

## Treatment of Temporomandibular Joint Lavage and Joint Disorder

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### ABSTRACT

In recent years, irrigation technology has been increasingly developed and matured, which makes up for the gap between conservative treatment and surgical treatment, and provides a good idea and method for the treatment of temporomandibular disorders. The comment reviews the current status of temporomandibular joint lavage in the treatment of temporomandibular joint disorders. Mainly to its mechanism, operation methods and their advantages and disadvantages, the dosage of the common lavage fluid, common lavage fluid, pressure, related drugs, complications of temporomandibular JieGuan washing technique for comment.

**Keywords:** Commentary; Temporomandibular joint lavage; Temporomandibular joint disorder; Arthrocentesis

### DESCRIPTION

Temporo Mandibular Disorders (TMD) is one of the most common diseases in oral and maxillofacial regions [1]. It is also the second most common musculoskeletal disorder causing pain and disability [2]. To understand the application of temporomandibular joint lavage in temporomandibular joint diseases, its development history, treatment methods, treatment mechanism, other drug assistance, indications and complications, etc., which has certain significance for the clinical operation and theoretical guidance of temporomandibular joint lavage. Temporomandibular joint lavage can treat temporomandibular joint disorders by releasing the small adhesion band in the temporomandibular joint, removing the main inflammatory substances and pain factors, and eliminating the suction cup effect to restore joint movement and other main mechanisms, and achieve good therapeutic effects in the inflammatory diseases of temporomandibular joint, the degree of mouth opening was significantly increased and the pain was relieved, which was convenient for subsequent treatment.

There are usually two ways to operate, two methods have their own advantages and disadvantages [3]. The double-needle method can establish a complete lavage channel, but it is difficult to implement in the case of joint adhesion because of its low tolerance. The single needle method is less invasive, more convenient to operate, shorter operation time and can be stably implemented under the condition of intra-articular adhesion. There was no significant difference between the two methods in the treatment effect of temporomandibular joint. 0.9% sodium chloride injection, lactated Ringer's solution and joint specific

anti-aging irrigation solution were often used in 7 needles, and the dosage ranged from 25 to 400 ml. According to the current study, the use of smaller doses of irrigation solution may be as effective as the larger dose of irrigation solution in temporomandibular joint lavage [4-6]. Pressure generally by intermittent compression method, the pathological changes in patients with severe often use pressurized irrigation. Both upper and lower cavities of Temporomandibular Muscle and Joint disorders (TMJ) can be irrigated. At present, upper cavity irrigation is more common, but lower cavity irrigation is more effective for Temporomandibular Muscle and Joint disorders (TMJ) diseases, and the technical requirements are higher [7]. Analgesics or anesthetics are often injected before and after lavage to reduce the degree of pain [8].

In painful temporomandibular hypomobility, a better therapeutic effect is observed with injectable platelet-rich fibrin administration preceded by arthrocentesis than when using arthrocentesis alone. In temporomandibular joint recurrent dislocation, hypertonic dextrose administration is superior to placebo but inferior to unprocessed autologous blood. While application of the adjuvant injectable did not improve the outcomes of arthrocentesis performed alone. Improper operation or instrument problems during irrigation may lead to complications. Common complications include pain at the puncture site, edema, dizziness, and intra-articular problems [9]. Rare complications include epidural edema, trigeminal nerve injury, and superficial temporal artery injury. Follow-up in the position of the joint plate form change, higher efficiency of irrigation, the effect of injection of drugs, the treatment of

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complications, whether to still need to continuously explore to solve continuous treatment, etc.

## CONCLUSION

At present, temporomandibular joint lavage plays a very important role in the treatment of temporomandibular disorders, and its research is very necessary. This method opens up a new direction between conservative treatment and surgical treatment, which can quickly and effectively relieve related inflammatory diseases. Continuous improvement and research and development in this field will make the treatment of temporomandibular disorders to a further level.

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