

Letters

Acute TMJ versus chronic TMJ

The Fall 1992 issue of *The Angle Orthodontist* contained an article entitled "Assessment of Buccal Separators in the relief of Bruxist Activity Associated with Myofacial Pain-Dysfunction" (Abraham J, Pierce C, Rinchuse D, Zullo T. *Angle Orthod.* 1992;62:177-184.) which described a University of Pittsburgh School of Dental Medicine-Orthodontic Department study of chronic TMJ. The authors concluded that the success of my buccal separator technique for acute TMJ patients was not substantiated. The article describing my findings and technique entitled "Buccal Separators For Relief of TMJ Pain and Symptoms" appeared in the October 1988 edition of *The Angle Orthodontist* (1988;58:351-356.)

The Pittsburgh chronic buccal separator study article stated in the general discussion section that the patient population was selected based upon chronic symptoms. This fact alone invalidates the study as a comparative or reproductive evaluation of my study, as well as invalidating their five conclusions labeling my success as unsubstantiated. In addition, the acute patients in my study presented themselves unsolicited while the Pittsburgh chronic study's patients presented through newspaper advertisement solicitations. This is a not a major point of disparity between our two studies, but in concert with the acute versus chronic disparity, it lends weight.

The jury is still deliberating on the underlying dynamics and linkages between para-functional nocturnal bruxing and TMJ disease. More study is needed in these areas and it is less than responsible for the Pittsburgh study to suggest that future studies on my specific technique (save my counter irritancy theory) would probably be of questionable benefit.

What is also material, aside from sorting the mixture of acute apples from chronic oranges, is to realize that the University of Pittsburgh School of Dental Medicine's Department of Orthodontics expended a considerable amount of research time and resources, and subsequently granted a post-graduate degree based upon a less than sensitive study.

In deference to my technique and the patients who might engender benefit, I would hope that the University of Pittsburgh School of Dental Medicine's Department of Orthodontics would consider balancing a new study on hot or acute TMJ patients. As before I was flattered to be asked by the Pittsburgh Orthodontic Residency Program for my pre-experimental input, and I would be happy to assist them in good faith once again with their pre-experimental plans and trajectories.

I have received many responses and letters from dentists (one of whom used separators on himself successfully) and orthodontists who have experienced varying degrees of positive results and success with my technique. I am well aware that my original studies were anecdotal, almost entirely based upon an acutely skewed patient population, and admittedly not always impenetrable to debates on relevancy based upon currently accepted tests of validity. The technique however does work well on acute TMJ patients and I am proud to stand tall espousing the veracity of my discovery and work.

If anyone would like a reprint of my original 1988 article on separating elastics, I will be happy to send one. Please write to me at my orthodontic office located at 420 College Rd., Fairbanks, Alaska 99701.

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