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Correlation between Myofascial Pain Dysfunction Syndrome and Cervical Pain: A Review

Smriti Jagdhari Golhar*

Department of Oral Medicine & Radiology, VSPM'S Dental College & Research Center, India

Abstracts

MPDS are one of the main sources of chronic orofacial pain interfering with daily activities. These disorders also are commonly associated with other symptoms affecting the head and neck region, such as headache, ear-related symptoms, cervical spine dysfunction and altered head and cervical posture.

Keywords: Myofascial Pain Dysfunction Syndrome (MPDS); Cervical pain; Craniocervical posture

Abbreviations: MPDS: Myofascial Pain Dysfunction Syndrome; TMD: Temporomandibular Disorders

Introduction

Temporomandibular disorders (TMD) consist of a group of pathologies affecting the masticatory muscles, the temporomandibular joint, and related structures. MPDS constitute a major public health problem, as they are one of the main sources of chronic orofacial pain interfering with daily activities. These disorders also are commonly associated with other symptoms affecting the head and neck region, such as headache, ear-related symptoms, cervical spine dysfunction, and altered cervical posture [1-4]. There is a documentation of interconnection between neuroanatomy and neurophysiology and its effects on orofacial area. It is noted that change in craniocervical junction can alter the occlusion patterns and jaw position. It is also noted that the masticatory system can influence the position of the craniocervical junction. Thus, myofascial dysfunction may lead to compensatory changes in the craniocervical posture and develop the neck pain.

Nicolakis et al. [5] stated in his several studies that it is postulated that posture of cervical spine and electromyographic activity of the masseter and temporalis muscles is interrelated. Shrinivas et al. [6] found 50% MPDS patients suffering from craniocervical dysfunction in his study. According to him, MPDS in TMJ region can be caused by craniocervical dysfunction and alternatively crániocervical dysfunction can be caused by MPDS in TMJ region. Study done by Okade et al. [7] showed that cervical dysfunction may be one of the extrinsic etiologic factors for MPDS. Another study was undertaken with the objective of therapeutic evaluation of cervical dysfunction in MPDS showed cervical pain showed significant improvement to physiotherapy given for MPDS patients [2]. Therefore, it is proven that there is a positive correlation between MPDS and cervical (neck) pain. Dentist as well as orthopaedic surgeon should be aware of this association for interdisciplinary approach towards patient management.

*Corresponding author: Smriti Jagdhari Golhar, Assistant Professor, Department of Oral Medicine & Radiology, VSPM'S Dental College & Research Center, C/O Dr. Anil Golhar, 256 Ramdaspeth, Nagpur, Maharashtra, India

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