



## Evolution of the Research Diagnostic Criteria for Temporomandibular Disorders

Temporomandibular disorders (TMD) represent a number of clinical conditions that involve the masticatory musculature, the temporomandibular joints (TMJs), and associated structures. Their main features are pain in one or more of these sites, jaw movement limitations, and TMJ noises. The etiology and pathogenesis of TMD have been matters of uncertainty and considerable debate for decades, and this uncertainty and controversy have also markedly influenced the diagnostic and management approaches of these conditions.

A landmark paper was published in 1992 in this journal when it was formerly known as the *Journal of Craniomandibular Disorders, Facial and Oral Pain*. The paper by Sam Dworkin and Linda LeResche was entitled "Research Diagnostic Criteria for Temporomandibular Disorders: Review, criteria, examinations and specifications, critique."<sup>1</sup> The Research Diagnostic Criteria for Temporomandibular Disorders (RDC/TMD) have provided operational definitions to distinguish TMD cases from controls and to diagnose specific TMD subtypes. The RDC/TMD have been used in many epidemiologic and clinical studies of TMD and the 1992 paper has been very extensively cited. The RDC/TMD specify a dual-axis diagnostic system that is supported by a history and examination protocol and that reflects the biopsychosocial health model.

The Axis I clinical assessment protocol is based on measurements of signs and symptoms, whereas the Axis II screening instruments assess pain-related disability and psychological status. The RDC/TMD were, as their name implies, meant primarily for research purposes and not meant to be fully applicable for day-to-day clinical usage for TMD patients and, indeed, a recent Focus Article and associated Critical Commentaries in the *Journal of Orofacial Pain*<sup>2-5</sup> drew attention to some limitations in the clinical utility of the RDC/TMD Axis 1 assessments. Moreover, the 1992 article also encouraged further research efforts to evaluate and test the validity and reliability of the system.

The RDC/TMD Validation Project reported in the first six articles of this issue of the *Journal of Orofacial Pain* provides the first comprehensive and rigorous assessment of the reliability and validity of the RDC/TMD. Through this series of articles, the Project has considered additional clinical measures and has presented recommendations for a revised RDC/TMD, including preliminary estimates of the revision's reliability and validity. In addition, the sixth article in the series outlines possible directions for future investigations of the natural history, etiology, and underlying mechanisms of specific TMD, as well as clinical trials of specific management strategies. This series of articles will, like the initial RDC/TMD paper published 18 years ago, represent an important step in the evolution of a better definition of the etiology and pathogenesis of TMD and of the diagnostic paradigms that will ultimately benefit patients with TMD and other conditions manifesting orofacial pain.

A handwritten signature in black ink, appearing to read "Barry J. Sessle".

Barry J. Sessle  
Editor-in-Chief

### References

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