MALO CLINIC
THE ART OF CREATING SMILES

RAMIRO LOUREIRO DDS

CLINICAL DIRECTOR
MALO CLINIC COIMBRA

DENTAL MEDICINE

ALL YOU NEED TO KNOW ABOUT BRUXISM

What is Bruxism?

Bruxism is characterized by a repetitive muscular activity of the masticatory muscles leading the patient to clench or to grind his teeth. It can happen during the day (awake bruxism) or while sleeping (nocturnal/sleep bruxism). Although it is not fully consensual, it is believed that it can be related to stress and anxiety, sleep disorders, genetic predisposition, changes in the central nervous system and consumption of certain medication. It can affect children and adults of any age and gender.

How does Bruxism affect children?

Bruxism in childhood has similar clinical characteristics to bruxism in adults and it is usually diagnosed through parental reporting. It is often associated with periods of psychosocial changes or with the acquisition of new motor and cognitive skills and, as it is usually limited in time, normally there is no need for treatment. Still, the occurrence of bruxism in a child might also be a consequence of alterations in the normal development of the jaws and/or caused by respiratory problems. In these cases the priority should be the treatment of the underlying problem.

What are the consequences for patients?

Bruxism can cause problems in all the structures of our chewing system. As it is characterised by a parafunctional muscular activity, it can increase muscular pains and lead to contractures, headaches and pain in the temporomandibular joint, as well as accentuated dental wear. All these consequences can severely affect the patient's ability to chew, the harmony of his smile and his general well-being.

How is Bruxism diagnosed?

The diagnosis of bruxism is based essentially on three components:

1. Self-report by the patient referring to tightening or grinding of the teeth and muscular pain when waking up and/or at the end of the day, as well as reports from others mentioning noises from the patient during his sleep due to teeth gnashing;

2. Clinical examination by the dentist, who observes clear signs of dental wear, frequent fractures of healthy or restored teeth, accentuated development of some facial muscles and signs of joint and muscle overload;

3. Use of occlusal splints or other diagnostic medical devices.

There are also other analytical methods that give a definitive diagnosis, such as electromyography and polysomnography, but their use in clinical context is limited.

How is Bruxism treated?

We should look at bruxism as an ever-present condition, but it can be in an active or inactive stage. So, above all, we should direct the treatment in order to minimize its consequences. That treatment may involve, among other options, physiotherapy, behavioural and lifestyle changes, medication, the use of dental gutters. The rehabilitation of missing teeth or severe dental wear may be needed in some cases.