

TOOTH GRINDING AND CLENCHING

A surprisingly large percentage of the population have the habit of grinding and/or clenching the teeth. This occurs unbeknown to the individual when they are sleeping- occasionally a sleeping partner or family member will have mentioned they hear it happening. Some people also do it during the daytime. Grinders/clenchers do so even more when they have things on their mind.

Some people are more grinders than clencherers, and their teeth develop wear marks that are a tell tale of their habit. Over time enough enamel can be prematurely worn away that the sensitive dentine layer is exposed. Front teeth can become shorter, and the vertical height of the lower face diminished. Their chewing muscle round the jaws and the sides of their head become enlarged and powerful. These over active muscles will sometimes be the cause of headaches, earache and jaw clicks. Pure clencherers can suffer the same problems with the exception that the enamel is not being worn down.

Both groups and those in between are more likely to cause fracturing of teeth that have been weakened by the effects of dental decay. The decay may have been stopped by a filling, but the surrounding tooth shell is forever weaker. Even artificial crowns, especially those with a porcelain cover are more likely to fail in the mouths of grinders/clencherers.

The only way a dentist can help a patient protect their teeth is by providing a protective bite guard. This is a device which sits over the teeth in one or other of the jaws, and is worn while sleeping. The amount of propping open of the jaws is crucial if a patient is having pain of clicking, as if not wide enough the muscles are not deactivated or inhibited from working as hard as they usually do. For those without symptoms, softer and smaller is often acceptable as a shock absorbing sandwich layer is all that is needed to protect the teeth vulnerable to damage. Acupuncture, muscle relaxants, relaxation techniques and physiotherapy exercise can sometimes be indicated for acute muscle pains. The relaxation techniques are useful even for those who have a bite guard made.

Some people feel they would rather not be encumbered with a bite guard and accept the increased frequency of repair work. Some try the bite guards and struggle to wear them. Some patients find they only feel ready for sleeping once they have their guard in. Remember there is range of severity in the grinders/clencherers, and not all people will necessarily need their guard every night. Those patients who have no filled teeth may not need any protection, and can just accept a higher rate of tooth wear. However, in more heavily filled mouths, once the teeth are broken down badly enough for the patient to not find their appearance acceptable (or the frequency of repair visits), a patient will need rehabilitation of the teeth with crowns or other build up techniques. A dentist would not be covered medico-legally by their insurers if they did not get at the outset the agreement of the patient to them wearing a bite guard to protect the work.

Consequently, if your dentist feels you are in danger of arriving at this point sometime in the future, it is sensible to consider trying a bite guard sooner rather than later. They only cost from £60 up to £250. If that saves one crown from needing done or replaced it easily pays for itself. Those suffering headaches/migraines have the incentive of having these problems probably cured without relying on strong painkillers continually. Not all headaches or migraine are caused by grinding/clenching but if the dentist see signs of

excessive tooth wear or enlarged chewing muscles, then this should be investigated as a way to get off regular strong medication.