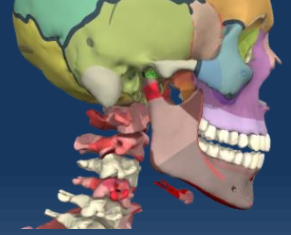
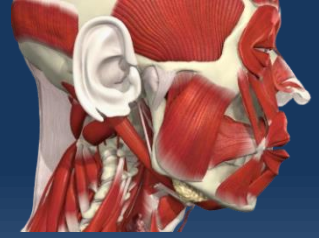
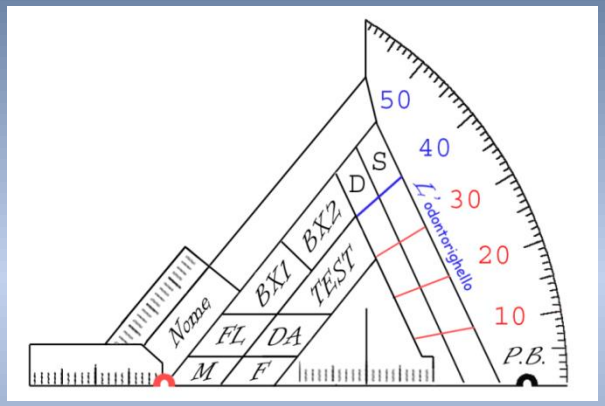


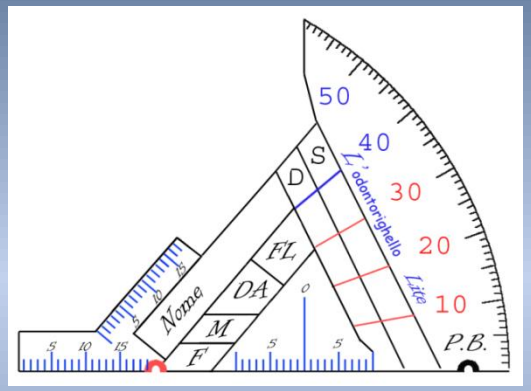
ARTICOLAZIONE TEMPORO-MANDIBOLARE



MUSCOLI MASTICATORI

OCCLUSIONE DENTALE

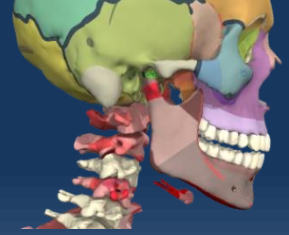


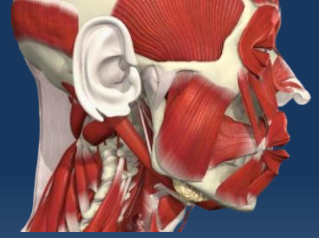


ODONTORIGHELLO

“OR”

Dr. P. Broido





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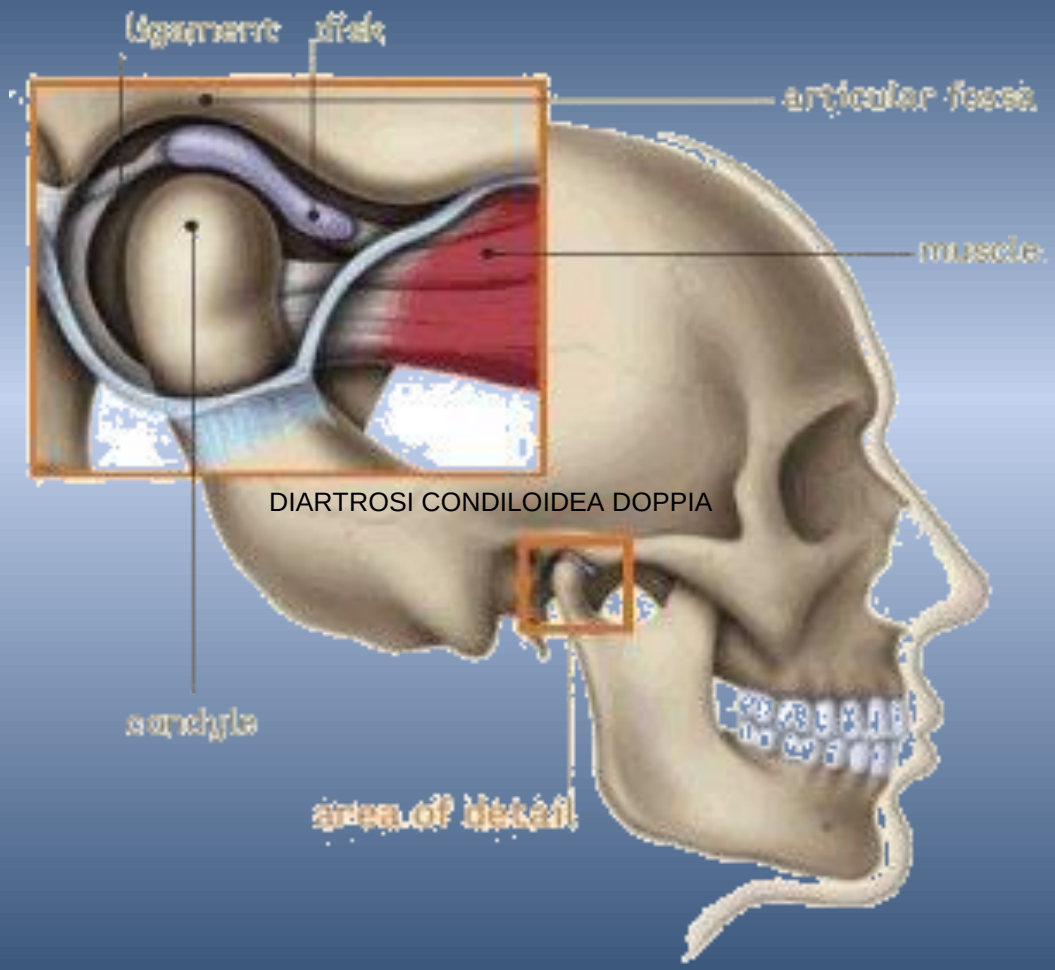
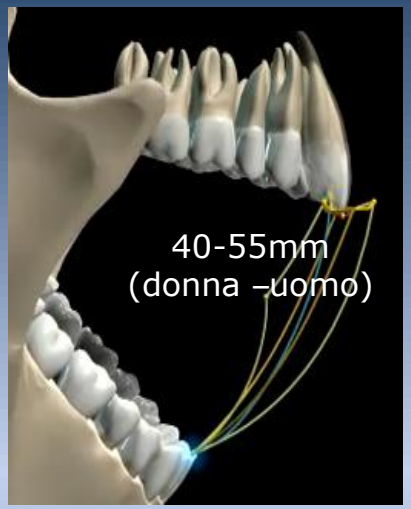
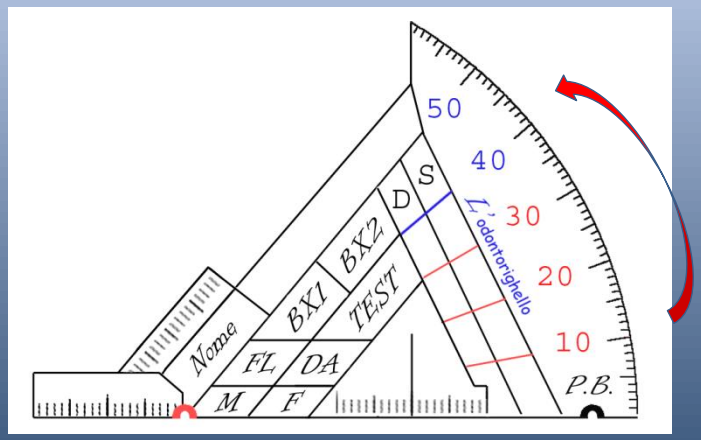
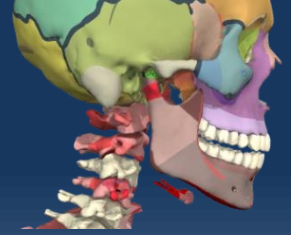
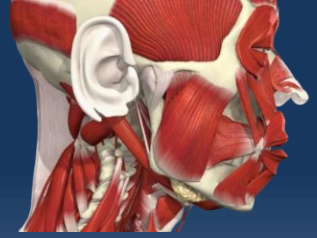






