

## **Proposal to add dystonia orofacial mandibular movement disorder to TMD subclassification due to a case**

### Introduction:

Orofacial movement disorders (OMD) are a group of disorders affecting the motor portion of the trigeminal, facial and hypoglossal cranial nerves. Oromandibular dystonia is a rare variation of focal dystonia affecting the mandible and lower half of the face.

Muscle spasms can interfere with chewing, swallowing and speaking and have been associated with uncoordinated and deviated muscle masticatory activities with antagonistic contractions found on electromyographic studies.

### Case Description:

Patient, applied with complaining of inability to speak and involuntary jaw contractions without any systemic disorder and claimed that he was comfortable and regained his speech activity using a toothpick. After examinations it diagnosed that the activity of the muscles was low. The patient was given a tens machine and an electrode. This treatment consisted of re-strengthening patient's lower jaw activity with the help of electric and vibration current and proprioceptor stimulation. Patient repeat this twice a day in the for an hour. After 2 months the mandibular muscles were perceived by the central nerve and he could perform activities such as speaking without a windlass, unless patient complained of a disturbance in chewing.

### Discussion:

In the NIH report, as well as the National Institute of Dental Research (NIDR), no distinction was made between temporomandibular disorders and myofascial pain dysfunction syndrome (MPDS); all potential etiologic factors, clinical symptoms, diagnoses and treatment recommendations were subsumed under the single term "Temporomandibular Disorders". No clear distinction was made between TMJ internal derangement problems and myofascial pain dysfunction syndrome.

Due to present case, OMD can be included in a TMD subclassification.