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上颈椎手法治疗对颞下颌关节紊乱症患者咬肌压痛阈值及最大张口限度的影响 点此下载全文

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摘要:

摘要目的:探讨寰枕关节手法复位和枕下肌群推拿对颞下颌关节紊乱症患者咬肌压痛阈值,以及最大张口限度的影响。方法:诊断为颞下颌关节紊乱的患者59例,均在咬肌处定显的压痛点且均伴有张口受限,伴或不伴关节弹响,且经过问诊查体均发现有寰枕关节错位且患者有颈部疼痛。59例患者分为三组:第一组接受寰枕关节手法复位,第二组接受枕下肝拿治疗,第三组为空白对照组。分别在治疗前后测定咬肌扳机点压痛阈值,以及最大张口限度(上下唇之间的高度),统计学分析采用单因素方差分析。结果:咬肌扳机点压痛阈值0.877,P<0.01)和最大张口限度均有提高(F-31.618,P<0.001),手法复位组和枕下肌群推拿组间差异无显著性。结论:寰枕关节复位或枕下肌群放松均可以使咬肌扳机点压痛间高,缓解咬肌痉挛,增大最大张口限度,这预示颈枕部的手法治疗或许可以改善颞颌关节紊乱。

关键词: 上颈椎 手法治疗 张口限度 压痛阈值 颞下颌关节紊乱

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Fund Project:

Abstract:

Abstract Objective: To investigate the effects on elevating the tenderness thresholds and maximizing mouth opening degree by utilizing atlanto-occipital manipulation vs. suboccipital muscle tuina in temporomandibular joint disturbance patients. Method: Fifty-nine patients, from Southern Medical University with tenderness at the masseter muscle and restriction of mouth opening, with or without clicking of joint, all of them had atlanto-occipital subluxation and cervic pain. Patients were randomly divided into 3 groups: manipulative group who received atlanto-occipital reduction, soft tissue group who received tuina over the suboccipital muscles and control group who did not receive any intervention. Changes in tenderness thresholds over masseter and maximizing mouth opening degree measured respectively. Result: There was significant changes on tenderness thresholds over masseter (P < 0.001) and maximizing mouth opening degree (P < 0.001). was no significant difference between both treatment groups. Conclusion: The application of atlanto-occipital manipulation or suboccipital muscles tuina might to elevate the trigger point tenderness thresholds and maximum mouth opening degree which indicated the temporomandibular joint disorders could be improved by application of upper cervical manipulation.

Keywords: upper cervical manipulation therapy mouth opening degree tenderness thresholds temporomandibular joint disturbance

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