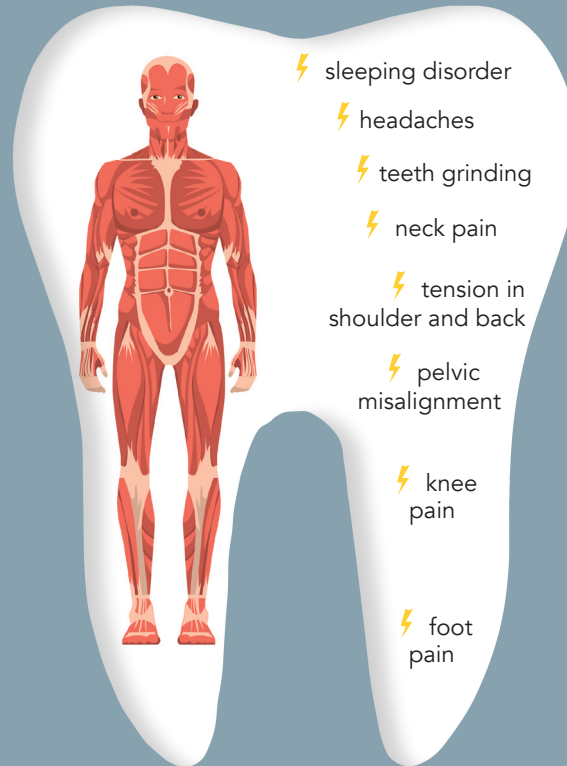




Dentrade
balance your bite

TMD SYMPTOMS



⚡ sleeping disorder

⚡ headaches

⚡ teeth grinding

⚡ neck pain

⚡ tension in
shoulder and back

⚡ pelvic
misalignment

⚡ knee
pain

⚡ foot
pain

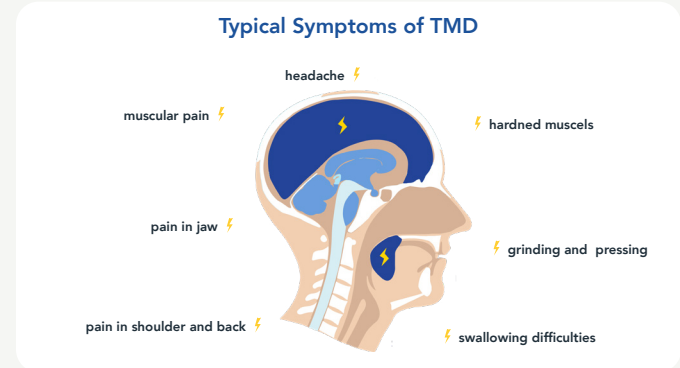
TEMPOROMANDIBULAR DYSFUNCTION

TMD Syndrome

Temporomandibula dysfunction briefly explained

TMD is a very **complex disease** of the jaw muscles, which can be traced back to various causes. Dental and orthodontic treatments can change the position of teeth or tooth contact (occlusion). It feels like that the teeth do not fit together. Unconsciously, the muscles adopt a gentle posture (**adaptation**), which leads to an altered position of the temporomandibular joints. Consequences of overexertion can be **pain or tension**, which can affect the whole body. A TMD disorder is in many cases multifactorial, which makes a clear diagnosis difficult and complicated. Psychosocial **stress, hectic and anger** are factors that are unconsciously processed at night with damaging teeth grinding (bruxism).

Thanks to our many years of **experience and expertise**, we have a wide range of products to alleviate the individual complaints of a TMD disorder.



If the patient experiences **muscular pain** that is relieved with a **RehaSplint** or Aqualizer, this could be sign of TMD. During grinding or clenching, **uncontrolled high forces** are released which can cause lasting damage to the hard tooth substance or the fabric structures involved. As a therapy and also to protect the tooth structure, the patient should then be received with an individually made splint. Muscular dysfunctions in TMD patients can also be treated with the **RehaSplint, RehaBite, Spoony Gloss** and other physiotherapeutic measures.



REHASPLINT



REF: RS200 (Hard), RS201 (Medium), RS202 (Soft)

REHASPLINT

The RehaSplint bite splint was specially developed for the temporary **relief of TMD complaints**. The immediate help splint **protects the enamel and teeth** from harmful abrasion during **clenching and grinding (bruxism)**. In case of acute pain or muscle tension in the head, neck or shoulder area, the RehaSplint can be used in the upper jaw without any preparation. The splint immediately relaxes the chewing muscles and can thus dissolve **adapted relieving postures** of the lower jaw. The splint comes in a practical one-size-fits-all design and has a very **high wearing comfort** due to its special material.

There are **three different degrees of hardness** of the RehaSplint, suitable for an average adult set of teeth.

