Manchester University
NHS Foundation Trust

University Dental Hospital of Manchester
TMD Department

Information for Patients

Wellbeing for Temporomandibular Disorders

Pain is complicated. Because of that there are many factors at play that make it better or worse. Some of those are in your control.

This leaflet will give you some areas to consider. Treat it like a workbook. Read it through once and put a tick next to anything that you think might apply to you. There may be a few, there may be lots.

If there are lots of ticks choose 3 that you are going work on first. Write them down in the box at the bottom of the workbook.

For the next three weeks try and make a significant change to these three areas. Tell family and friends so that they can support you. Alter your routine to make sure they happen.

After three weeks you will be ready to take on another three changes to add to the ones you have already made.

Section 1: Managing a chronic pain flare up

1. **Gentle exercise.** Simple, everyday activities like walking, swimming, gardening and dancing can ease some of the pain directly by blocking pain signals to the brain. Activity also helps lessen pain by stretching stiff and tense muscles, ligaments and joints.

2. **Breathing.** When pain is intense it's very easy to start taking shallow, rapid breaths, which can make you feel dizzy, anxious or panicked. Instead breathe slowly and deeply.

3. **Counseling.** Pain can make you tired, anxious, depressed and grumpy. This can make the pain even worse, making you fall into a downward spiral. Be kind to yourself. Some people find it useful to get help from a counsellor or psychologist to discover how to deal with their emotions in relation to their pain.

4. **Distract yourself.** Shift your attention onto something else so the pain is not the only thing on your mind. Start an activity that you enjoy or find stimulating. Many hobbies, like photography, sewing or knitting, are possible even when your mobility is restricted.

5. **Share your story.** It can help to talk to someone who has experienced similar pain themselves and understands what you're going through. Pain Concern, Action on Pain, all have telephone helplines manned by people with long-term pain, who can put you in touch with local patient support groups.

6. **Take a course.** Self-management courses are free NHS-based training programmes for people who live with long-term chronic conditions such as arthritis and diabetes to develop new skills to manage their condition (and any related pain) better on a day-to-day basis. Many people who have been on a self-management course say they take fewer pain killers afterwards. The best examples are:

- Patient Publications on Pain Management Programmes – British Pain Society
- Self-Management UK – offers support to people with long term conditions

4. **Keep in touch with friends and family.** Do not let pain mean that you lose contact with people. Keeping in touch with friends and family is good for your health and can help you feel much better. Try shorter visits, maybe more often, and if you cannot get out to visit people, phone a friend, invite a family member round for tea or have a chat with your neighbour. Aim to talk about anything other than your pain, even if other people want to talk about it.

5. **Relax to beat pain.** Practising relaxation techniques regularly can help reduce persistent pain. There are many types of relaxation techniques, varying from breathing exercises to types of meditation. Ask your GP for advice in the first instance. There may be classes available locally or at your local hospital's pain clinic.

Section 2: Sleep

The need for sleep varies from person to person, studies show that people need between 6 and 10 hours of sleep a night, but it depends on your age and on level of activity. For an adult, 7-9 hours is usually recommended.

However as many as 30% of the adult population are affected by sleep problems and have difficulties sleeping at some point in their life. Getting to know what is causing your sleep problem, may help you find a solution. However, sometimes there are multiple causes.

Major causes of sleep problems

Ageing. As we get older we may sleep less well, less deep and wake up more frequently during the night.

Medical reasons.

- The need to go to the toilet at night. Bladder retraining as well as reducing caffeine intake can help.
- Medications. Some medications can interfere with sleep. Check with your GP if you are on any of them.
- Pain. Chronic pain conditions and joint problems, such as arthritis, can affect sleep.
- Diabetes, high blood pressure, breathing difficulties.
- Menopause. Some women experience sleep troubles round menopause.
- Depression and/or anxiety.
- Obstructive sleep apnoea. This condition causes breathing to repeatedly stop and start during sleep. People with obstructive sleep apnoea may wake up a lot and feel tired during the day, snore loudly, make gasping, snorting or choking noises. If you have any of the above symptoms, talk to your GP. Losing weight and sleeping on the side can help. You can buy a special pillow or a bed wedge to help keep you on your side. Do not drink too much alcohol before going to sleep.
- Restless leg syndrome. This condition causes an uncontrollable urge to move your legs when you are at rest. It can be worsened by some medications. When restless leg syndrome is not linked to an underlying medical condition, lifestyle changes can help a lot. These include avoid caffeine and tobacco in the evening and taking regular exercise.

