

# Temporomandibular joint dislocation in Nairobi

## Abstract:

Despite the diverse conservative and surgical modalities for the management of temporomandibular joint (TMJ) dislocation and the controversy that surrounds them, very little has been done within the East-African setup in terms of highlighting and provoking greater interest in the epidemiology and management of TMJ dislocation. OBJECTIVE: To audit the pattern of occurrence, demographics, aetiology and enumerate the treatment modalities of TMJ dislocation at the oral and maxillofacial surgery division (OMFS) of the University of Nairobi Dental Hospital. DESIGN: Descriptive cross-sectional study. SETTING: University of Nairobi Dental Hospital (UNDH) from January 1995 to July 2005. RESULTS: Twenty nine patients had been diagnosed and managed for TMJ dislocation. Twenty (69%) were females and nine (31%) were males. Their ages ranged from 10-95 years with a mean of 42 years. The cases managed were primarily chronic in nature. The most common form being anterior TMJ dislocation, accounting for twenty-five (86.2%) cases. Trauma was implicated as an aetiology in only five (17%) of the cases while the remaining majority of twenty four (83%) cases were spontaneous. Amongst the causes of spontaneous TMJ dislocation, yawning was the most common accounting for fourteen cases (48.3%). Dislocations caused by trauma were found to be 12.6 times more likely to be associated with other injuries than spontaneous dislocations. Anterior TMJ dislocations were found to be 1.3 times more likely to be associated with absence of molars than posterior TMJ dislocations. Anatomical aberrations, as predisposing factors, were not a significant finding in this research. Eight (28%) of the cases were managed conservatively. Twenty one (72%) of the cases were managed surgically. The eminectomy was the most common technique with a 75% success rate. The highest incidence of TMJ dislocation occurs in the 3rd-5th decade with a female preponderance with bilateral anterior TMJ dislocation being the most common. Most of the cases were managed surgically with eminectomy being the preferred technique with the highest success rate. A study needs to be undertaken to determine reasons' why conservative modalities are least employed in the management of TMJ dislocation in our setup and what can be done about it.