

Clinical Image

Temporomandibular Joint Involvement in Rheumatoid Arthritis

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A 41-year-old woman consulted with limited jaw movements and pain in the right preauricular region. The patient had a medical history of rheumatoid arthritis (RA) since 5 years. She had no history of trauma or infection of the temporomandibular joint (TMJ). The palpation of right preauricular region revealed the presence of crepitations, which are often an indicator of TMJ damages. A computed tomography (CT) was performed to evaluate the articular surfaces. It revealed condylar erosion and narrowed joint space in the right TMJ (Figure1). The left TMJ was normal. The diagnosis of TMJ disorder related to rheumatoid arthritis was made. Ant-inflammatory medication, physical therapy and occlusal appliance were prescribed.

RA can lead to TMJ structural damages which can be revealed by radiological investigations such as CT [1,2]. This present case supports the notion that TMJ manifestations of RA must be considered by clinicians because of their major functional impact and discomfort.



References

1. Aliko A, Ciancaglini R, Alushi A, Tafaj A, Ruci D. Temporomandibular joint involvement in rheumatoid arthritis, systemic lupus erythematosus and systemic sclerosis. *Int J Oral Maxillofac Surg.* 2011; 40: 704-709.
2. Helenius LMJ, Hallikainen D, Helenius I, Meurman JM, Kononen M, Leirisalo-Repo M, et al. Clinical and radiographic findings of the temporomandibular joint in patients with various rheumatic diseases. A case-control study. *Oral Surg Oral Med Oral Pathol Oral Radiol Endod.* 2005; 99: 455-463.