Sensazione terminale: = (rigida) ^ (elastica)





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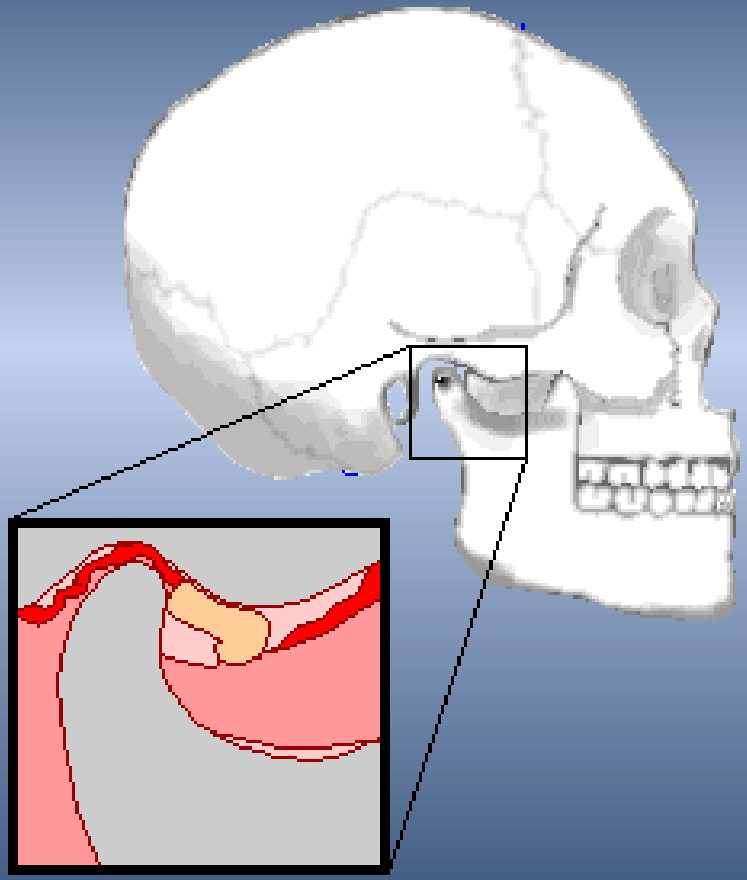
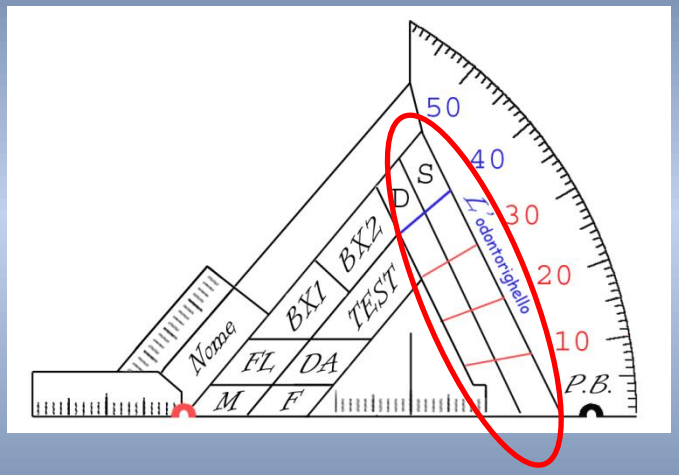
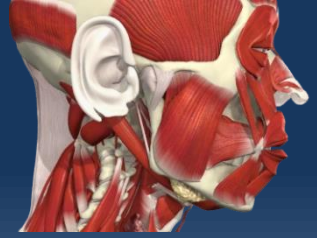




A =apertura
C =chiusura
R =reciproco
P =p.articolare



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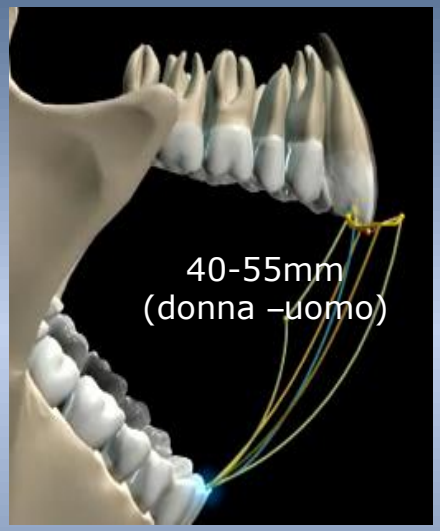
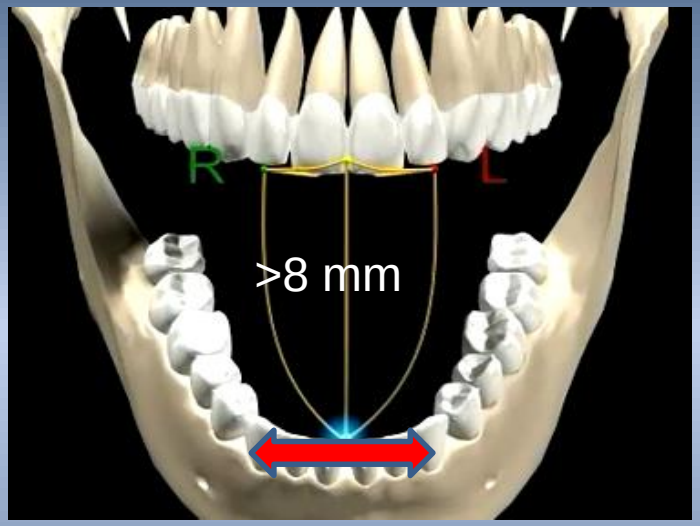
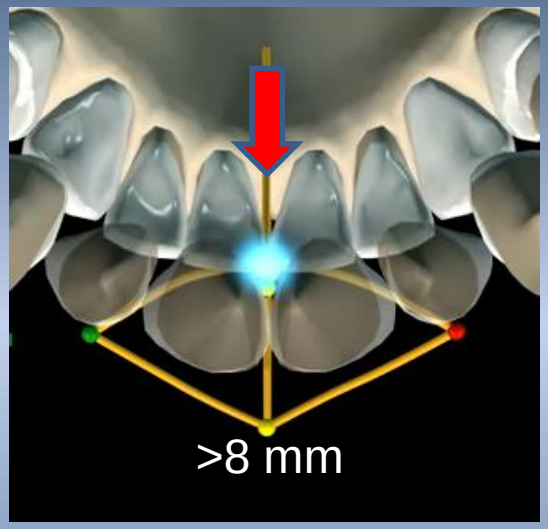
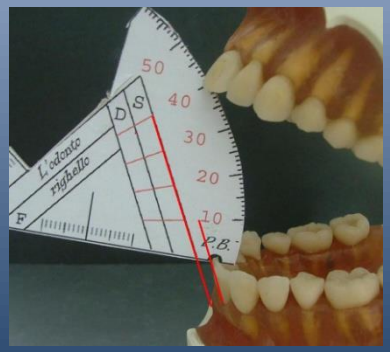
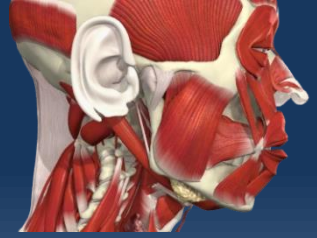


