

JAW STABILISATION EXERCISES

These are exercises to help control TMJ (jaw joint) hypermobility, tooth grinding and jaw clenching. They are unlikely to cure the problem, but they will greatly assist any treatment being received, will help prevent the condition from deteriorating, and may provide temporary reduction in the symptoms associated with the TMJ misalignment. They are based on exercises recommended by a Dentist specialising in TMJ problems (Sean O'Geary BDS). If you have any questions, please contact Andrew Cook.

Please note that these exercises DO NOT replace treatment, and application of them without supervision is at your own risk. If you find that they decrease your symptoms, this is a good indication that your TMJ is misaligned, and professional experience indicates that this is better addressed sooner rather than later. This may be a local problem, or more related to teeth, facial bones, spine, shoulders, or even pelvic alignment, and you would be greatly assisted by seeking treatment from a Craniosacral Therapist or Cranial Osteopath (or Cranial Orthodontist - see <http://www.craniogroup.com/>).

EXERCISE 1 : Stabilisation exercise 1

TIME : 2 minutes maximum, repeat 3 times daily or more

- a. Open your mouth, until you feel the cheek muscles begin to stretch. This is **no more than** about $\frac{3}{4}$ fully open. (*OPTION : Do this in front of a mirror, and attempt to make the opening and closing movement into a straight line, maintaining the vertical alignment between the central gap between teeth on top and bottom jaws*)
- b. Hold this position for 20 seconds
- c. Close mouth until lips touch (*OPTION : Do this in front of a mirror, and attempt to make the closing movement into a straight line*)
- d. Repeat FIVE times

EXERCISE 2 : Stabilisation exercise 2

TIME : 1 minute, repeat 3 times daily or more

- a. Sit in a chair in front of a table. Rest BOTH of your your elbows on the table in front of you, and cup your hands, placing the chin in your cupped hands. The chin should be resting on the heels of your hands, and the palms and fingers resting gently at the sides of your face.
- b. Let your weight sink down onto your hands, stay there for 30 seconds
- c. Now sit up straight in the chair, and place your hands on either side of your face. There is a bony ridge at the base of your fingers -place this gently against your cheek so they are resting on the hollow of the line of your teeth. Your fingers will be pointing upwards and resting on your temples, and the heels of your hands will be gently resting on the lower edge of your jaw.
- d. Without pushing, allow a feeling of your hands sinking into your face. Lock your elbows against your chest
- e. Now, without pulling, IMAGINE your hands are floating down towards the floor, taking your jaw with them. Do this for about 30 seconds

EXERCISE 3 : Isokinetic exercise

TIME : 2 minutes maximum, repeat 3 times daily or more

- a. Rest your elbow of one arm on the table in front of you. Make a fist, and rest your chin between the first and second fingers of the fist (not the knuckles!) Brace your forearm against your chest so that it is stable, and the chin is evenly weighted against the two fingers.
- b. Tense the muscles of your chin so that you are pushing down gently onto your fist with your chin. Keep these muscles tensed throughout the exercise, to resist opening your mouth.
- c. Touch the back of your throat with the tip of your tongue
- d. Now open and close your mouth slowly, keeping a gentle pressure between your fist and your chin - do this 20 times, or until the muscles are tired (whichever is sooner)

Hint : You are actually keeping your chin still, and moving your head in order to open your mouth. Compare this with the way you normally eat and talk - don't do anything about it, just allow yourself to observe what you do!

Other hints for TMJ syndrome

If symptoms change when you lie down (e.g. either noticeably better or worse after sleep) then one possible cause is TMJ misalignment. Pressure headaches may also be caused by autonomic nervous system imbalance, or compression of the base of the skull - both of which have a myriad of different possible causes, and both of which can be addressed using CST techniques.