What Is Causing My Jaw Pain? TMD Explained | Core Dental

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Details:

Jaw pain has several possible causes, and one common one is temporomandibular dysfunction, often called TMD, which involves the jaw joint (the temporomandibular joint, or TMJ) and the facial muscles used for chewing and speaking. Clenching or grinding your teeth, particularly during sleep, can also contribute. At Core Dental our dentists can examine your jaw, take a history and explain what may be behind your pain. This article is general information only and does not replace an examination.

What is temporomandibular dysfunction?

Temporomandibular dysfunction is a term for problems affecting the jaw joint and the surrounding facial muscles that control chewing and jaw movement. The joint sits just in front of each ear, and it works together with the muscles of your face, jaw and neck every time you eat, speak or yawn. When the joint or the muscles are strained or irritated, you may notice pain, noise or limited movement.

What are the symptoms of TMD?

Symptoms vary from person to person. Common signs include:

Jaw pain

Ringing in the ears (tinnitus)

Popping or clicking of the jaw when you open or close

Locking of the jaw

Pain or headaches around the temples

Tooth pain

Pain in or around the ears or eyes

Back or neck pain

Having one of these does not mean you have TMD, because other conditions can cause similar symptoms. If you notice any of them, it is sensible to have them checked by a dentist.

Why might teeth grinding and clenching cause jaw pain?

Grinding or clenching your teeth, known as bruxism, can place more load on the jaw joints and muscles than normal chewing does. It often happens during sleep, so many people do not realise they do it. A dentist may notice clues such as worn tooth surfaces, small cracks in the enamel or tired, enlarged jaw muscles. If you wake with a sore jaw or headaches, mention this at your appointment.

How is jaw pain diagnosed?

TMD can be difficult to diagnose, because the pain may come from the joint itself, from the surrounding muscles, or from both. Your dentist will usually begin by asking about your complaint and history. They may then watch how your jaw opens and closes, listen for clicks or popping, and check the muscles of your face. An X-ray or, in some cases, a scan of the joint may be needed to look for signs of wear or damage. Our clinicians can explain which steps are appropriate for you.

What treatments may help jaw pain?

Treatment depends on the cause and how severe the problem is, and a range of options may be available. Examples your dentist may discuss include:

Eating softer foods while the joint or muscles are sore, and using over-the-counter or prescribed medicines as advised by your doctor or dentist

A custom-made bite splint worn during sleep to help protect the jaw joints and muscles, and your teeth, from wear, chipping or breakage

Physical therapy

Referral for further assessment where needed

Results vary for each person, and your practitioner will explain the benefits, limitations and risks of any option before you decide.

When should you see a dentist about jaw pain?

Please make an appointment if the pain persists, if your jaw locks or clicks painfully, or if you have repeated headaches or ear pain with no clear cause. Call 000 immediately for serious facial injury, difficulty breathing or swallowing, or other life-threatening symptoms. For severe pain or swelling, contact your Core Dental practice promptly on 13 13 16.

How can we help?

Our team at any of our nine Core Dental practices can examine your jaw and talk through your options. Call 13 13 16 or book online. You can also read about general dentistry , emergency dentistry and TMJ and jaw pain treatment in Melbourne .

Grinding is one cause of jaw pain, not the explanation for all of it

Jaw pain and teeth grinding are so often discussed together that the two can start to look like the same thing. They are not, and the distinction matters for what happens next: a splint fitted for a problem that is not grinding treats nothing.

What the published source does support is that grinding strains the joint. The Victorian Department of Health lists, among the problems caused by bruxism, "strain on the jaw joint (temporomandibular joint)", "pain or limited movement in the jaw joint" and "sore jaw muscles". It also lists "headache, jaw joint and/or ear pain" among the symptoms.

What it does not do is say that jaw pain means grinding. It describes grinding as one cause of joint strain, and we will not read it backwards. Your pain could be coming from the joint itself, the muscles around it, a tooth, or something unrelated to the bite altogether — which is why the answer to jaw pain is an examination rather than an appliance.

