

P R E S E N T I N G T H I S I S S U E

Preface

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Although it has been many years since we completed our orthodontic training, we all remember with emotion the finishing stages of our first case. The literature and our teachers in France had indoctrinated us with the imperative need to obtain what Peter Dawson claimed was essential for balanced occlusion, a good tripod relationship between the two temporo-mandibular joints and the anterior teeth, that was supposed to constitute the key to the functional health of the masticatory apparatus.

Those were indeed anguished moments. Were we really skillful enough to bend our archwires with such exquisite precision? We had to because the TMJ health of our patients depended upon it!

A reading of this issue of the *Journal of Dentofacial anomalies and Orthodontics* devoted to TMD, Temporo-Mandibular-Disorders, conveys the clear impression that this painful notion is now out of date. Should this astonish us? Hasn't dogmatism always been the appanage of disciplines in their formative days? When emerging from its early rough-hewn stages, a developing science begins to refine itself and the dogmas that helped construct its original, frequently erratic in form and direction, progressively give way to more carefully thought out principles that are diffuse in their limits but are certainly more suitable to clinical reality.

We all know that clinical reality is more complex than a simple occlusal tripodism.

Temporo-mandibular-disorders, TMD, has in fact, become such an important topic that the *Revue d'Orthopédie Dento-Faciale* together with its on-line English language version the *Journal of Dentofacial Anomalies and Orthodontics*, have decided to devote this second complete issue to it, without by any means exhausting the topic.

TMD is a pathological entity with a multifactorial etiology. To start this symposium in this issue, Olivier LAPLANCHE explains that proper management of malfunctioning of the masticatory apparatus requires a diagnosis based on a precise clinical classification especially with regard to muscles and the temporo-mandibular-joint.

In the therapeutic chapter, Jean Francois CARLIER reviews the domain of orthoses,

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which, thanks to their non-invasive nature and their ready adaptability to any situation, remain an essential tool in TMD treatment, provided they are constructed with painstaking rigor to fit the individual clinical disorder.

Continuing in the therapeutic domain and working within a tightly structured analysis of the clinical examinations that clinicians use to guide them in their daily practice, Wacyl MESNAY focuses particularly on the contributions psycho-social and pain components make to a TMD diagnosis. Even though the one-time favorite of dental gurus in their assessments of TMD, occlusion, has now been relegated to a secondary role in the etiology of this disorder, orthodontists must still be vigilant in scrutinizing it. And here the TMD therapeutic approach is illustrated by a detailed and didactic description of a treated case.

While perusing the different articles in this issue, readers will notice occasional differences in the elucidations of diagnosis and treatment, which indicates that although a sketchy consensus seems to be developing on TMD in the profession it is not yet universal.

It is probably the support of new technological techniques that will eventually clarify the differences between current concepts: Julia COHEN-LEVY describes for us her experiences with the third commercial version of T-scan, a digitized occlusal

analysis tool that records the distribution of occlusal forces in a dynamic mode. As is true with the early stages of the use of any new sophisticated instrument, it will take some time for orthodontists to “tame” it before they can integrate it efficiently into their daily practices while, at the same time, the results of various studies on the instrument will be published.

In our clinical rubric, Muriel JEAN-TET discusses a study she conducted on 100 patients with disc displacement who were treated primarily with varying types of splints. A long term follow-up and analysis yielded no **conformity of results**. Frank POUR-RAT then offers a review of the special characteristics of patients suffering from TMD in the special field of lingual orthodontics.

As an interlude that will give you time to digest this mass of information, Julien PHILIPPE, in a splendid retrospective piece, retraces the development of behavioral therapy as applied to orthodontics.

Orthodontics as a component medical discipline must obviously concern itself with the overall medical status of patients. In the orthopractice rubric, Sylvie LEGRIS emphasizes the importance of medical and ethical responsibility in relation to the recommendations published in September 2011 by the French Agency for the Safety of Health Products especially with regard to antibiotic therapy.