

9. Temporo-mandibular arthritis (a rare diagnosis)

(Case report)

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Female, age 34, suffering from polyarticular rheumatoid arthritis during 2 years. Seronegative, ESR 37 mm/l hr, elevated total protein.

23.6.1975

X-hands: soft tissue swelling around proximal interphalangeal joint of dig. II r.

X-knees: no abnormalities.

Thermogram knees (Fig. 1): r. knee temp. 32-34" C, with hot spot on the patella. L. knee shows hot spots on medial and lateral aspects of knee, i.e. 33" C.

11.9.1975

Thermogram hands (Fig. 2): r. metacarpal 32" C with a temperature elevation in dig. II. L. hand slightly elevated temperature in the metacarpal regions.

10.2.1976

Thermogram hands (Fig. 2): changes emission pattern. R. metacarpal regions show a temperature of 30-32" C; dig. III 32-33" C and dig. II 28-29" C. These hot spots are marked on the profile scan.

Thermogram Of mandibular joints (Fig.

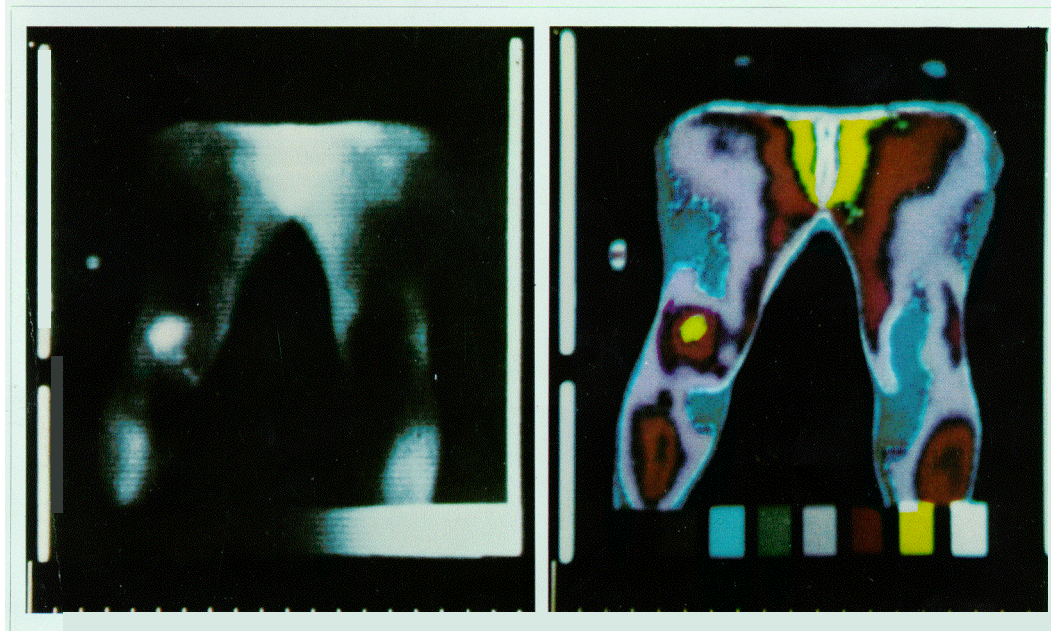
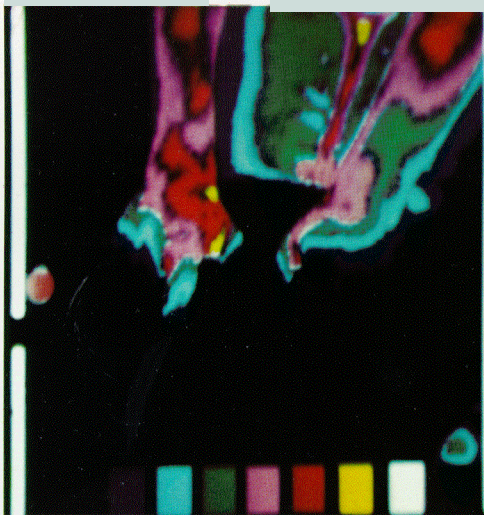
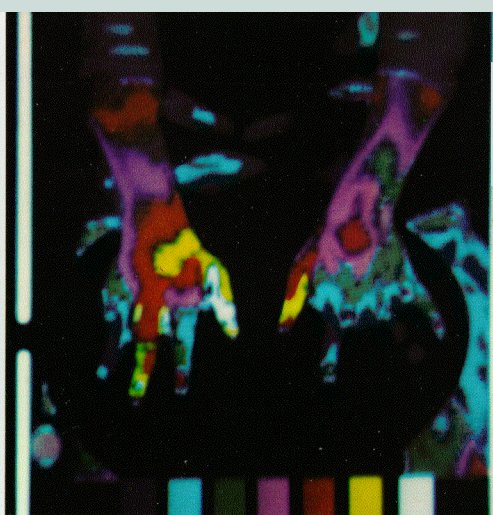


Fig. I. Thermograms of anterior Knees showing hyperthermia of the right joint.