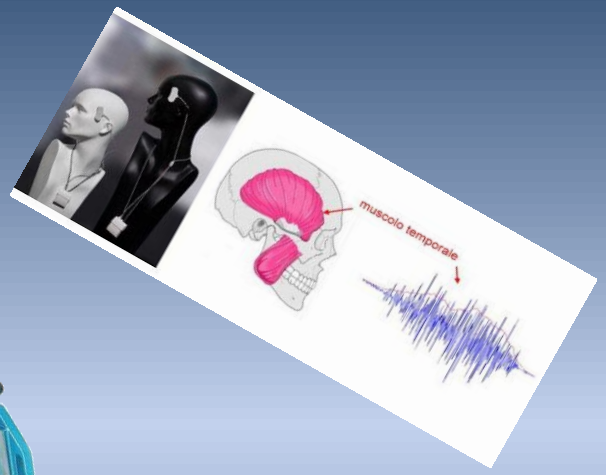


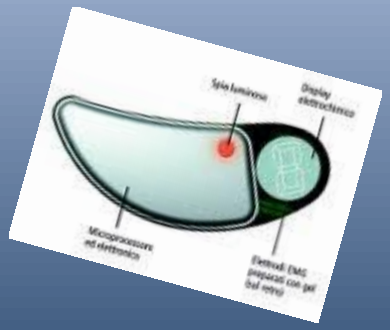




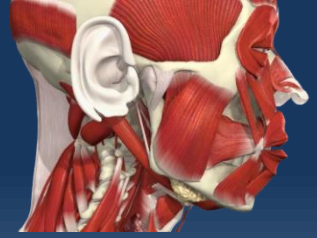


MUSCOLI MASTICATORI





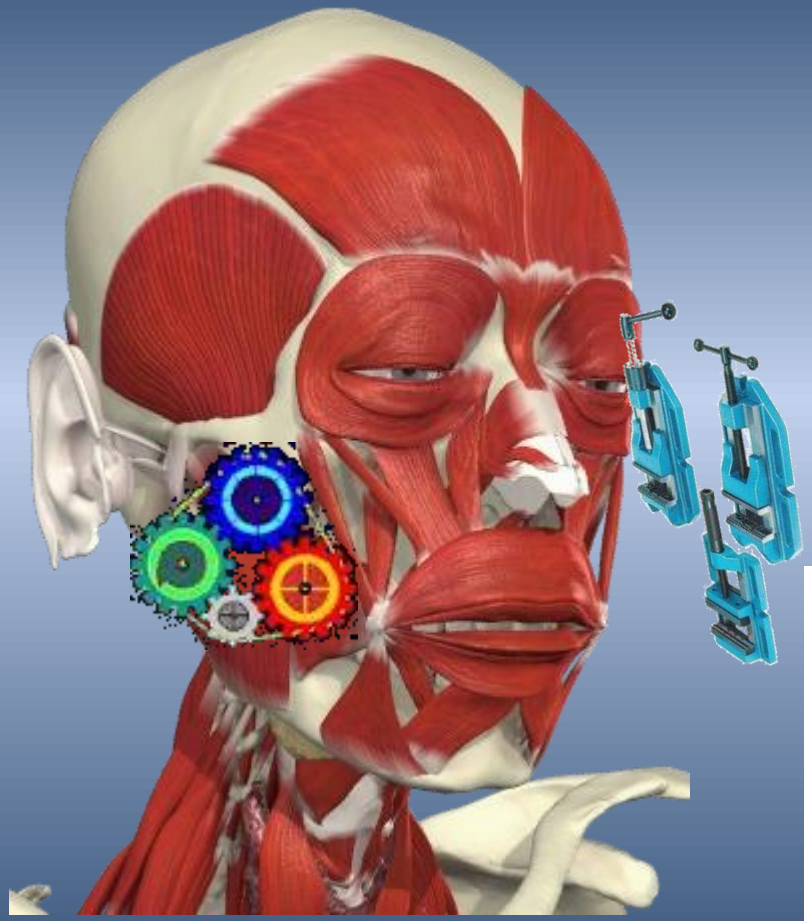
BRUXISMO



MUSCOLI MASTICATORI

BX1

BX2



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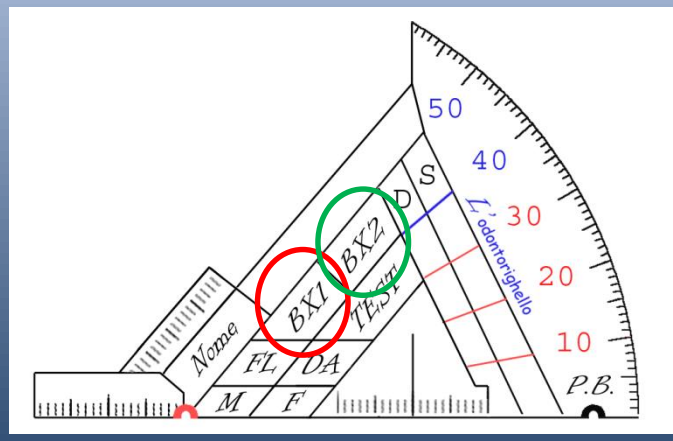