Stress/Worries/Bereavement. When we are stressed and worried we can have difficulties falling to sleep, we can have nightmares and upsetting memories.

Disrupted sleep routine and surroundings. Sleeping in a different place, in a noisy environment or on an uncomfortable bed can affect sleep. People who work different shifts can also have a disrupted sleep pattern.

Ways to improve sleep

Before bedtime, resolve dilemmas.

- Avoid stressful situations or conversations at bedtime. Do it earlier in the evening.
- Take a pen and make a list of things that worries you in order to clear your mind. Take each problem in turn, write any possible solution. If there is nothing you can do to solve the problem, score it out and move onto the next one. Write down a few things you are grateful for and concentrate on these before you go to sleep.

Explore relaxation techniques to help you relax before bedtime. Focus on your breathing. Making it slower and deeper, can reduce your heart rate and therefore reduce cortisol, one of the hormones that is released when we are stressed.

Do not have an alcoholic beverage close to bed-time. Alcohol can make you feel sleepy, but it can also adversely affect the quality of sleep.

Do not smoke close to bed- time. Try to have your last cigarette at least 4 hours before going to bed. Nicotine is a stimulant and can keep you awake. Nicotine patches can also affect your sleep.

Cut down on caffeine. Try to avoid food and drink containing caffeine at least 4 hours before going to bed. Coffee, tea, coke, and chocolate all contain caffeine. If you fancy a bedtime drink, make sure it is without caffeine.

Exercise regularly, but not too close to bed time. Regular exercise, such as swimming or walking, can help relieve stress.

Surroundings. Make sure your bed and your pillow are comfortable. Consider the use of earplugs if there are noises and of an eye-mask if there is too much light.

Create a soothing bedtime routine.

- Peaceful reading.
- Dim the lights. Listen to some peaceful music.
- Take a warm bath or shower.
- Do not go to bed until you feel sleepy.

Your bed must be associated with sleep. Do not watch tv or use your phone in bed. Do these activities in a chair or other room until sleepy and then go to bed.

Electronic devices. Avoid the use of tablets, smart phones etc in the hour before bedtime. They emit a blue light that inhibits the production of melatonin, the hormone that helps you fall asleep.

Once in bed, focus on pleasant memories. Change the channel of your mind to thoughts of a pleasant previous activity or other pleasant visual imagery. Do not worry about not getting enough sleep and do not keep checking what the time is. Lie calm and breathe deeply through your nose. If you find yourself worrying, ask yourself if there is anything you can do about it. If not, let it go. If there are solutions, think that you will deal with this the following day when you can make a list of the steps to take.

Do not stay in bed if you cannot sleep. Instead, get up and do something else until sleepy. Relax, watch some tv or read a book (not in bed), have a warm milky drink.

Keep a regular sleeping schedule. Try to go to bed and get up roughly at the same time.

Do not nap during the day.

Know your medications. Ask which ones are likely to keep you awake. Talk to your GP for advice.

Section 3: Diet

Your TMD may affect your ability to eat a normal diet. Your clinician will give you advice about modifications that may be useful for your specific diagnosis.

There is some evidence that having a diet that helps to reduce inflammation can also have a beneficial effect on pain.

Examples of foods that help fight inflammation include:

Fruits (strawberries, blueberries, oranges, cherries)

Nuts

Tomatoes

Olive oil

Leafy greens

Fatty fish (salmon, mackerel, tuna and sardines)

Examples of foods that can worsen inflammation include:

Fried foods

Fizzy drinks

Refined carbohydrates (e.g. white bread)

Processed meats

Lard

	Area I am going to change…	How I am going to change it…
1		
2		
3		

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