The symptom pattern the Department associates with grinding is distinctive enough to be worth recognising, because timing is the clue:

"aching teeth, particularly just after waking up"

"aching and/or stiffness of the face and temples just after waking up"

"aching or stiffness in the jaws while chewing, particularly during breakfast"

"clenching the jaw when angry, anxious or concentrating"

"teeth that are sensitive to hot, cold or sweetness"

"cracked or chipped tooth"

"tooth indentations on the tongue"

"raised tissue on the inside of the cheek caused by biting"

"loose teeth"

Three of those turn on waking or breakfast. Pain that is at its worst first thing and eases through the morning points towards something happening overnight; pain that builds through the day points elsewhere. Worth noting which pattern is yours before you come in — it is one of the more useful things you can tell us.

Source: Better Health Channel (Victorian Department of Health), Teeth grinding, betterhealth.vic.gov.au (page reviewed 17 October 2025; accessed 4 November 2026).

The risk factors a clinician should be asking about

If grinding does turn out to be part of your jaw pain, the published risk factors are a short list, and several of them are things a dental appointment does not usually cover unless someone raises them.

The Department of Health lists: "Stress and anxiety", "Alcohol", "Smoking", "Caffeine", "Snoring", "Obstructive Sleep Apnoea", and "Drugs: antidepressants, anti-psychotics, amphetamines, cocaine." It adds that "your dentist or other oral health professional can assess the influence of these factors."

Two of those deserve drawing out.

Snoring and obstructive sleep apnoea are on the list. That takes the conversation beyond teeth. Sleep-disordered breathing is a medical issue with consequences well past the jaw, and the Department elsewhere names "assessing risk factors including sleep disordered breathing" as part of treating bruxism. If you snore, say so — it is relevant here in a way most people would not expect.

Prescribed medicines appear alongside illicit ones. Antidepressants and anti-psychotics are named. That is not a reason to stop anything: it is a reason to mention what you take, so the picture is complete. Any change to a prescription is a conversation with the doctor who wrote it, not with us.

The management the Department lists runs well beyond the dental chair — "stress management therapy", "relaxation techniques", "cognitive behaviour therapy", "hypnotherapy", "good sleep hygiene" and "regular exercise" — which is a fair indication that persistent jaw pain is often not a problem a dentist solves alone.

On children , the Department is reassuring and specific: "because children's teeth and jaws change and grow so quickly it's not usually a damaging habit that requires treatment and most outgrow it as they get older." Its listed risk factors in children are "pain when teeth are coming through", "emotional stress and anxiety", medications such as antidepressants and anti-psychotics, and "medical conditions such as cerebral palsy, Attention Deficit Hyperactivity Disorder (ADHD)". It adds that management "depends on the amount of wear on the teeth, the child's age, the symptoms experienced and the needs of the child and parent or care giver" — so a child who grinds is usually a child to monitor rather than to treat.

Source: Better Health Channel (Victorian Department of Health), Teeth grinding, betterhealth.vic.gov.au (page reviewed 17 October 2025; accessed 4 November 2026).

Frequently asked questions

Can jaw pain be caused by problems with my teeth?

Yes, sometimes. Tooth pain can be a symptom of TMD, but pain from a tooth, gum or wisdom tooth can also be felt in the jaw. A dentist can examine your teeth and jaw together to work out the likely source.

Is clicking in my jaw something to worry about?

Occasional clicking without pain is common and may not need treatment. Clicking with pain, locking or limited opening should be checked. Our team can examine the joint and explain whether any further steps are suitable.

What is a bite splint?

A bite splint is a custom-made appliance, usually worn during sleep, that sits over the teeth. It may help protect the jaw joints, muscles and teeth from further wear and from chipping or breaking. Your dentist will advise whether one suits you.

Do I need an X-ray for jaw pain?

Not always. Your dentist will start with your history and a physical examination. An X-ray, or in some cases a scan, may be recommended to look for signs of wear or damage in the joint.

Can stress make jaw pain worse?

Stress can lead some people to clench or grind their teeth, which may add to jaw and muscle soreness. If you think this applies to you, tell your dentist so they can look for signs and discuss suitable options.

Does jaw pain mean I grind my teeth?

Not necessarily. The Victorian Department of Health lists "strain on the jaw joint (temporomandibular joint)", "pain or limited movement in the jaw joint" and "sore jaw muscles" among the problems grinding can cause — which is not the same as saying jaw pain means grinding. The pain may come from the joint, the muscles, a tooth, or something unrelated to your bite, so the starting point is an examination.