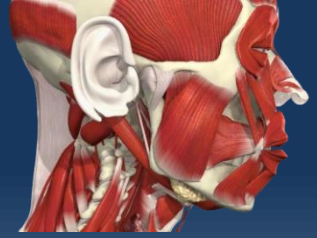

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BX1

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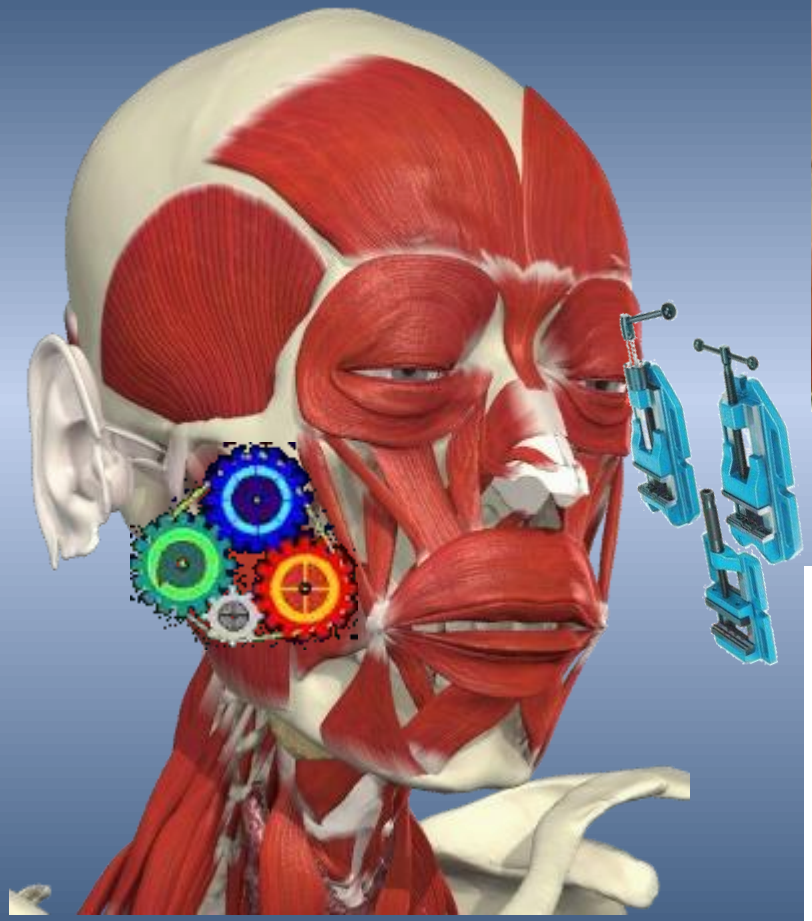

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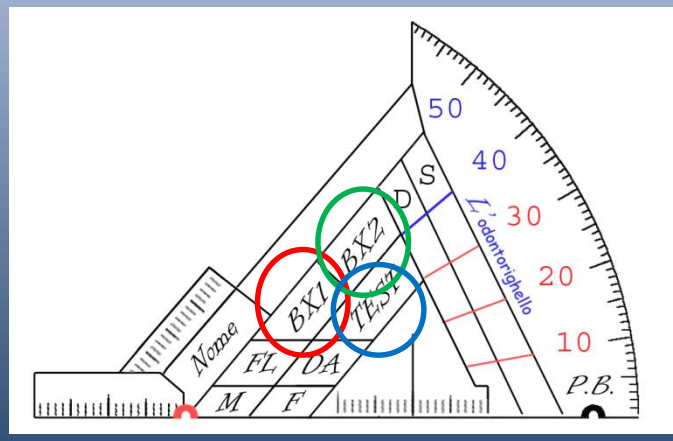
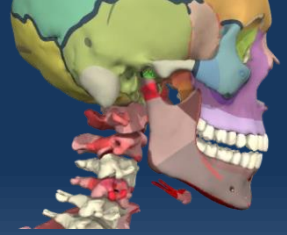
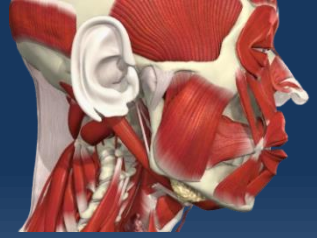


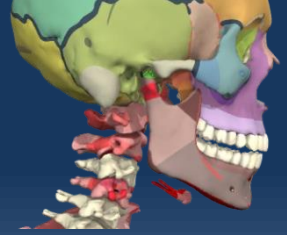


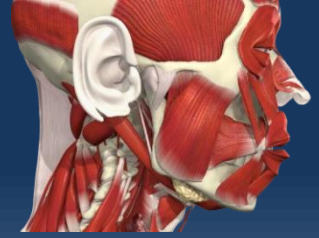


MUSCOLI MASTICATORI

M.TEMPORALE

Paziente in posizione supina si appoggiano le dita delle mani sul muscolo in direzione delle fibre muscolari si valuta la consistenza e e la dolorabilità dei tessuti a riposo e durante il movimento di apertura e chiusura della bocca

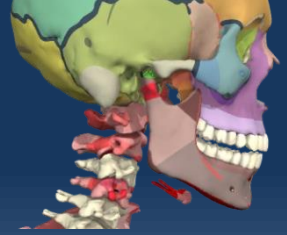


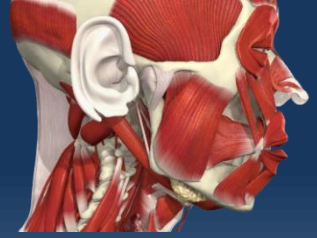


MUSCOLI MASTICATORI

M.PTERIGOIDEO ESTERNO

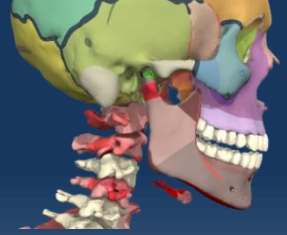
Attraverso un dito intrabuccale (mignolo) fino a raggiungere il muscolo seguendo l'arcata mascellare. Chiedere al paziente di avvicinare i denti valutandone dolorabilità e consistenza simmetricamente

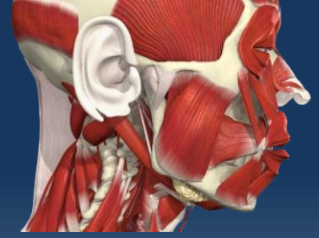




MUSCOLI MASTICATORI

Ispezionare il muscolo con due modalità, attraverso palpazione bimanuale a paziente supina e attraverso manovra intrabuccale con indice e pollice pinzando il ventre muscolare , utilizzando l’apertura della bocca per evidenziare le zone di maggiore dolorabilità.



