

Bruxism Treatment Among Dental Practitioners: Preliminary Qualitative Findings from The National Dental Practice-Based Research Network

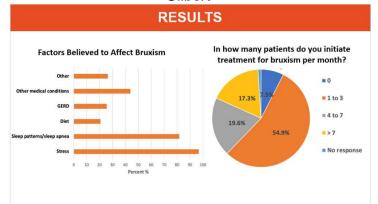
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BACKGROUND

- Bruxism is a repetitive masticatory muscle activity (sleep vs. awake)
- New and current emerging evidence suggests it is a behavior rather than a disorder
- Can be protective, harmful, or neutral
- Teeth grinding and clenching can lead to gum recession, attrition and abfraction
- Multifactorial etiologies psychosocial, physiological, and exogenous factors
- Need for a standardized protocol to assess and evaluate the management of bruxism in the dental field







CONCLUSIONS

- Basic strategy is to offer a guard or splint to everyone
 - Current literature does not recommend occlusal adjustment
 - Etiologies that affect behavior are rarely considered
- Remains unclear whether dental practitioners assess and treat bruxism patients with effective management approaches based on current recommendations
- Drives the need for a standardized clinical assessment and management evaluation procedure that practitioners can use for patients with bruxism





METHODS



- Investigators in the National Dental PBRN conducted a Quick Poll that consisted of 5 questions about bruxism.
- Distributed nationally
- A total of N=400 practitioners responded to the Quick Poll

