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Maxilla's occlusal plane- A tool for orientation in space: A new aspect concerning temporomandibular Disorder (TMD)

Ruth Nebel

University of the Charité, Germany

A connection between teeth and body posture has been assumed ever since. While occlusion all in all has not shown a connection to body posture, craniofacial heights do provide this. This suggests a relation to an external goal and raises the question, whether the upper occlusal plane is positioned to space rather than to the body. This would even concern man's orientation to space. While an EbM/EbD- investigation has been lacking in the theme, video recordings with exact focus were used. The position of the upper occlusal plane is shown with a marking cross fixed to upper teeth. It then has been adjusted to the true horizontal and the movement direction. In walking, running and jumping the marking cross stays spatially constant; wafers of asymmetrical thickness affect an asymmetric body posture and uneven motion. The marking cross stays spatially constant meanwhile and the inter-pupillary line is spinning around the marking cross. Provisionally is concluded, that teeth seem to be connected to posture via the position of the occlusal plane to the skull. Maxilla and the upper occlusal plane seem to image the spatial dimensions. Changes in teeth length, even iatrogenic will turn body posture and movements asymmetrically: Shear forces by torsions and a non-axial loading will damage the body's structures. This seems to be the patho-mechanism for pain in TMD. Integrating the spatial function of teeth in dentistry may prevent and cure TMD. Therefore, a spatial articulator is recommended.

Biography

Ruth Nebel has been working as a Physiotherapist on chronic pain and TMD until 2007. She studied Medicine at the University of the Charité Berlin 2008-2014. She published about TMD.

ruth.nebel@mail.de

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