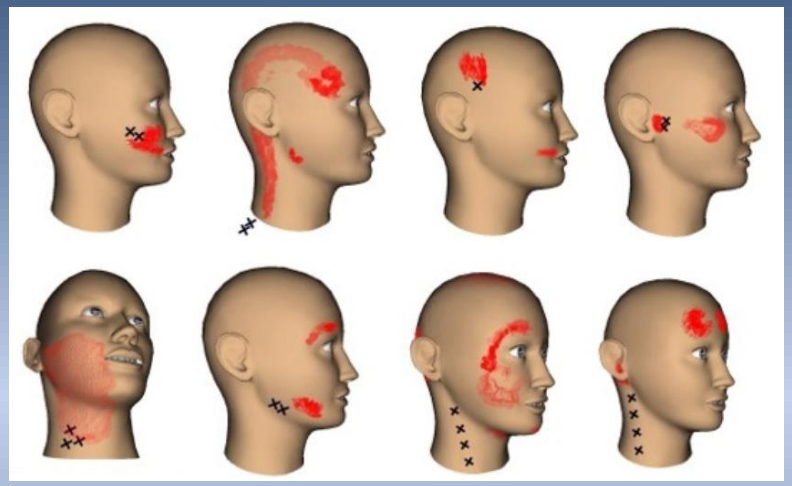


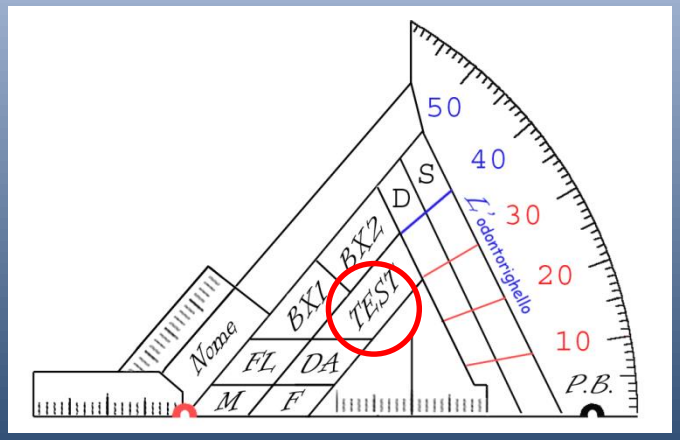
MUSCOLI MASTICATORI

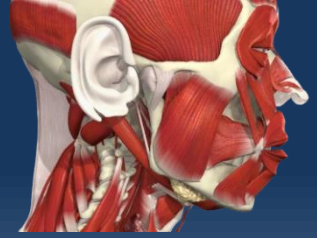
M.TEMPORALE

M.PTERIGOIDEO ESTERNO

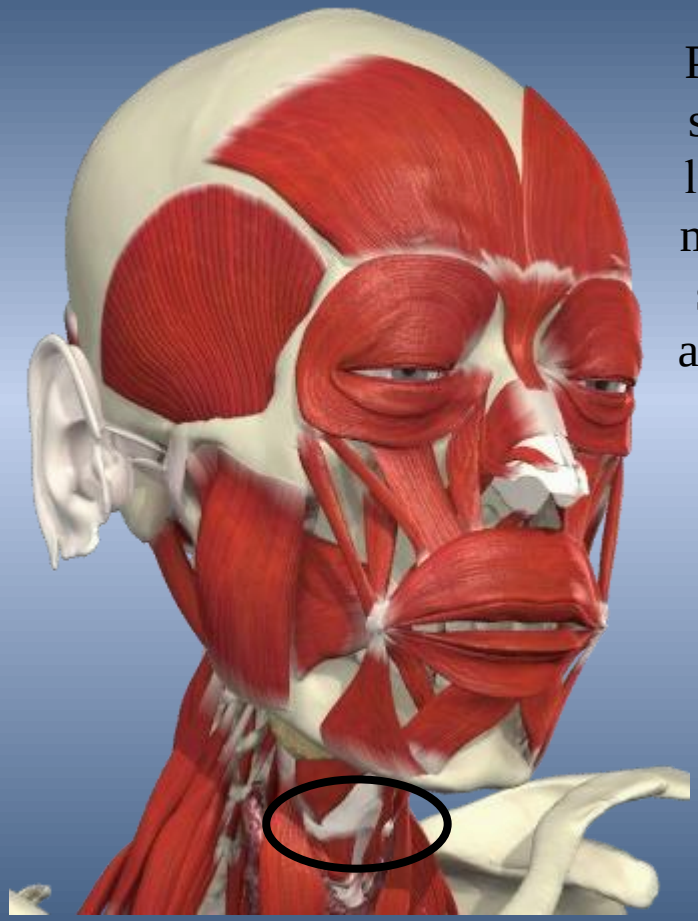
M. MASSETERE



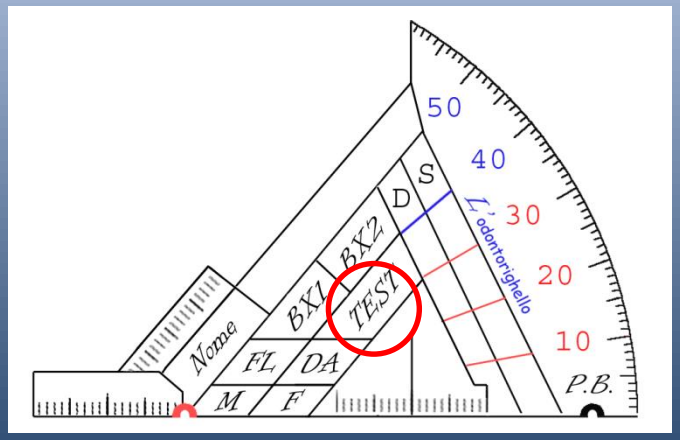


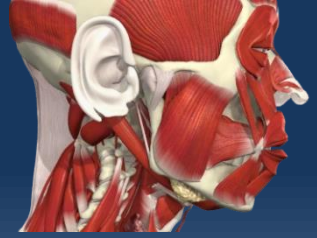


MUSCOLI MASTICATORI



Paziente in decubito supino o seduto, si afferra , con le dita pollice-indice, l'osso ioide e si inducono dei piccoli movimenti nelle varie direzioni dello spazio, per valutare l' escursioni , l' assenza di tensioni e mobilizzabile in tutte le direzioni

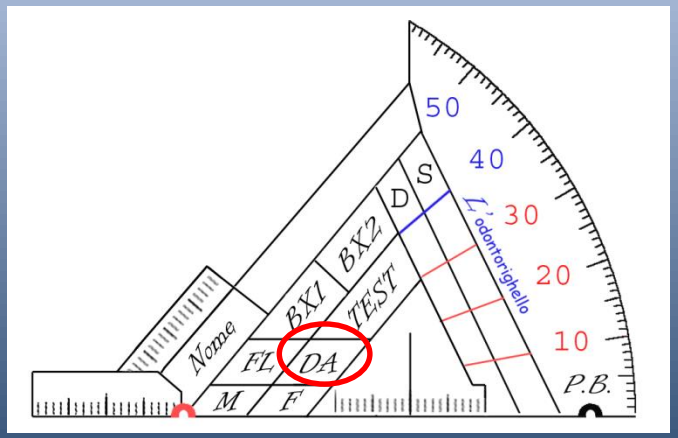


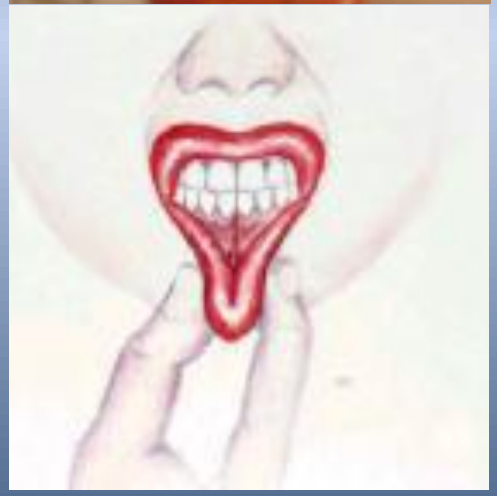


MUSCOLI MASTICATORI

700-3000 gr pressione sul palato

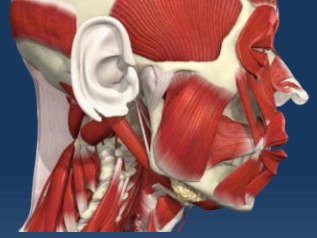
1600-2000 atti di deglutizione giornaliera





