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Literature Abstract

Clinical orofacial characteristics associated with risk of first-onset TMD: The OPPERA prospective cohort study

This comprehensive prospective cohort study of persons initially free of temporomandibular disorder (TMD) aimed to determine whether preclinical signs and symptoms and self-reported symptoms were able to predict subsequent development of TMD. Baseline self-reported status included pain, limitation of jaw use, orofacial symptoms other than pain (nonspecific), clicking, or locking. Baseline clinical status by examination included jaw mobility, temporomandibular joint (TMJ) noises, pain on palpation, and tooth wear. A total of 2,737 adults between 18 and 44 years of age were followed for a median of 2.8 years. Of these, 260 developed first-onset TMD. Significant predictors for TMD from baseline self-reported instruments were oral parafunctions, prior facial pain, TMJ noises and locking, and nonspecific orofacial symptoms. Significant predictors from baseline clinical examination were pain on jaw opening and pain on palpation of neck, masticatory, and body muscles. Examiner assessments of joint noises and wear facets did not predict TMD incidence. Mutivariable analysis identified nonspecific symptoms, pain on opening, and oral parafunctions as predictors of TMD. The results showed that TMD incidence was more reliably predicted by several self-reported orofacial characteristics than by examiner-assessed characteristics.

Ohrbach R, Bair E, Fillingim RB, Gonzalez Y, Gordon SM, Lim PF, Ribeiro-DaSilva M, Diatchenko L, Dubner R, Greenspan JD, Knott C, Maixner W, Smith SB, Slade GD. *J Pain* 2013;14:T33–T50. **References:** 53. **Reprints:** Richard Ohrbach, Department of Oral Diagnostic Sciences, University at Buffalo, Buffalo, NY 14214, USA. Email: ohrbach@buffalo.edu—*Steven Soo, Singapore*