



**TMD, Cervical Spinal & Orofacial Pain
Special Interest Section
Meeting Minutes
November 17, 2002**

Present: George Maloney, DMD (Chair); Douglas Anderson, DMD; Andy Branch; Luis Cueva, DDS; Bradley Eli, DMD; Edward Fort, DDS; Greg Gentry, DMD; Ivan Lapidus, DDS; Hieu Nguyen, DDS; Masakazu Okubo; Donald Primack, DDS; Melissa Baldwin (staff)

- I. Introduction
 - A. Dr. Maloney provided an overview and explained the purpose of the Section.
 - B. Attendees introduced themselves and gave relevant background information.

- II. Ways to Increase Section Involvement
 - A. Introduce the concept of dentists trained in orofacial pain to headache physicians. Describe the patients treated by dentists specializing in orofacial pain. Include relevant diagnoses.
 - B. Reach out to more people in the dental community.
 1. Send mailings to dental groups, such as AAOP (American Academy of Orofacial Pain), ACP (Academy of Craniofacial Pain) and oral and maxillofacial surgeons. Also include both the directors and residents of the orofacial pain centers in the US.
 - C. Expand the amount of speakers representing the Section at the AHS meetings.
 1. Develop breakout sessions or workshops on relevant topics concerning headache and facial pain. Some of these topics have been previously proposed and Dr. Maloney is hopeful that the AHS Education Committee will include them in programs the near future.
 2. Dr. Maloney suggested that all proposed programs be of interest to primary care physicians as well as dentists specializing in orofacial pain. The suggested topics include: Physical Exam for the Headache patient, Temporomandibular Disorder, Trigger point injection, Botox injection workshop and Tension-type Headache with Pericranial tenderness.
 - D. Encourage poster and abstract submissions for the AHS Annual Scientific Meeting and also to the AHS journal *Headache*.
 1. Content suggestions should be specific as possible.
 - a. Evaluation techniques
 - b. Treatment techniques, such as trigger point injection, Botox injection, acupuncture, etc.
 - c. Epidemiology

- d. Case presentations (routine and unique) so the neurologists know who is currently providing treatment for various aspects of facial pain (dentists trained in orofacial pain).
- E. Suggest that an individual with a dental degree (D.M.D. or D.D.S.) be included on the AHS Board.

III. Orofacial Pain Center

- A. Dr. Branch described the two year Orofacial Pain Residency Program at Bethesda, Maryland developed by the US Navy for dentists and physicians who are active military officers. The Navy has appropriated over a million dollars in funding for the development of this training program. Dr. Branch will forward a description of this program to Dr. Maloney.

There being no further business, the meeting was adjourned.

Respectfully submitted by:
Melissa Baldwin

(It may be useful to know that this Section currently has 69 members. Please invite any interested colleagues who are members of the AHS and who you feel will be valuable members of this Section to join us. GM)