

OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Wayne Terai

Whiplash and Jaw Problems

A crucial tenet of chiropractic is that the body works as a whole and should be treated as such, not as a series of isolated parts. Doctors of chiropractic, like Dr. Terai, understand that dysfunction in one area of the body will affect function in other areas. The relationship between whiplash injury and temporomandibular disorder (TMD) is a clear example of this premise.



Many people don't realize that sustaining a whiplash injury can affect more than the neck — and that the injury can be long-lasting. Any accident, even a minor fender bender, may trigger serious conditions. **Vertebral subluxations** are areas in the spine where movement is restricted or vertebrae are slightly out of place.

Whiplash injury frequently causes vertebral subluxations, which can, in turn, lead to temporomandibular (or jaw) issues. Dr. Terai uses gentle maneuvers called **chiropractic adjustments** to remove vertebral subluxations.

The Whiplash/TMD Link

Many studies link whiplash injury to temporomandibular joint dysfunction — or a dysfunction in the jaw joint. One 2008 investigation specifically reviewed whether a whiplash injury can lead to TMD. In the study, researchers examined 187 patients with whiplash-associated disorders (WAD).

The investigators found that “TMD could be verified in all patients with WAD. According to these investigations a craniomandibular disorder (CMD) [disorder of the head and face muscles] was regularly found in patients with WAD and relief from suffering can often not be achieved without treatment of the CMD.” (*HNO* 2008;56:1114-21.)

Another 2004 analysis compared the prevalence of temporomandibular disorders between individuals with chronic WAD and a control group. Researchers found that 89 percent of the individuals in the WAD group had severe symptoms of TMD, compared with 18 percent in the control group. The researchers concluded that “the prevalence of TMD was higher among individuals with chronic WAD. ... The results indicate that trauma to the neck also affects temporomandibular

function.” (*Swed Dent J* 2004;28:29.)

Another study found that whiplash injuries often lead to impaired jaw function and eating difficulties. The investigation compared 50 WAD patients with pain and dysfunction in the jaw-face region with 50 healthy age- and sex-matched controls without any history of neck injury.

The researchers found that before the accident, study participants in both the healthy and the WAD group reported no or few symptoms. After the accident, the WAD patients complained of pain and dysfunction during mouth opening, biting, chewing, swallowing and yawning.

They also felt fatigue, stiffness and numbness in the jaw-face region. In addition, a majority also reported avoiding tough food and big pieces of food and taking breaks during meals.

The researchers concluded that “these observations suggest an association between neck injury and disturbed jaw function and therefore impaired eating behaviour. A clinical implication is that examination of jaw function should be recommended as part of the assessment and rehabilitation of WAD patients.” (*Swed Dent J* 2008;32:171.)



**Dr. Wayne Terai, Burtch Chiropractic (250) 860-4518
229-1634 Harvey Avenue, Kelowna, BC V1Y 6G2 www.burtchchiropractic.com**



Chiropractic Care for Whiplash

If you suffer a whiplash injury, it's essential to schedule a chiropractic evaluation right away, even if you don't have symptoms. The doctor will examine not only your neck and spine for signs of injury, but also other areas, including the jaw, that could also be affected. The doctor will work to correct any related problems, and to prevent any from emerging later.

Research shows that chiropractic care is highly effective in alleviating the pain and discomfort of whiplash injury. According to a report in the *Journal of Orthopaedic Medicine*, chiropractic is "the only proven effective treatment" for chronic whiplash injury.

Investigators pooled data from telephone interviews of 93 (68 female and 25 male) chiropractic patients with chronic whiplash. Patients were divided into three groups. Group one suffered neck pain and restricted range of motion. Group two demonstrated nervous system problems. Group three reported severe neck pain and an "unusual complex of symptoms," such as blackouts, visual disturbances, nausea and chest pain.

Each participant received an average of 19 chiropractic adjustments over approximately four months. Altogether, 74 percent of patients improved following chiropractic care.

Specifically, 72 percent of group one, 94 percent of group two and 27 percent of group three benefited from chiropractic adjustments. Even better, 24 percent of group one and 38 percent of group two became symptom-free following chiropractic care (*J Orthopaedic Medicine* 1999;21:22-5).

Chiropractic Care for TMD

Receiving regular chiropractic care after sustaining a whiplash injury can keep TMD at bay. But if you suspect you already have TMD, chiropractic can help get to the source of your discomfort and stop it for good.

In fact, research shows that more and more people are turning to complementary and alternative medicine (CAM), including chiropractic, for relief from TMD. One recent study examined the use of CAM therapies among 192 patients with TMD. Nearly two-thirds of the respondents reported using CAM therapies for TMD or a related condition. In general, respondents who used CAM for their TMD reported being most satisfied with the "hands on" CAM therapies, such as chiropractic care (*J Orofac Pain* 2003;17:224-36).

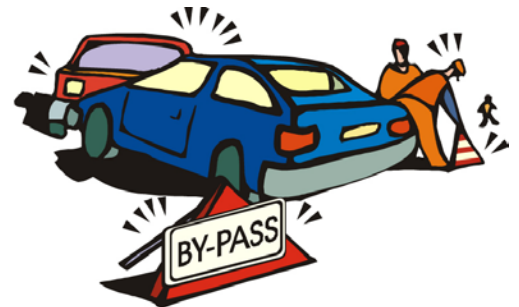
In another report, a doctor of chiropractic cared for patients suffering from TMD. Patients were seen three times a week for two weeks and received adjustments to the spine and jaw. At the end of two weeks, 90 per-

cent of the patients reported significant improvement (*J Manipulative Physiol Ther* 2003;26:421-25).

Finally, a case study followed a 30-year-old woman with temporomandibular joint (TMJ) pain. The patient suffered from nonstop jaw pain for seven years. The researchers report that "pain radiated from her TMJ into her shoulder and was accompanied by headache, tinnitus, decreased hearing, and a feeling of congestion in her right ear. Symptoms were not reduced by medication or other dental treatments."

The patient underwent chiropractic care and improved significantly. During the first five months, her jaw pain decreased; her ability to eat solid foods increased; her headache intensity and frequency diminished; and her ability to open her mouth without pain improved.

After 20 months of chiropractic care, she was symptom-free beyond some fullness of the right cheek. The researchers concluded that chiropractic care "was beneficial for this patient and merits further study in similar cases." (*Altern Ther Health Med* 2005;11:70-3.)



Optimal Health University™ is a professional service of PreventiCare Publishing®. The information and recommendations appearing on these pages are appropriate in most instances; but they are not a substitute for consultation with a health care provider. Optimal Health University™ may be photocopied (NOT reprinted) exactly as they are published noncommercially by current subscribers ONLY to share with patients or potential patients. Optimal Health University™ may NOT be reprinted in any print or electronic publication including newsletters, newspapers, magazines or Web sites. Any other reproductions are subject to PreventiCare Publishing® approval. Copyright, 2010. PreventiCare Publishing®. 1-912-897-3040. www.preventicare.com