joint (TMJ) are modified as a consequence of different factors. The sagittal skeletal pattern has been related to the dimensions of the osseous components of the TMJ. Objective: The aim of this study was to evaluate the relationship between the dimension of the mandibular condyle and the glenoid cavity and the sagittal skeletal pattern in adolescents.

Methods: 40 adolescent patients, between 11 and 19 years old, 12 males and 28 females, were evaluated. They were divided into three groups according to the ANB angle: 15 Class I (ANB 0 ° - 4 °), 15 Class II (> 4°) and 10 Class III (<0 °). The width and length of the condyle and the width and depth of the glenoid cavity were measured using computed tomography images. By the t-Student test, the means of the measures of the right and left side were compared. Through the ANOVA test, the means of the measurements of the condyle and the glenoid cavity were analyzed according to the vertical skeletal pattern and the post-hoc Bonferroni test was used to identify the group correlations.

Results: No significant difference was found between the right and left side averages, so the mean between sides was used for the analysis. A correlation was obtained between the depth of the glenoid cavity and the sagittal skeletal pattern (P = 0.009), was deeper in Class III and less in Class II. The rest of the variables studied did not present a statistically significant correlation with the sagittal skeletal pattern.

Conclusions: The depth of the glenoid cavity is greater in Class III subjects and less deep in those Class II. The dimensions of the condyle and the width of the glenoid cavity did not show a statistically significant relationship with the sagittal skeletal pattern in the adolescents studied.

Characteristics of the bone components of the temporomandibular joint and its relationship with the vertical skeletal pattern in adolescents. A computed tomography study

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Aim: The temporomandibular joint (TMJ) is a joint formed by the mandibular condyle and the glenoid cavity of the temporal bone. Several factors affect the morphology of the TMJ components. A relationship between the characteristics of the bone components of the temporomandibular joint and the craniofacial skeletal characteristics has been reported. Objective: The aim of the present study was to verify the relationship between the characteristics of the bone components of the TMJ and the vertical skeletal pattern in adolescent patients.

Method: A total of 45 adolescent patients (16.20 ± 1.91 years of age), 13 males and 32 females, were divided into 3 groups according to their vertical skeletal pattern: 15 normodivergent, 15 hyperdivergent and 15 hypodivergent. The TMJ was evaluated in computed tomography (CT) images, the anteroposterior and lateromedial dimensions of the condyle and the anteroposterior dimension and high of the glenoid cavity were measured. The t-Student test was used to compare the measurements of the right and left sides and between the genders, and the ANOVA test was used to evaluate the correlation between condylar and glenoid cavity measurements with the vertical skeletal pattern and the post-hoc Turkey's test was used to identify the correlation between groups.

Results: No statistical difference was found in the measurements of the condyle and glenoid cavity on the right and left sides, so a mean between both sides was used. A statistically significant relationship was observed between the medial-lateral dimension of the condyle and the skeletal pattern (P = 0.000), in the paired comparisons a statistical difference of this dimension was observed between hypodivergent and hyperdivergent. The rest of the variables studied did not present a statistically significant difference.

Conclusion: The lateromedial dimension of the mandibular condyle is greater in hypodivergent patients and lower hyperdivergent patients. The anteroposterior dimension of the condyle and the measurements of the glenoid cavity did not present a correlation with the vertical skeletal pattern in the adolescent.

Multidisciplinary approach with traditional and complementary therapies in patients with temporomandibular disorders and fibromyalgia: a randomized study

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Aim: Fibromyalgia (FM) is a chronic musculoskeletal pain syndrome characterized by widespread musculoskeletal pain and tenderness at specific anatomic sites (tender points. The association of FM