back of head.

According to the National Headache Foundation, more than 45 million Americans suffer from frequent or recurrent headaches. Although it is common for most people to experience headaches occasionally, those suffering from more than four headaches per month should seek the advice of a healthcare professional. Research suggests that among the causes of headaches are health problems such as depression, sinus infection or sleep apnea, and in rare cases brain infection, cancer, or stroke.

At the **Vita Head Neck & Facial Pain Relief Center**, one of the most common symptoms that patients present with is a headache. To assist in pinpointing the problem, we rely on the patient's ability to locate the pain. The **location** usually follows a particular pattern, which directs us to the source of the pain.

Headaches associated with a TMJ/TMD source usually present as bilateral temporal, bilateral parietal, and pre-auricular area pains and are often considered "tension type" or muscular associated headaches.

Headaches or head pains located at the occipital regions, the vertex, or into the temples, are usually associated with cervical dysfunctions.

Therefore, all patients presenting with frequent headaches must be evaluated for a structural dysfunctional source, especially if they fit the typical pattern or profile and are recurrent and considered chronic.

Other headaches of shorter duration may be associated with infections, hormonal changes, allergies, and chemical changes, such as alcohol metabolism. We rely on the general physician or neurologist to evaluate and "rule out" other etiologies.

Migraines are a particular type of head pain that are associated with direct injury to the trigeminal-vascular system. Therefore, those patients with an appropriate, definite diagnosis of migraine should be properly evaluated for nerve and vascular disease.

According to research offered at the recent Annual Symposium, males suffering from migraine with aura have an increased risk of cardiovascular disease and myocardial infarction. Females with migraine have an increased risk of stroke only if they have a history of cigarette smoking or have been on birth control pills. Those over the age of forty-five have double the risk of cardiovascular disease.

Therefore, we strongly recommend that all patients suffering from "migraine" type headaches undergo a thorough neurological evaluation including Brain MRI with contrast and cardiac workup. This evaluation will pay particular attention to valvular dysfunction, since recent studies support that forty-four percent of all migraneurs present with Patent Foramen Ovale, which involves a shunt from the right to left atrium interfering with blood filtering and increased risk of embuli.

The most severe type of headache develops with a sudden onset, is very severe and debilitating, and may include vomiting. In these cases, immediate attention is required.

In conclusion, although most people suffer intermittently from headaches, those with recurrent headaches, including daily, weekly, or monthly occurrence, must be evaluated properly since headaches are a sign of a dysfunction and health concern. Those with sudden, severe headache pain should regard it as an urgent or emergency situation.

Neuropathic Face Pains

The most challenging patients in our field include those that present with neuropathic or nerve related pain patterning. These patients often present with burning, stabbing, and sharp pains that sometimes occur in the absence of direct trauma or reason.

Neuropathic face pains involve the distribution of the trigeminal nerve with an increase in sensation and activity. These pain patterns often mimic those of dental pathological origin, TMJ-muscle-type pain, or intraoral mucosal pain from central convergence/divergence.

It is common for healthcare providers to misinterpret this pattern of pain and develop a different diagnosis. Many healthcare providers often choose to treat or even extract teeth when faced with direct tooth pain, only to have the pain remain once the tooth is lost.

The Trigeminal Neuralgia Association is continually providing research on causes and effective therapies in treating this special condition.At the recent regional conference in New York City, lecturers presented the research direction in developing a universal classification system and appropriate definition to assist in communication among healthcare providers. This new method will account for all possible causes and reduce the risk of misdiagnosis and inappropriate therapies.

Treatment for patients suffering from neuropathic face pains was also discussed at this conference. After the proper diagnosis has been established for a patient, the first line of treatment to reduce neuronal excitability would include appropriate medications and in extreme cases, possible surgical intervention and nerve blocks are considered.

A neurologist properly trained in neuropathic face pains should be consulted to provide active and follow-up care. We at the **Vita Pain Relief Center** assist in the treatment of neuropathic pain patients by reducing or eliminating structural dysfunction which would continue to stimulate and provide hyperexcitability to the trigeminal system. Our focus is to reduce TM joint, muscle, and occlusal (bite) forces and joint overload, which directly stimulate the trigeminal nerve, and to correct cervical dysfunction by realigning the Altas bone of the neck to decrease cervical nerve stimulation to the trigeminal system.

In summary, the treatment of patients suffering from neuropathic face pains is truly a **joint medical effort** to assume a proper diagnosis and to develop the most appropriate treatment protocol for each patient. Each patient must be followed closely and if their response to treatment is unacceptable, future treatment options must be explored.

Have you seen Dr. Vita being interviewed on

Just go to: www.wcbs880.com

- Click on HEALTH
- Scroll down and click on TMJ Dysfunctions

This past spring, Dr. Louis Vita attended two major professional conferences related to relieving pain in patients:

- Twentieth Annual Symposium on **"Treatment of Headaches and Facial Pain"** sponsored by the New York Academy of Medicine and the New York Headache Foundation.
- Trigeminal Neuralgia Association Regional Conference in New York City on **"Neuropathic Face Pain"**

Be sure to visit our updated and newly re-designed website @
www.DrLouisVita.com

From a personal note:

Dear Dr. Vita,

Thanks to you I am happy to report that my bite has returned to normal and my TMJ is seldom a problem. I'd like to extend my sincere gratitude to you for the professional and caring manner in which I was treated. Your entire staff made every office visit as pleasant as possible. Once again, thank you for the courtesy and kindness extended to me.

Sincerely,
A.R.
Wayne, NJ

And more from...

Anke G. *who resides in Sussex County, more than an hour's drive from the **Vita Head, Neck and Facial Pain Relief Center** has had a genetic disorder that affected the development of her lower jaw beginning at age 12, over 20 years ago. She had suffered the classic symptoms of TMJ dysfunction: headaches, earaches, and clicking sounds when she ate. Her dentist, a patient of Dr. Vita himself, referred Anke. She began treatment in November of 2007 and soon began to experience improvements.*

"Dr. Vita is very thorough and honest. He gives me choices and tells you what will work. He really cares."

For more information or to make an appointment call: 973-777-1933
fax: 973-777-4727

Conveniently located at
991 Van Houten Ave, Clifton, NJ 07013
www.DrLouisVita.com

OFFICE HOURS: MONDAY, TUESDAY, WEDNESDAY 7:00 AM - 7:00 PM • THURSDAY, FRIDAY, SATURDAY 7:00 AM - 1:00 PM