Shore 40 A (pink) REHASPLINT SOFT

- very **sensitive** patients
- during orthodontic treatment
- preparation of a neuromuscular **bite registration**
- sports activity
- sleep related breathing disorder
- no sharp edges or corners

Shore 50 A (transparent) REHASPLINT MEDIUM

- low to **moderate** bruxism
- immediate help for TMD complaints
- **perfect everyday splint**
- revention to **protect the teeth**
- no sharp edges or corners

Shore 60 A (blue) REHASPLINT HARD

- moderate to **severe** bruxism
- prevents parafunctional muscle activity
- Avoidance of tooth structure loss
- heavy **grinding an clenching**
- no sharp edges or corners

REHASPLINT

Functional disorders in the craniomandibular system can not only be very painful but also trigger **tension headaches, back pain and bruxism**. Iatrogenic noxae can release disturbances in a patient's habitual occlusion. Acute functional disorders, such as **grinding or clenching**, can cause long-term chronic disorders. Constant parafunctional overload can lead to destructive changes in the teeth, paradontia, musculature and temporomandibular joints.

Patients suffering from **TMD or myoarthropathy** can be initially treated with a RehaSplint. If the symptoms (headache, back pain, TMJ pain) are relieved, it can be concluded that these TMD symptoms are caused by **muscular adaptation**. As a result of the adaptation (relieving posture), some areas of the muscles are overstrained, which can lead to **pain and malfunctions** (e.g. restricted mouth opening) of the entire stomatognathic system.

The RehaSplint dissolves adapted postures and can guide the lower jaw into a **neuromuscular relaxed position** by wearing the splint for about 30 minutes. This position can be registered by using a bite registration so that an individual occlusal splint can be made in the neuromuscular position.

If there is significant relief of TMD symptoms as well as dysfunction-related pain in patients with myoarthropathy (MAP), this may result from a relaxed muscular and temporomandibular joint situation.

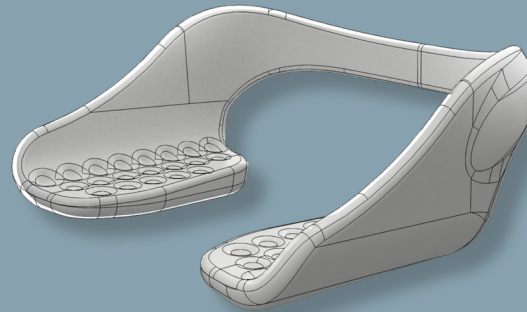




REHASPLINT

biocompatible plastic ✓
without any adjustment

available in 3
✓ different hardnesses
(40, 50, 60 Shore A)



textured surface ✓
improved adhesion

✓ rounded edges
high wearing comfort

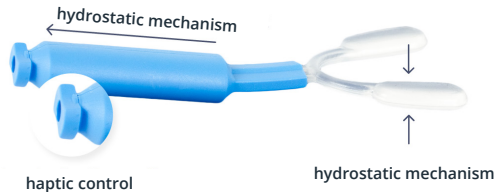
✓
wedge-shaped bite pads
even occlusal support



REF: RB600

REHABITE

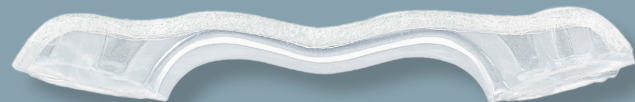
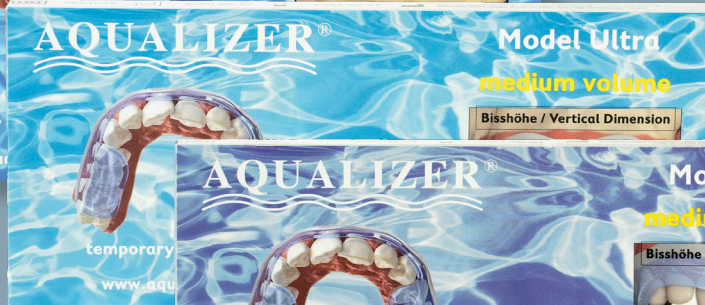
The RehaBite is a **physiotherapeutic training device** for the therapy of temporomandibular joint and masticatory muscle disorders. Specifically coordinative exercises **can reduce pain** in muscular myoarthropathies of the masticatory system (MAP = disease of the masticatory muscles and temporomandibular joints). The training device has a fluid-filled elastic bite fork with integrated force control. The **hydrostatic system** of the RehaBites balances the right and left chewing muscles under force-controlled conditions. Thus, imbalances in the jaw muscles can also be compensated. Regular repetition of the exercises leads to **lasting changes** in muscular function patterns as well as desired structural changes in specific regions of the brain (**muscle memory**).



- **therapy of pain** in muscular myoarthropathies of the masticatory system (MAP)
- **preventing the recurrence** of painful MAP (recurrence prophylaxis)
- **therapy of imbalances** of the jaw musculature
- **coordinative jaw muscle training**



AQUALIZER®



REF: AQ300, AQ301, AQ304, AQ305, AQ306, AQ307, AQ308, AQ309, AQ310

AQUALIZER

The Aqualizer is a **water-filled occlusal splint** that is used to relieve TMD-related symptoms. The hydrostatic principle **balances the jaw muscles** and relieves painful postures. The splint requires no preparation or adjustment and is available in different versions.

