OCCLUSAL STABILIZATION SPLINT THERAPY IN OROFACIAL PAIN AND TENSION-TYPE HEADACHE IN PATIENTS WITHOUT SLEEP-DISORDERED BREATHING

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The different types of headache attend the temporomandibular disorders (TMD). It is suggested the association between the headache, specially the tension type, and orofacial pain, diagnosed in myogenous type of TMD, named the myofascial pain (MFP). The treatment options for MFP masticatory muscles tenderness include, among the others, an occlusal appliance therapy. The aim of the study was to assess the effectiveness of an occlusal stabilization splint therapy in MFP and tension-type headache (T-TH). The study was performed with 43 patients suffering from MFP and T-TH. The studied group was treated by stabilization occlusal splint of vertical thickness at vertical jaw separation established individually for each patient under the cephalometric analyses. Ends points were: intensity of orofacial pain (OFP), (numeric rating scale) and headache (HA), (numeric rating scale), frequency of HA (%), and jaw qualitative function, assessed at baseline and after 2 and 6-month period. There were the significant reduction in HA intensity (medians:2 vs 6; $p \leq 0.0001$) and significant decrease of OFP intensity (medians: 1 vs 6; $p \leq 0.0001$) after 6 months of treatment compared to baseline period. There were reached the pain rate less than 3 points in 61.8% of patients with HA (p=23) and in 85.3% of patients with OFP ($p \leq 0.0001$). In 81.4% of patients were observed an improvement in respect of both: signs and symptoms of MFP after 6 months' use of an occlusal stabilization splint. The splint is satisfactorily in alleviating symptoms in patients with TMD of myogenous origin and also can be useful in treatment of tension headache.