

Maybe it's time to see the dentist.

Welcome to SBH Bronx Health Talk produced by SBH Health System and broadcast from the beautiful studios at St. Barnabas Hospital in the Bronx. I'm Steven Clark.

So you've been diagnosed with sleep apnea. Only the CPAP machine you've been given by your sleep specialist is more trouble than it's worth. Or maybe that pain in your jaw is only growing worse.

With us today to discuss some of the things you probably didn't think you'd see a dentist for is Dr. Brijesh Chandwani, a dentist and facial pain specialist at SBH Health System. Welcome Dr. Chandwani. So let's start out by discussing sleep apnea and the problem that some people that you're seeing have with the gold standard in sleep which is the CPAP machine.

*That's a good question Steve. So when somebody has sleep apnea a lot of times the mechanism of apnea, which involves reduced breathing, involves the jaw structure and this constriction or restriction in the jaw structure and it could be the top jaw or the bottom jaw and the dentist once they do a proper evaluation can really help treating sleep apnea in patients who have failed CPAP using a mouth guard. After CPAP it's supposed to be one of the most effective modality of treating sleep apnea.*

Well, let's take a step back. Why is this CPAP troublesome for a lot of people?

*They do work really well for a small subset of patients and then another small subset of patients just don't tolerate it and it could be because of leaks or they just find it cumbersome and it is a little bit of a bigger machine which forces air compared to a dental device which is a comfortable top and bottom mouthpiece which holds the jaw in a particular position to help the breathing process.*

Okay, so let's say a patient comes to you, they haven't been happy with the CPAP, they're probably not even using it and they still have the problem of sleep apnea, what do you do?

*So I do two roles up one time if a patient says they're just not happy with it but they are able to tolerate it, I always encourage them to give it a better shot. The CPAP really is the gold standard it really works predictably, but then if they're not willing to do that or if they want an additional alternative then I evaluate them for a sleep apnea dental device which can help sleep apnea.*

Now again, we've talked about this before, the dental device is not experimental. I mean data shows that it works effectively, right?

*Absolutely. There's actually really good data to show that it helps with not just sleep, but it helps with other outcomes such as blood pressure, cholesterol and, quite predictably.*

How long does it take typically to mold one or to get one out the door and ready to use?

*During the first visit we evaluate a person to see if they are a good fit for a sleep apnea dental device. We can take impressions and certain jaw records and probably have the device ready in about two weeks.*

Okay and I guess you also tested actually with a sleep study afterwards. You send them back to the sleep specialist all right?

*Correct, because we're looking at symptomatic relief where a patient feels better where they feel refreshed in the morning after using the dental device but we also like look at objectively is it really helping the other parameters of well-being such as in saturation.*

Okay fine so again patients who have sleep apnea who've been having issues with their CPAP, do have an option.

*Absolutely and I always tell patients you have to look at it from a perspective of health a dental device helps with not just sleep but helps with cardiovascular health if untreated sleep apnea can lead to a lot more health issues – concentration issues, so it helped it kind of adversely affects our individual emotionally as well as physically.*

Okay let's shift gears and talk about TMJ. Now what exactly does it stand for and what is it?

*So TMJ is the name of the jaw joint temporal mandibular joint in common layman language it's often used to describe or kind of to say somebody has a disorder of the TM joint rather than TMJ or TMD is a word that most people use it to kind of really describe a jaw pain problem.*

So how does it come about? What causes it?

*It can be caused by joint issues in the jaw. It can something like arthritis, something like trauma can cause it, but majority of the temporal mandibular jaw disorders are caused by muscle disorders where the muscle is either overworking or spasming for most of the times it's really an unknown reason. Back in the '90s we used to think it was really because of stress, but now the understanding is a little better. We really have taken a step back, yes stress can be a factor but it's not the factor.*

Is it progressive? Does it get worse over time?

*Not always so. If somebody has arthritis in the joint it's definitely a little bit more worrisome but typically most of the temporal mandibular disorders or TMJ disorders are self-limiting.*

What do you mean by self-limiting?

*If somebody has a jaw clicking it very well could be a benign process which causes annoyance for a couple of days, but then it goes away compared to somebody who has arthritis in the joint and has a click then it's not self-limiting. So the number of patients who actually have a disease process in the joint is relatively small and a lot of our patients actually just are seen once or twice and there they recover really well.*

When is it time to see a dentist, a TMJ specialist?

*So if somebody has a jaw problem and they are having one: trouble opening the jaw or trouble eating, or if they've had jaw pain for more than four three to four weeks I think or if they are having very severe jaw pain.*

So what do you do for them?

*For a TMJ disorders that there are a spectrum of treatment options – medications, mouth guards, some injections like trigger point injections, nerve block, steroid injections botulinum toxin or Botox injections for arthritis of the joint we are we also doing PRP injections so it is PRP it's platelet rich protein or protein yeah.*

Is there a treatment that you start them out on or is it depending on the situation?

*So it really is tailor-made for the patient rather than a protocol. Every patient is very different and how quickly do they start to get relief majority of our patients are after one visit and within like one to two weeks are doing better significantly.*

Okay so I guess the bottom line is if you're having pain in your jaw you said for four weeks or so don't suck it up there's something you can do about it.

*Absolutely and a lot of times even though it's a TMJ disorder we people think of it as a jaw problem but if somebody is having headaches, especially morning headaches, they're very commonly because of TMJ disorders so again that pain in the jaw can create other problems.*

You said it can even be having problems eating because of the jaw plane absolutely so that's good to know.

So Dr. Chandwani, if somebody has either a TMJ problem or sleep apnea and is looking for another option is there a phone number they can call?

*Yes, absolutely. The phone number is 718-960-6628.*

Thank you very much doctor for joining us today on SBPH Bronx Health Talk. For more information on services available at SBH health System visit [www.sbhny.org](http://www.sbhny.org) and thank you all for joining us today until next time.