Aqualizer Models



There are three different models of the Aqualizer. Compared to the Ultra model, the **Slim model** has slimmer bite pads and is therefore more comfortable to wear. However, due to its wider shape, the **Ultra** sits more firmly in the mouth. The **Aqualizer Mini** is shorter and was specially developed for children and narrow jaws.

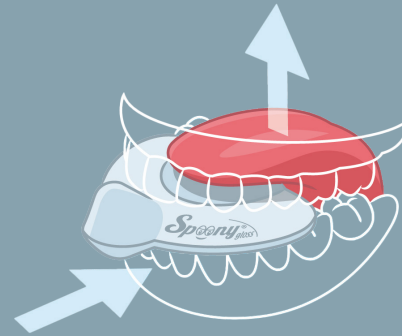
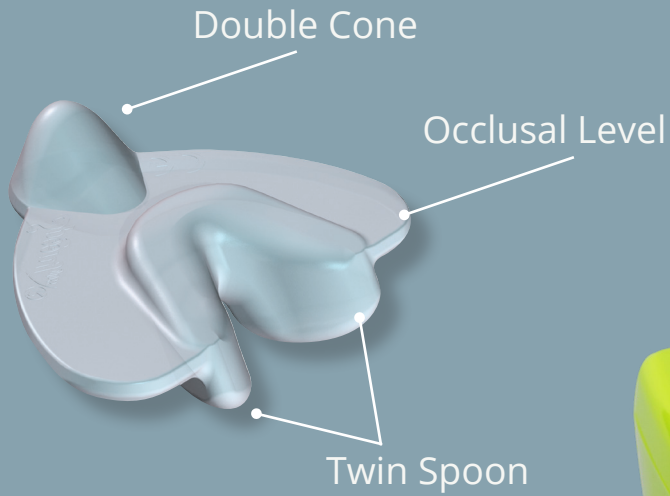
Aqualizer Volumes



Each model is available in three different heights. These determine the height of the water-filled bite pads. Volume **low** measures to **1mm**, volume **medium** measures to **2mm** and volume **high** measures to **3mm** height.



Spony[®]
gloss



REF: SP400

SPOONY GLOSS

Swallowing difficulties or **dysphagia** can occur in early childhood and should also be treated as early as possible. Due to the individual adjustment possibilities, the Spoony Gloss is suitable for both children and adults. For the therapy of **myofunctional disorders**, the tongue is automatically guided against the palate during swallowing in order to cognitively learn how to swallow „correctly“. The splint specifically trains the **muscles of the face and tongue** involved in swallowing.

APPLICATION OF SPOONY GLOSS

- Therapy of **myofunctional disorders** (disorders of the facial musculature)
- Help with **mouth breathing, incomplete mouth closure** and **lisping**
- **snoring problems**
- Use in **speech therapy**

BEFORE
treatment



Tongue lies too low in the oral cavity

WHILE
treatment



Spoony Gloss corrects the position of the tongue and activates muscle memory

AFTER
treatment



The tongue has regained its natural position

FOR PRACTITIONERS ONLY

AFR MINI-REG[®]

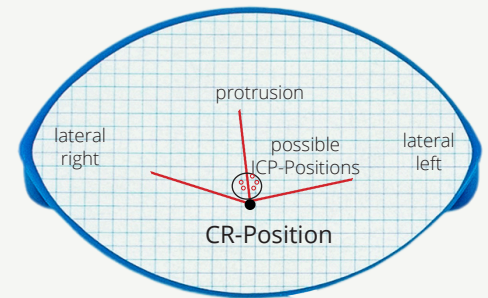
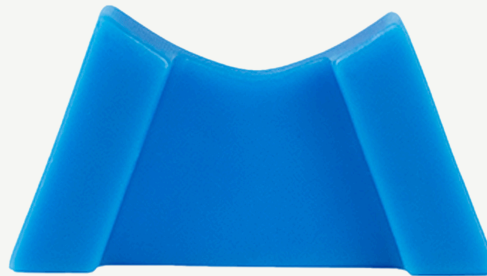


REF: AFR100, AFR101, AFR102

MINI - REG

FOR PRACTITIONERS ONLY

The **Anterior Functional Recording** device is a **registration method** to record the **movement of the lower jaw**. It is attached to the upper and lower incisors and thus causes **neuromuscular relaxation** like a JIG. The unique combination of **anterior JIG** with integrated registration function is a quick way to determine the **centric condyle position**. The determination of the jaw relation is used to allocate upper and lower jaw models during assembly in the articulator. The maximum movement of the mandible is recorded in the form of an **arrow angle/gothic arch**.





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scan for shop



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