A



B



A



B



A



B

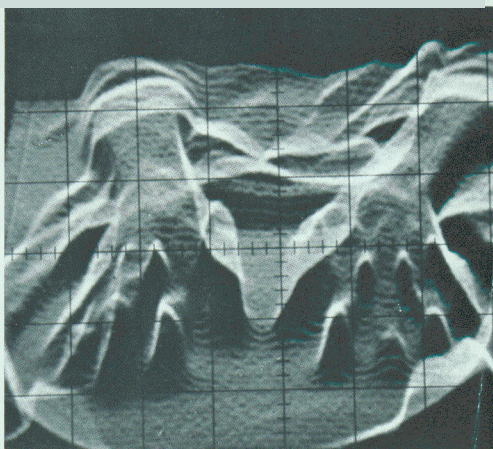


Fig. 2. A) Thermograms of hands; B) Changes emission pattern after six months.

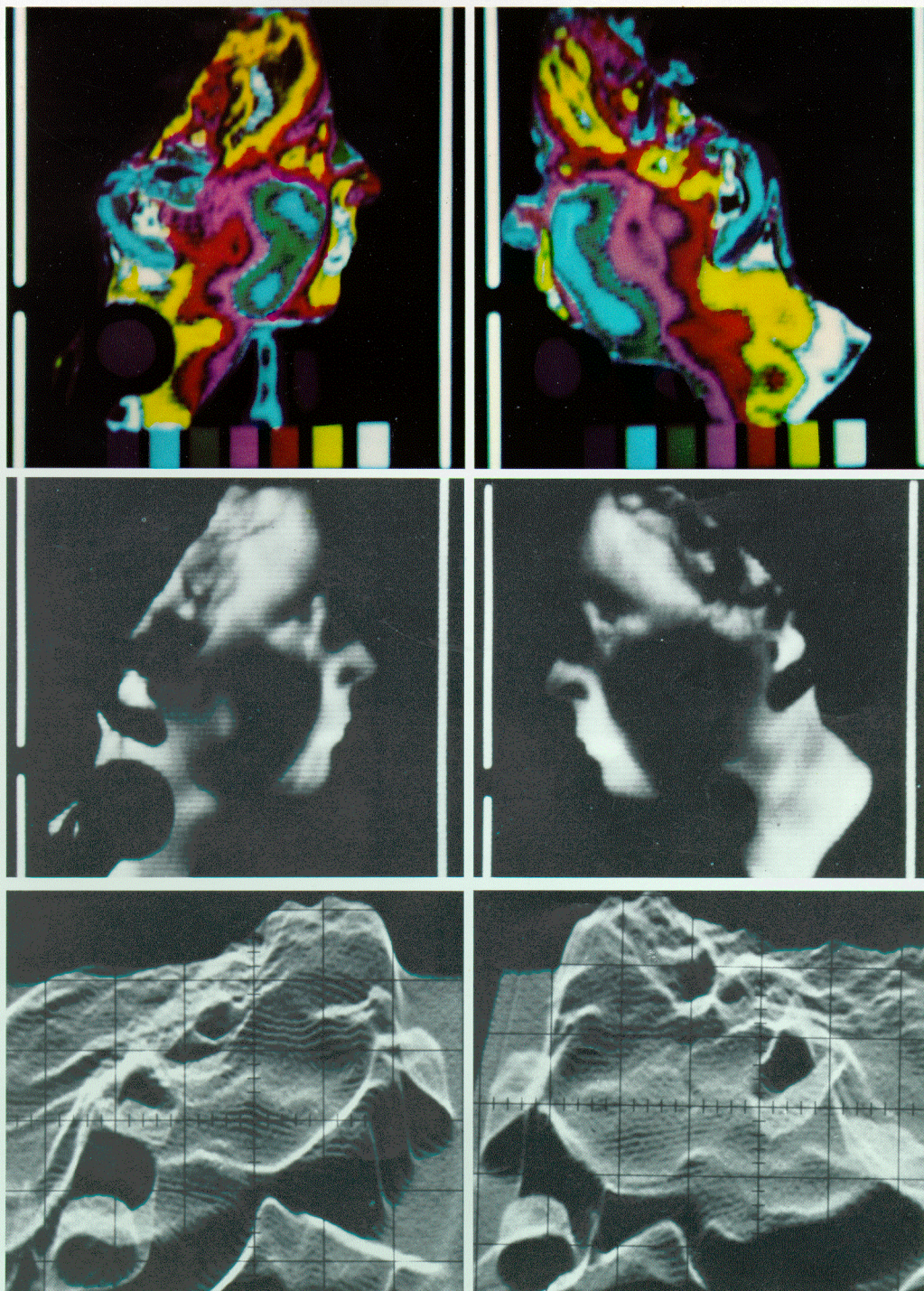


Fig. 3. Lateral thermograms face showing temporal mandibular hyperthermia of the left side.

3): from the end on 1974 increasing complaints about the l. mandibular joint, Thermographs of the r. mandibular joint shows a normal pattern, with a temperature of 33° C. The l. joint however shows a marked hot spot of 34-35° C.

Clinical diagnosis: pressure ulcer and articular dysfunction, possibly associated with an arthritis of bacterial origin due

to a non-fitting dental prothesis. After correction of this prothesis there was rapid relief of pain and decreasing signs of arthritis.

Conclusion: thermography demonstrated finally the serious nature of patients long-standing complaints. The rheumatoid aspects of this arthritis is still uncertain.

