Background:

Temporomandibular disorders (TMDs) are the most commonly reported orofacial pain disorders of non-dental origin. They are characterised by pain/dysfunction of the temporomandibular joint (TMJ) and associated structures. Frequently reported signs and symptoms include TMJ pain (96.1%), audiological problems (82.4%), headaches (79.3%) and TMD discomfort/dysfunction (75%)². Patients often also experience joint movement restrictions, joint sounds on movement and tooth erosion/bite changes. TMDs may be related to rheumatoid arthritis (RA). Little is known about the prevalence of RA-related TMDs. These TMDs are important as research and movement restrictions may result in oropharyngeal dysphagia (OD), with a subsequent negative impact on quality of life (QOL).

Aims:

To examine the prevalence of the following signs and symptoms of OD within RA patients:

- Impaired swallowing ability;
- Impaired mastication;
- Masticatory pain;
- Masticatory fatigue;
- Diet modifications, and
- Weight loss.

Methods:

A systematic search of the literature was conducted. Electronic databases, grey literature, and reference lists of included studies were searched from inception to February 2016, with no date or language restriction. Studies reporting the frequency of OD in adults presenting with TMD and RA were included. Study eligibility was assessed by 3 independent reviewers. Methodological quality of included studies was assessed by 2 independent reviewers primarily using The Down’s and Black Tool³. Meta-analysis of findings was conducted.

Results:

This search yielded a total of 19 eligible studies (Fig. 2). Typical difficulties experienced by patients with RA included:

- Dietary modifications (50.8%),
- Masticatory pain (35.58%),
- Impaired mastication (30.69%),
- Impaired swallowing (24.63%), and
- Masticatory fatigue (21.26%).

No eligible studies addressed weight loss. Study quality was typically deemed to be moderate to good (Fig. 3).

Conclusions:

TMD difficulties in RA frequently result in signs and symptoms of OD, with potential QOL repercussions. Research is required to address the assessment and treatment of swallowing difficulties in RA.