

TMJ Arthroscopy

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is a TMJ arthroscopy?

An arthroscopy (keyhole surgery) allows your surgeon to see inside your temporomandibular joint (TMJ, or jaw joint) using a camera inserted through a small cut on your skin.

Your surgeon can diagnose problems such as a torn cartilage and damage to the surface of the joint. They may be able to treat some problems using surgical instruments or by washing out the joint (arthrocentesis), without making a larger cut.

What are the benefits of surgery?

The aim is to confirm exactly what the problem is and for many people the problem can be treated at the same time.

Are there any alternatives to surgery?

Problems inside a joint can often be diagnosed using tests such as CT scans and MRI scans.

Non-surgical treatment such as rest, taking anti-inflammatory painkillers and wearing a TMJ splint can usually help.

If the problem is with the chewing muscles around the joint, muscle-relaxing medication or injections of Botox can reduce joint stiffness but do not treat the underlying cause.

A steroid injection into the joint can sometimes reduce pain for several months but may cause side effects if repeated too often.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes about 20 minutes for each joint. The operation can take up to 2 hours if your surgeon needs to perform any surgery within a joint.

They will insert a camera through a small cut in front of your ear to examine the inside of the joint for damage to cartilage, joint surfaces and ligaments.

Your surgeon may insert one or two needles through the cut and use them to wash out any loose material caused by wear of the joint surfaces. Or, your surgeon may make another cut to insert surgical instruments to treat scarring,

improve the joint surfaces or to use a stitch to change the position of the cartilage disc.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health. Stopping smoking and keeping your mouth clean significantly reduces the risk of infection.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you might need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

What complications can happen?

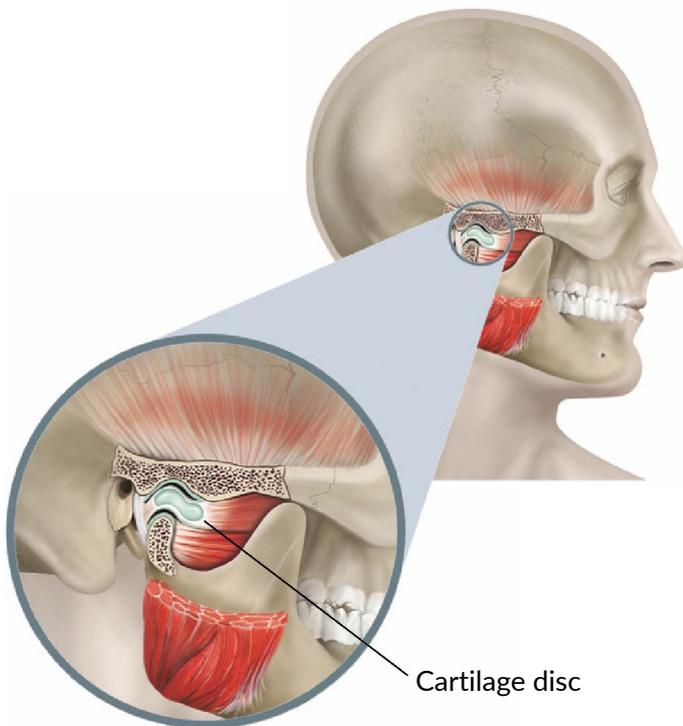
Some complications can be serious and can even cause death.

General complications of any operation

- Bleeding
- Bruising and swelling
- Infection of the surgical site (wound)
- Allergic reaction to the equipment, materials or medication
- Blood clot in your leg
- Blood clot in your lung
- Chest infection

Specific complications of this operation

- Not being able to open your mouth fully (trismus) and jaw stiffness
- Tenderness and pain in the joint
- Numbness of the temple and ear
- Weak forehead movement



Cartilage disc

The temporomandibular joint

- Change in hearing
- Making a hole in your ear canal during placement of the camera

Consequences of this procedure

- Pain

How soon will I recover?

The swelling and discomfort is usually at its worst for the first few hours.

You should be able to go home the same day.

To reduce the risk of bleeding, swelling and bruising, do not do strenuous exercise, have a hot bath or bend down for 2 weeks.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

It is important to keep the joint moving. Your surgeon will give you stretching exercises to do to help improve how your mouth opens. You should continue to rest and wear any splints until you are told otherwise.

You should be able to return to work after a few days, depending on your type of work.

Summary

A TMJ arthroscopy is an operation to diagnose and treat problems such as locking, pain and being restricted when opening your mouth, without the need for a large cut on your skin.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

Reviewer

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Illustrator

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