

FREQUENTLY ASKED QUESTIONS

I just have headaches, why was I referred to a TMJ & Sleep Therapy Centre?

Chronic headaches are often a symptom of undiagnosed conditions of sleep-related breathing disorders or an injury to the temporomandibular joint and surrounding structures. The doctors of TMJ & Sleep Therapy Centres have been able to find the primary cause and provide effective treatment for thousands of headache patients.

I'm confused...why is your name TMJ & Sleep Therapy Centre?

First, TMJ is the term patients are most familiar with, and it is the most common component of Craniofacial Pain. Second, both TMJ and Sleep Apnea can be successfully treated non-surgically with oral appliance therapy, and these 2 conditions are often comorbid (interrelated). Our doctors are skilled in identifying and addressing the primary problem for the best treatment direction and successful long term results.

I've already tried splints, what's different about your treatment?

Unlike splints, the orthotics (orthopedic appliances) we use are individually designed using a peer reviewed bite registration to provide the best position and fit for healing. They are used short term (approximately 12 weeks) to provide support and protection to the joints during the rehabilitation process.

Why do I have to wear appliances 24 / 7?

Rehabilitation is not limited to daytime. During the day we are upright and conscious, during sleep we are prone and unconscious. Additionally, we have conscious daytime functions and habits, and we have unconscious nighttime functions and habits; both must be addressed for optimum healing.

I'm sure I only snore, why can't I just get an appliance for snoring?

If it is truly 'just snoring', you can! But neither you nor the doctor can be certain the snoring is not a symptom of sleep apnea without proper diagnosis. Treating a patient for snoring when it is really sleep apnea can have life threatening results.

I've used a night guard; it really wasn't that helpful so what's different about a sleep appliance?

A night guard is typically made to protect teeth that are being worn down due to unconscious behavior during sleep. Often that behavior is due to a breathing problem the patient is not aware of - it makes them unconsciously move the jaw around all night to get a better airway. A sleep appliance is specifically designed to maintain an open airway

I thought the only treatment option for sleep apnea was CPAP, can I use an oral appliance instead?

Yes, oral appliance therapy is one of the recommended treatment options for patients with a diagnosis of mild to moderate sleep apnea. The oral appliance is worn in the mouth to keep the airway / throat open during sleep by controlling the position of the tongue and lower jaw. For severe cases, oral appliances can also be used with CPAP to make it more tolerable to wear.



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I thought snoring was related to age and size, why do I hear loud, snoring like noises from my little child?

Snoring is an indicator of a possible sleep apnea condition. Sleep apnea has no boundaries for age or size. In fact there is a 70% overlap between snoring and apnea in children. These are staggering numbers and the reason the American Association of Pediatrics 'Practice Parameter' states that all children should be screened for snoring. An affirmative response for snoring should be followed by a more detailed evaluation.

I have been told the only 'real treatment' option for a TMJ problem is surgery, is that true?

The standard of care is always to attempt non-surgical rehabilitation before invasive surgical procedures. The percentage of patients who need surgery is extremely low.

My child has started to have night terrors and is very moody, why was I referred to a TMJ & Sleep Therapy Centre?

Night terrors and mood swings in children can indicate a sleep-related breathing disorder due to improper or insufficient skeletal development resulting in insufficient airway. This can create a form of suffocation causing night terrors and moodiness. Insufficient airway and lack of oxygen has also been associated with ADHD (attention deficit hyperactivity disorder).

Children with OSA are frequently misdiagnosed as having an ADHD and placed on unnecessary medication.

