A Comparative Study of Simple Disc Reshaping Versus Total Discectomy in Treatment Of Internal Derangement of Temporomandibular Joint

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Dedication

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This work is dedicated to my Family

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TMD : Temporomandibular disorders

TMJ : Temporomandibular joint

ID : Internal derangement

CT : Computerized tomography

MRI : Magnetic resonance imaging

MR Ar : Magnetic resonance arthrography

US : Ultrasonography

NSAIDs : Non steroidal anti-inflammatory drugs

ARS : Anterior repositioning splint

SRS : Superior repositioning splint

TENS : Transcutaneous electrical nerve stimulation

MIO : Maximum interincisal opening

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INTRODUCTION

Temporomandibular disorders is a collective term embracing a number of clinical problems that involve the masticatory musculature, the temporomandibular joint and its associated structures or both of them.

Internal derangement of the temporomandibular joint is significantly related to displacement of the articular disc which is most commonly displaced in an anteromedial direction. Disc displacement can generally progress from the first stage where there is clicking accompanied by normal maximal interincisal opening to a stage where clicking ceases concomitantly with varying degrees of restriction in opening (closed lock).

Treatment of the anteriorly displaced disc has been gaining momentum over the last few years. Treatment modalities range from simple conservative (medications, occlusal appliances, physical therapy, arthrocentesis and arthroscopy) to invasive surgical intervention (meniscoraphy, meniscoplasty, condylectomy, eminectomy and menisectomy).

Discectomy has been used to treat anteriorly displaced disc not responding to non surgical treatment for decades. The maneuver proved efficient in eliminating all clinical signs and symptoms. However the radiographic results weren't as