MANOVRA DI MUNIER

DEGLUTIZIONE ATIPICA O INFANTILE



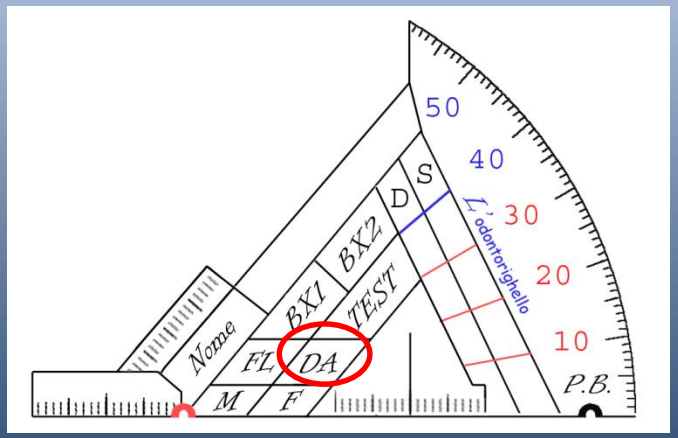
MUSCOLI MASTICATORI

Tecnica diagnostica di Payne

Consiste nell'utilizzo della lampada a luce nera
(lampada di WOOD) e nell'applicazione in punti specifici della
lingua di una pasta contenente fluorescina.
Applicata una piccolissima quantità di pasta in tre punti della
lingua, in genere la punta ed i margini in corrispondenza dei
premolari, si aspetta che il paziente deglutisca.

700-3000 gr pressione sul palato

1600-2000 atti di deglutizione giornaliera



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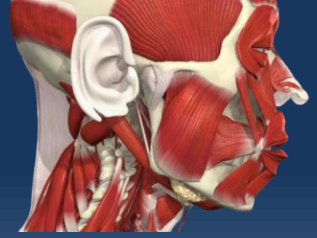
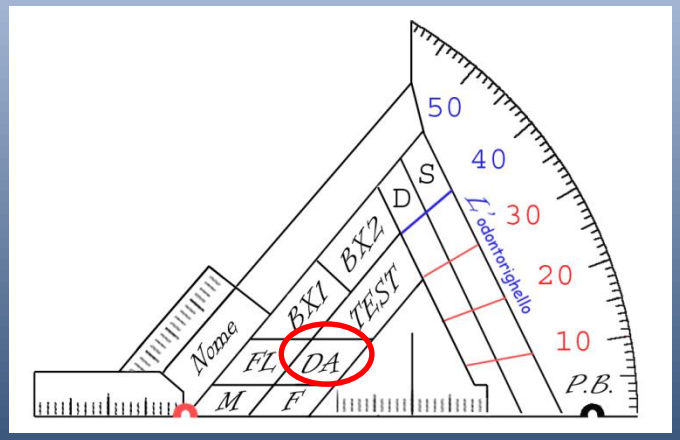


MUSCOLI MASTICATORI

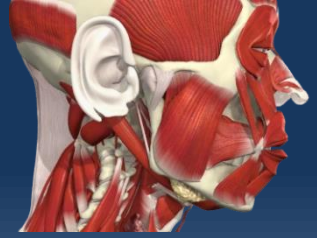
Tecnica diagnostica di Payne

700-3000 gr pressione sul palato

1600-2000 atti di deglutizione giornaliera



DEGLUTIZIONE ATIPICA O INFANTILE



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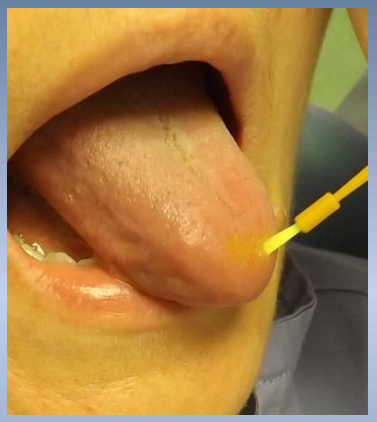
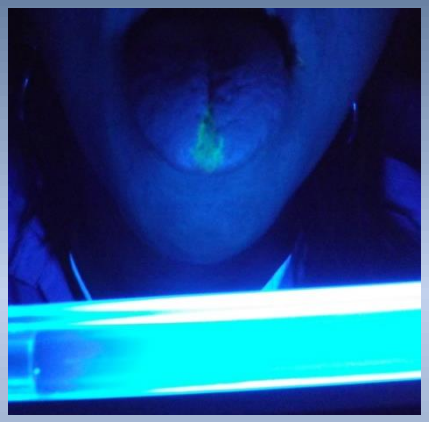
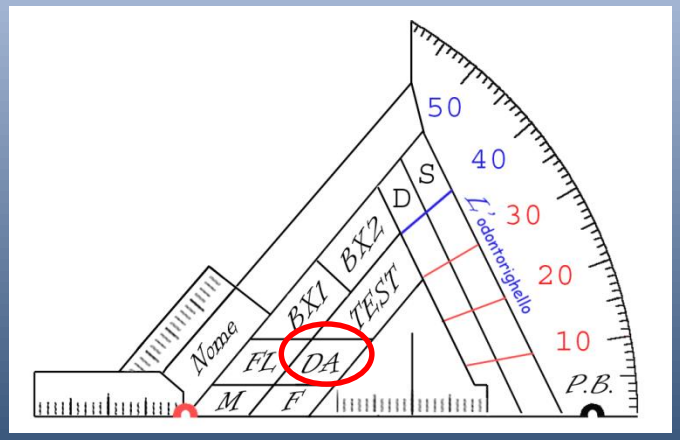
Tecnica diagnostica di Payne

