MAXFAC LONDON

Mr Nabeel Bhatti · Consultant Oral & Maxillofacial Surgeon

PATIENT INFORMATION SHEET

Botulinum Toxin (Botox®) for TMJ Disorder and Myofascial Jaw Pain

This sheet explains botulinum toxin injections as a treatment for jaw joint (TMJ) and chewing-muscle (myofascial) pain. It is intended as a general guide alongside your consultation with Mr Bhatti, not a replacement for it. Please raise any questions before your appointment.

01 WHAT IS BOTULINUM TOXIN?

Botulinum toxin type A (sold under brand names including Botox®) is a purified protein that, when injected in small doses into a muscle, temporarily blocks the nerve signals that trigger muscle contraction. This relaxes the muscle and reduces its activity for a period of months.

It is widely known for cosmetic use, but the same mechanism is used therapeutically to calm overactive jaw muscles — principally the masseter (the main chewing muscle at the angle of the jaw) and sometimes the temporalis (at the temple).

02 WHY IT'S USED FOR TMJ / MYOFASCIAL PAIN

Much of the pain in temporomandibular disorders (TMD) comes not from the joint itself but from the surrounding chewing muscles, which can become overworked, tender, and go into spasm — often linked to clenching or grinding (bruxism), stress, or an uneven bite. By reducing excessive muscle activity, botulinum toxin can:

- Reduce day-to-day jaw, temple, and ear-area pain
- Ease tension headaches associated with clenching or grinding
- Improve comfort when chewing or opening the mouth
- Reduce the intensity of nocturnal grinding/clenching episodes

Important: this is an off-label use of botulinum toxin (it does not have a UK product licence specifically for TMD/myofascial pain, though this use is well established in oral and maxillofacial practice and supported by a growing clinical evidence base). Mr Bhatti will discuss this with you and obtain your specific consent before treatment.

Botulinum toxin is usually one part of a broader management plan. It works best alongside — not instead of — measures such as a bite splint, physiotherapy, jaw exercises, and addressing habits like clenching, nail-biting, or chewing gum.

03 WHAT THE PROCEDURE INVOLVES

- Performed in clinic; no general anaesthetic is required
- A small number of injections are placed directly into the masseter (and temporalis, if indicated) using a very fine needle
- Typically takes 10–15 minutes
- You can drive yourself home and return to most normal activities the same day

04 WHAT TO EXPECT AFTERWARDS

Onset of effect	Gradual over 3–7 days; full effect by around 2 weeks
Duration of effect	Typically 4-6 months, after which muscle activity gradually returns
Repeat treatment	Most patients need repeat injections roughly every 4-6 months for sustained benefit; some find their symptoms improve over time and require treatment less often
Possible side benefit	Some patients notice mild softening/slimming of the jawline as the masseter reduces in bulk with repeated treatment

05 AFTERCARE ADVICE

- Stay upright and avoid lying flat for 4 hours after treatment
- Avoid rubbing, pressing, or massaging the treated area for 4 hours
- Avoid strenuous exercise, alcohol, and saunas/hot baths for the rest of the day
- Mild tenderness, bruising, or swelling at injection sites is normal and usually settles within a few days — cool compresses can help
- You may take paracetamol if needed; avoid aspirin/ibuprofen for 24 hours where possible, as these can increase bruising
- It is normal to feel little to no change for the first few days — the effect builds gradually

06 POSSIBLE SIDE EFFECTS AND RISKS

Botulinum toxin has a well-established safety profile when used at the low doses required for jaw muscles. Most effects are mild and temporary.

Common (settle without treatment)

- Bruising, redness, or tenderness at injection sites
- Mild headache for 24–48 hours
- Temporary tiredness or aching of the jaw muscles when chewing

Less common

- Noticeable weakness when chewing tough or chewy foods, especially soon after treatment or at higher doses
- Asymmetry between the two sides of the face
- Temporary change in smile if toxin spreads to nearby muscles (uncommon with masseter/temporalis injection, more relevant to lower-face injections)
- Dry mouth

Rare

- Allergic reaction
- Difficulty swallowing, speaking, or breathing — seek urgent medical attention if this occurs
- Effect wearing off unevenly, requiring a top-up

07 WHO SHOULD NOT HAVE THIS TREATMENT

Please tell Mr Bhatti if any of the following apply to you, as botulinum toxin may not be suitable, or extra caution may be needed:

- Pregnancy or breastfeeding

- A known allergy to botulinum toxin or any ingredient in the preparation used
- A neuromuscular condition such as myasthenia gravis or Eaton-Lambert syndrome
- Current infection or skin problem at the injection site
- Certain antibiotics (e.g. aminoglycosides) or other medications that can interact with botulinum toxin
- A bleeding disorder or use of blood-thinning medication

08 QUESTIONS BEFORE YOU DECIDE

It's entirely reasonable to want more information before going ahead. Things you might want to ask Mr Bhatti include:

- Is this treatment appropriate for my specific diagnosis?
- What dose and how many injection sites do you recommend for me?
- What are realistic expectations for pain relief in my case?
- What other options should I consider alongside or instead of this?
- What is the cost, including any planned review or repeat treatment?

This information sheet does not replace a face-to-face consultation. If you have any concerns after treatment, please contact the practice.

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