Preface

Orofacial Pain Case Histories with Literature Reviews

Patients with orofacial pain (OFP) present to dental practices for treatment on a regular basis. In the United States, temporomandibular disorders (TMD) and OFP affect up to 15% of the adult population\(^1\) with the prevalence of temporomandibular joint and muscle disorders ranging from 5% to 12%\(^2\) and other OFP disorders reported in 10% to 25% of the general population.\(^3\) While dentists receive excellent education regarding caries, periodontal disease, and other common dental disorders, their education in the broader area of pain and OFP, specifically, is frequently inadequate.

The field of OFP has been in existence for several decades\(^4\) and has recently been recognized as a Specialty of Dentistry by the American Dental Association Committee of Dental Accreditation (CODA).\(^5\) Currently, there are 12 CODA-approved OFP training programs in the United States,\(^6\) although the number of specialists is small and unevenly distributed (“Language Access and Orofacial Pain”). Worldwide, several professional organizations exist\(^7\); however, OFP is poorly represented in certain countries.

In our work as educators, researchers, and authors, we have encountered a dearth of resources for the general dental practitioner seeking to advance their knowledge in this field. Textbooks tend to be out of date, and journal articles generally provide little...
practical information. Continuing education courses exist but are frequently biased toward commercial products or procedures. These resources may provide valuable content but lack actual case histories with follow-up and current evidence-based literature reviews. The case-based teaching method has become popular in professional education, and OFP lends itself to this approach, as dentists can learn how to formulate a differential diagnosis, develop a treatment plan, and follow the patient’s response, thus providing information they can use on a daily basis. The literature reviews have allowed the authors to expand on the case in a more traditional didactic style and cover the topic in a comprehensive manner. This approach is consistent with new curriculum standards for dental school education.

In this issue, we have brought together authors from the clinical world, education, and research to present case histories of patients suffering from a wide variety of OFP conditions and headaches. The histories are comprehensive and represent real-life situations commonly encountered by clinicians. The authors offer differential diagnoses for each case and justify their choices and treatment plans. In many instances, as in real life, the diagnoses may be revised, and the treatment plan changed over time. The results are not always ideal. In addition to the case histories, each article contains an up-to-date, evidence-based review of the available literature on the subject that allows the practitioner to gain a broader view of the field.

The Dental Clinics of North America has been published for many years, with issues in 2007, 2013, and 2018 having concentrated on OFP, as well as an issue covering controlled substance risk and pain. All have been authored by experts in the field and have covered the topic comprehensively. The approach of the editors of those issues was based on the common format of the Dental Clinics of North America and on our understanding of the field at that time. In recent years, much has changed. Hence, there is a need to update practicing dentists in new development in the field.

The OPPERA study (a 5-year study of 4000 patients funded by the National Institute of Dental and Craniofacial Research) has provided scientific evidence regarding TMD and accurately describes them as multifactorial, overlapping, and chronic pain conditions (“Masticatory Muscle Pain,” “Surgical Treatment of Temporomandibular Joint Derangement: 30-year Follow-Up of TMJ Discectomy, A Case Report and Literature Review,” and “Temporomandibular Joint Arthropathy—Nonsurgical Management”). The International Classification of Orofacial Pain has furthered our understanding of the numerous neuralgic pain conditions we see in the mouth and face; however, the definitions are by no means definitive (“Burning Mouth Disorder,” “Chronic Facial Pain,” “Persistent Idiopathic Dentoalveolar Pain Disorder,” “Posttraumatic Trigeminal Neuropathic Pain Disorder,” and “Trigeminal Neuralgia”). Research is shedding light on the nature of headaches such as migraines, which will determine innovative treatments in the future (“Headache and Orofacial Pain”). A common theme throughout these articles is the emphasis on Axis II diagnoses, that is, the diagnostic category in OFP practice that classifies comorbid psychological factors. It is well recognized that the psychological comorbidities of pain in general and OFP specifically are central to our understanding of patients’ pain behaviors and the treatment outcomes. The article entitled, “Psychosocial Issues in Chronic Facial Pain,” explores that connection in detail.

While cancer pain is ideally managed by specialists within the field of cancer care, such as palliative medicine, the lessons learned by our colleagues who do see these patients (“Cancer Pain”) can be used in other chronic OFP conditions. The OFP patient brings many clinical and administrative challenges to dental practices, and these are considered in the articles “Pathology Mimicking Orofacial Pain” and “Challenges for the Dentist in Managing Orofacial Pain.” By the very nature of the conditions with
which they present, pain patients can be disruptive to the smooth running of a dental office, and special efforts may need to be taken to accommodate them. Overcoming racial, language, socioeconomic, and literacy barriers is a high priority in dentistry, as is becoming the case in medicine, generally, and the article, “Language Access and Orofacial Pain,” addresses aspects of this problem.

The Editors thank John Vassallo and his talented team at Elsevier for guiding us through this process and for allowing us to step outside of the normal format of the Dental Clinics of North America to present this issue in an innovative fashion. They were “intrigued by the idea of having case studies along with the literature review—almost like a hybrid model of publishing,” agreeing that “there is a new paradigm in dental education using case-based formats.” We thank our colleagues, the article authors, for their commitment to this developing field and for the insights they have provided on the many challenging issues with which our patients present. Their dedication to clinical care, research, and education will ensure that the specialty of OFP will continue to make a significant impact on patient care in the future.

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