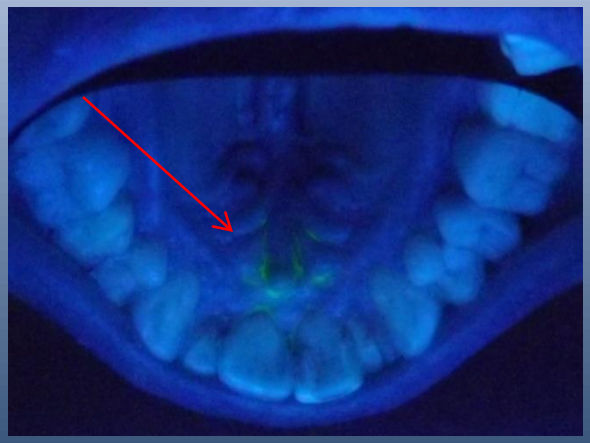
700-3000 gr pressione sul palato



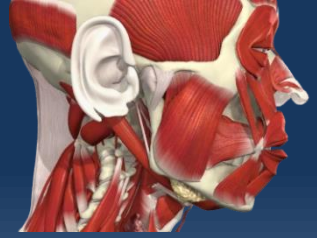


1600-2000 atti di deglutizione giornaliera





DEGLUTIZIONE ATIPICA O INFANTILE



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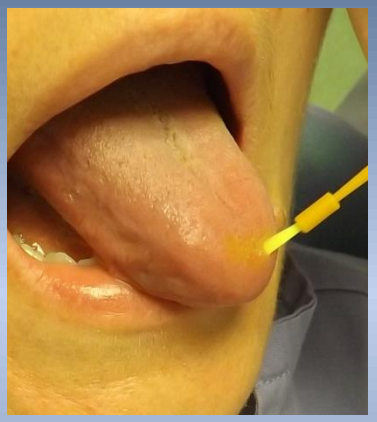
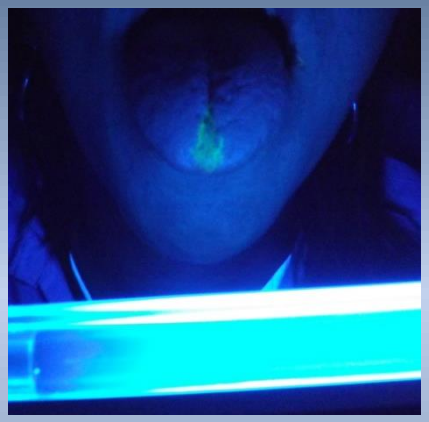
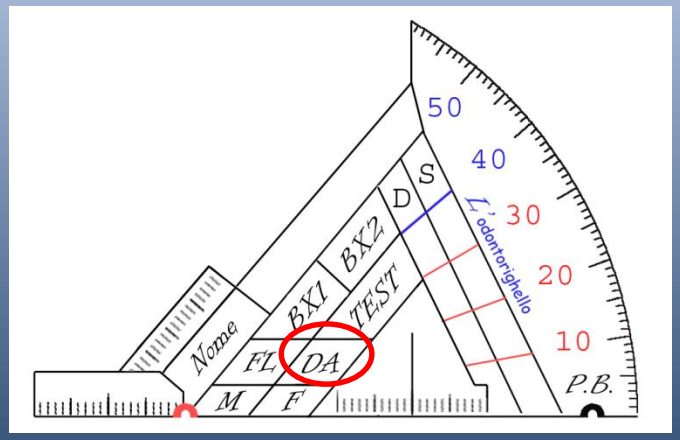
Tecnica diagnostica di Payne

