CRANIOMANDIBULAR DYSFUNCTIONS AND POSTURE: A CASE REPORT

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BACKGROUND: Craniomandibular disorders (CMD) and poor posture are rather frequent in the general population and require a critical diagnostic and therapeutic phase. An important role is played by the dental surgeon, expert in gnathology.

AIM: The aim of the present work is to demonstrate the importance of a thorough occlusal, gnathologic and postural examination in a partially toothless patient, in order to perform a prosthetic rehabilitation respecting the articular and neuromuscular components.

MATERIALS AND METHODS: The clinical case is a 30-year-old female patient with occlusal disharmony, muscular overtone, painful limitations of opening and closing movement, articular click and consequent disharmonic postures. A thorough clinical examination of the TMJ was performed, along with intraoral registration with the Gothic arch tracing method and kinesiology. Finally, cotton rolls were placed between the teeth and then another postural examination was performed with a plumb line.

RESULTS: The patient, examined with cotton rolls placed between the teeth, both walking and plumb-line, showed a good posture re-establishment. This directed our analysis towards a clinical picture of descending postural dysfunction syndrome and, therefore, towards the need of a repositioning appliance.

DISCUSSION: A thorough evaluation of muscular system, TMJ and posture is fundamental to identify a descending postural dysfunction syndrome and to make a differential diagnosis with the ascending and mixed forms on a psychic base.

CONCLUSIONS: Before proceeding with complex prosthetic or implant-prosthetic rehabilitations in patients with postural and craniomandibular disorders, it is imperative to restore the stomatognathic balance, which allows for prosthetic manufactures in keeping with the postural system of the individual.
A failed resolution of the dysfunctional picture will contribute to worsen the set of symptoms with subsequent failures.

REFERENCES
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