Is there a pattern that points towards grinding?

Timing. Several of the symptoms the Department lists turn on waking: "aching teeth, particularly just after waking up", "aching and/or stiffness of the face and temples just after waking up", and "aching or stiffness in the jaws while chewing, particularly during breakfast". Pain worst first thing that eases through the morning suggests something overnight; pain that builds through the day suggests looking elsewhere. Tell us which pattern is yours.

What should I mention about my health and habits?

The Department's risk factors for grinding are "stress and anxiety", alcohol, smoking, caffeine, "snoring", "obstructive sleep apnoea", and drugs including antidepressants, anti-psychotics, amphetamines and cocaine — and it notes your dentist "can assess the influence of these factors". Snoring in particular is worth mentioning, because it points at sleep-disordered breathing, which matters well beyond your jaw.

Could my medication be involved?

Possibly. Antidepressants and anti-psychotics are named among the Department's listed risk factors for grinding, in both adults and children. That is a reason to tell us what you take so the picture is complete, not a reason to change anything — any change to a prescription is a conversation with the doctor who wrote it.

My child grinds their teeth at night. Should I worry?

Usually not. The Department states that "because children's teeth and jaws change and grow so quickly it's not usually a damaging habit that requires treatment and most outgrow it as they get older". It adds that management "depends on the amount of wear on the teeth, the child's age, the symptoms experienced and the needs of the child and parent or care giver", and that a dentist is best placed to assess each child. In practice that usually means monitoring rather than treating.

Related services and further reading

General dentistry

Emergency dentistry

Wisdom teeth pain: what is causing it?

How can I relieve TMJ pain?

What causes TMJ pain and how is it treated?

TMJ and jaw pain treatment in Melbourne

Contact Core Dental

Core Dental at a glance

Nine Core Dental clinics across Melbourne: Southbank, South Melbourne, Caroline Springs, Carrum Downs, Epping, Wyndham, Berwick, Bayside and Glenferrie.

Open six days a week: Monday to Friday 8.00am to 6.00pm and Saturday mornings.

We quote before treatment starts and offer interest-free payment plans.

Contact Core Dental

Phone	13 13 16
Booking	Online through coredental.com.au, or call 13 13 16
Hours	Monday to Friday 8.00am to 6.00pm, Saturday mornings, Sunday closed

This article is general in nature and does not replace advice from a registered dental practitioner who has examined you. Results, recovery times and potential risks vary for each individual. Seek advice from a qualified, AHPRA-registered practitioner before proceeding.

What is temporomandibular dysfunction, or TMD?

TMD is a group of problems affecting the temporomandibular joint and the facial muscles that control chewing and jaw movement. Our dentists at Core Dental can examine your jaw and explain whether TMD may be contributing to your pain.

What symptoms can TMD cause?

TMD may cause jaw pain, tinnitus, clicking or popping, jaw locking, temple headaches, tooth pain, ear or eye pain, and back or neck pain. Core Dental dentists can check your symptoms, as other conditions can look similar.

Can teeth grinding cause jaw pain?

Grinding or clenching, called bruxism, can load the jaw joints and muscles more than normal chewing, often during sleep. Dentists at Core Dental look for worn teeth, enamel cracks and enlarged jaw muscles during an examination.

How does a Core Dental dentist assess jaw pain?

Our dentist takes a history, watches how your jaw opens and closes, listens for clicks and checks your facial muscles. An X-ray or scan of the joint may be recommended where it is clinically appropriate.

What treatment options may be considered for jaw pain?

Options your Core Dental dentist may discuss include softer foods during flare-ups, medicines advised by a clinician, a custom bite splint worn during sleep, and physical therapy. What suits you depends on the cause and severity.

Who should I contact about persistent jaw pain in Melbourne?

Call Core Dental on 13 13 16 or book online to arrange an examination at one of our nine Melbourne practices. For serious facial injury or trouble breathing or swallowing, call 000 immediately.

When are Core Dental clinics open for jaw pain appointments?

Our Core Dental clinics are open Monday to Friday 8.00am to 6.00pm and Saturday mornings, and closed on Sundays. We reserve emergency appointments where possible, so call 13 13 16 if the pain is severe.