Orofacial movement disorders and bruxism

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Orofacial movement disorders include dystonia, dyskinesia, drug induced extrapyramidal reactions and bruxism. Orofacial movement disorders are often misdiagnosed as temporomandibular disorders, hence understanding these conditions is pertinent for the practitioner treating orofacial pain and sleep apnea. Aspects of epidemiology, etiology, pathophysiology, clinical presentation, and diagnosis are discussed along with treatment considerations for these orofacial movement disorders. Dental management of sleep apnea and bruxism with oral appliances will be covered briefly in this lecture.

Sleep duration, quality of life and teen depression: A school-based survey

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The main objective of this study was to assess the link between sleep duration, quality of life and depression in adolescents. The secondary objective was to study the main sleep data on a large sample of adolescents from different socio-economic backgrounds. A survey was conducted in high school students, in general, vocational or technological section located in Ile de France and in province using a general questionnaire about perception of their own sleep and self-administered questionnaires of quality of life (OK-ados) and of depression (ADRS). The complete analysis had included 855 students, 14 to 19 years old (sex ratio M/F: 1:1). The average sleep duration was 7:14±1:20; it was inversely correlated with age (r=-0.142, p<0.01). Students in general and vocational section were sleeping significantly more than technological section (p=0.02). Univariate analyses showed a positive relationship between sleep duration and quality of life (r=0.17, p<0.001) and moreover, an inverse relationship between sleep duration and depression score (r=-.5, p<0.001). Depression, delayed sleep phase disorder, medical condition and repetition have appeared as determinants of sleep duration in multivariate analysis. This investigation on a large sample confirms that the average duration of sleep in adolescents is far from the usual recommendations. It also shows the sharp relationship between sleep duration and depression. Some markers of schooling (section, repetition) also appear as potential indicators of sleep duration. The quantitative and qualitative evaluation of sleep should be made in any medical visit of a teenager.

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