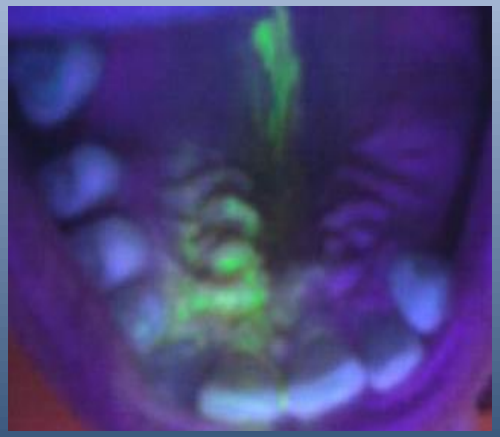
700-3000 gr pressione sul palato



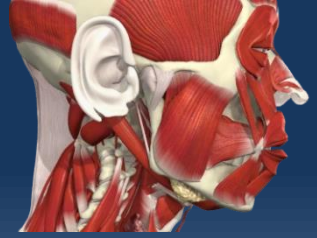


1600-2000 atti di deglutizione giornaliera





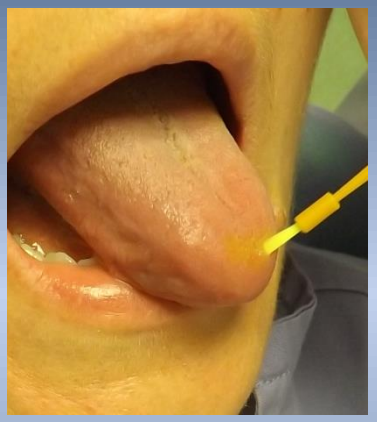
DEGLUTIZIONE ATIPICA O INFANTILE

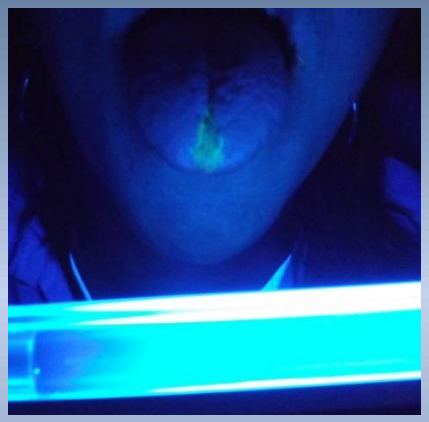


MUSCOLI MASTICATORI

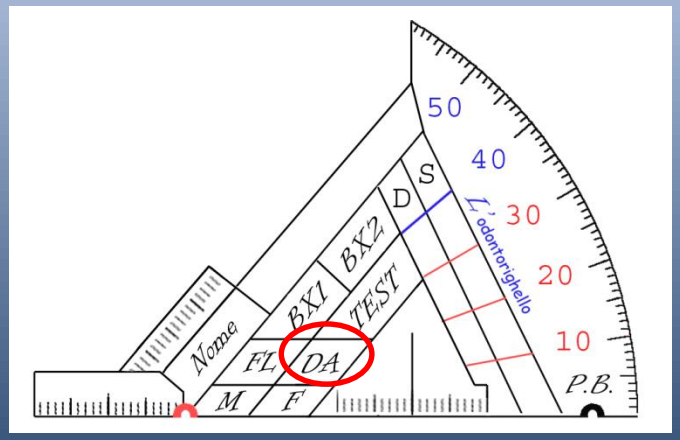
Tecnica diagnostica di Payne

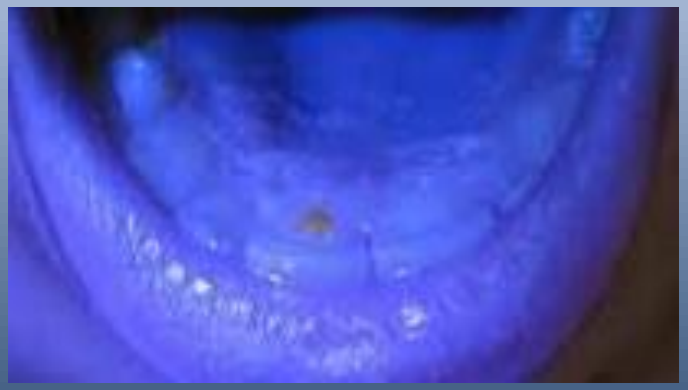
700-3000 gr pressione sul palato



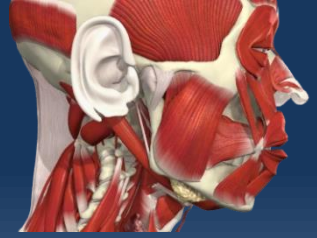


1600-2000 atti di deglutizione giornaliera





DEGLUTIZIONE ATIPICA O INFANTILE

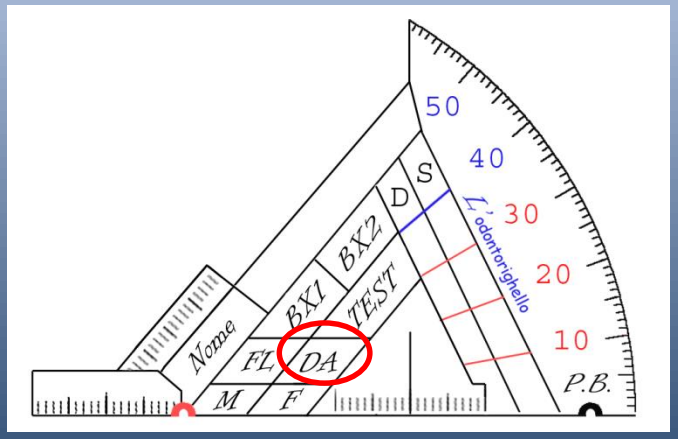


MUSCOLI MASTICATORI

700-3000 gr pressione sul palato

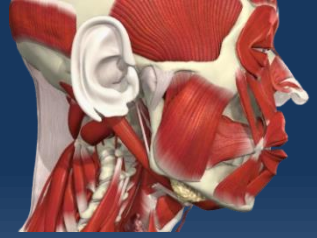
1600-2000 atti di deglutizione giornaliera

DINAMOMETRO



Standard di misure miofunzionale			
	Da 4 a 10 anni	Oltre i 10 anni	
Orbicolare	0.2-0.6(90-270 gr)	0.6-0.8(270-380 gr)	
Lingua in estensione	0.6-0.8(270-360gr)	0.8-1.2(270-540gr)	
Massetere contrazione	0.4-0.6(180-270gr)	0.6-0.8(270-360gr)	

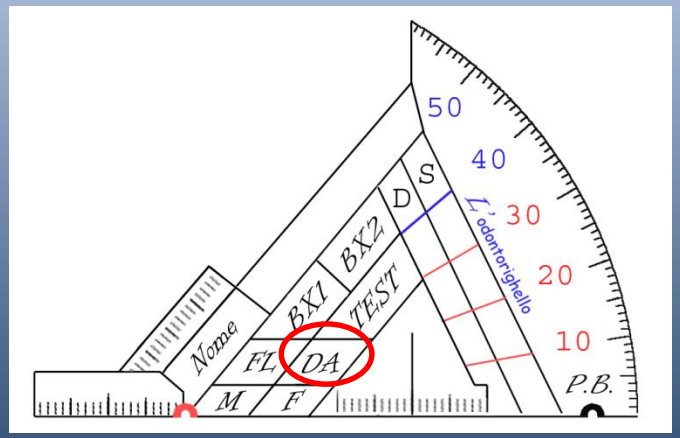
DEGLUTIZIONE ATIPICA O INFANTILE

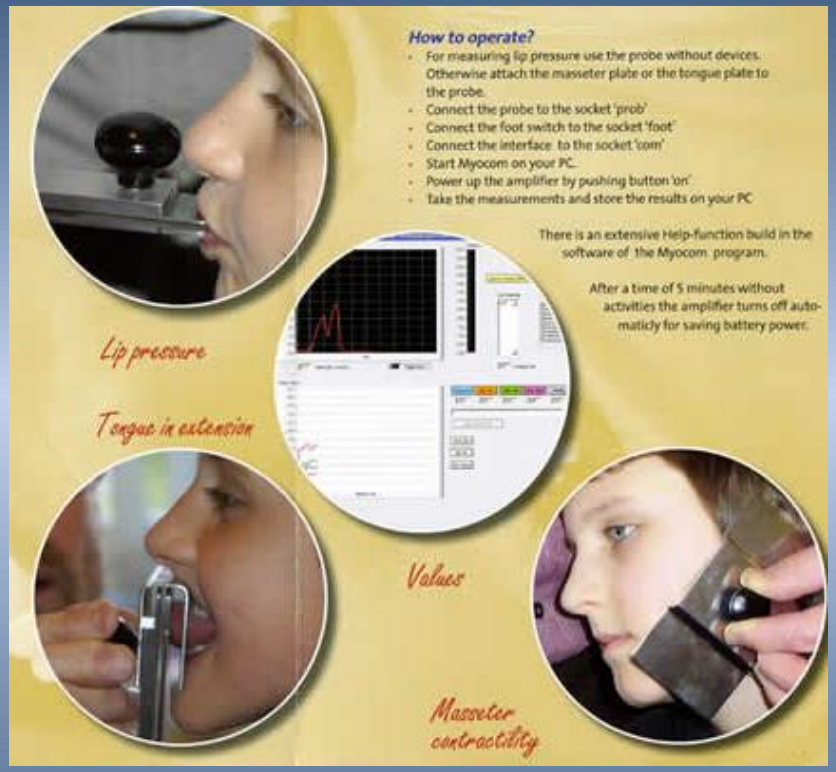


MUSCOLI MASTICATORI

700-3000 gr pressione sul palato

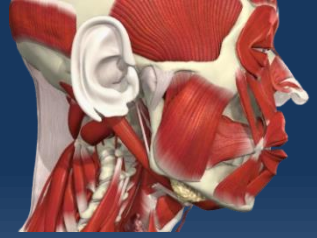
1600-2000 atti di deglutizione giornaliera



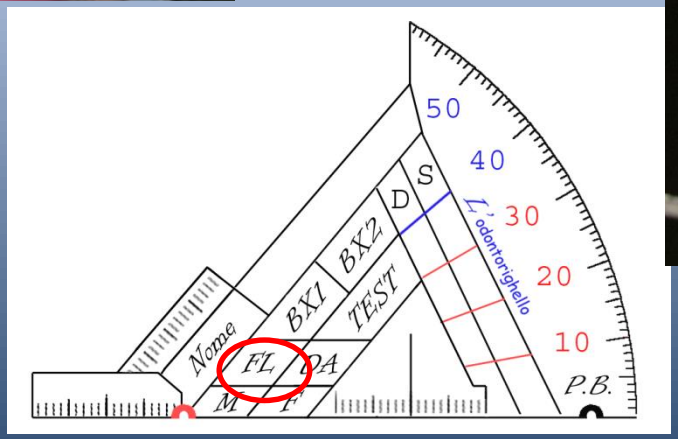


MYOMETER

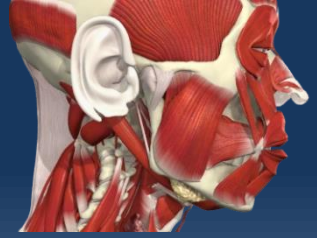
DEGLUTIZIONE ATIPICA O INFANTILE



MUSCOLI MASTICATORI



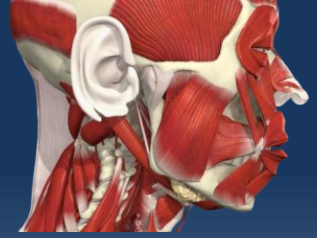
FRUNULO LINGUALE CORTO



OCCLUSIONE DENTALE

NORMOCCLUSIONE DENTALE = PRIMA CLASSE DENTALE(CLASSIFICAZIONE DI ANGLE)

… relazione tra i denti di entrambe le arcate dentali quando sono in contatto funzionale.



OCCLUSIONE DENTALE

OVERBITE(1-3 mm)

LINEA MEDIANA

OVERJET(1-3 mm)