Craniomandibular dysfunction, migraine and tensio-type headache: influence on quality of life (Abstract)

Disfunção craniomandibular, migrânea e cefaleia do tipo tensional: influência na qualidade de vida (Resumo)

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Introduction: Craniomandibular dysfunction (CMD) is a collective term for the clinical problems involving the muscles of mastication, the temporomandibular joint (TMJ) and associated structures. Headache is a symptom that appears frequently associated with CMD due to the damage that headache and (CMD) can cause the quality of life, this research aims to determine the prevalence and correlation of these nosologic entities for which in turn can contribute to the prevention and treatment for possible improvement of the individual.

Objective: We examine the prevalence of CMD and primary headaches (migraine and tension-type headache), as well as, to quantify the influence on quality of life of military and civilian employees of the Naval Hospital in Recife.

Methods: Cross-sectional study analysis was made of a population of 128 civilian and military personnel on active duty in both genders. The age ranged from 19 to 72 years, with an average of 33 years old. The officials were from the Naval Hospital in Recife, Pernambuco, crowded in 2009, who voluntarily answered the questionnaire divided into three phases: the first on the anamnestic index of Fonseca to DCM, the second according to the criteria of the International Headache Society and the third assessment of quality of life with the WHOQOL-brief. Participants were informed about the nature of research and acceptance for the purpose of ethics, informed consent was signed with the approval of the Ethics in Human Research of the Center for Health Sciences, Federal University of Pernambuco record No. 383/08.

Results: Of 128 patients, 53 (41.4%) were aged under 29. The males accounted for 74 (57.8%) subjects and 54 (42.2%) were females. DCM was diagnosed in 38% of the individuals (mild 31%, moderate 6%, severe 2%) and headache in 20%. 16% of the subjects had the combination of headache and DCM. Individuals with headache had more DCM than the ones without headache [14/19 (74%) vs. 21/79 (27%), p=0.0003 in the Fisher's exact test. For the areas of quality of life (WHOQOL-brief) according to the presence of DTM, individuals without DTM showed better results in the four major domains are assessed: physical [72 \pm 13(SD) vs.

78±10, p<0.05], psychological (71±13 vs. 79±10, p<0.05), social relationships (75±15 vs. 82±15, p<0.05) and environment (62 ± 13 vs. 68 ± 13 , p<0.05. Presence of headache in this study has no impact on the quality of life of the individual.

Conclusion: Association of headache and CMD are common and constitute a public health problem of enormous proportions, with an impact on quality of life of the sufferer. Thus, required a multidisciplinary approach involving professionals in medicine, dentistry and health support.

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