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Psychological screening of temporomandibular disorder patients

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Acknowledgements

The PhD defence ceremony will round off more than a quarter of a century of work in dentistry. It started purely by accident when, in the beginning of the eighties, a sudden shortage of jobs for psychologists occurred. Not employed at the time, I was glad that my friend, Gerold Moltzer, who, unfortunately died many years too early, introduced me as a freelance communication skills trainer at the Department of Social Dentistry of the University of Amsterdam. It not only meant the introduction in a to me unknown territory, that would later turn out to be a little paradise for a clinical psychologist, but more importantly then, it meant securing an income. Research activities were not part of my work then. Only after I got involved in the treatment of patients, I started writing some reports in Dutch dentistry journals, then abstracts presented at research conferences, until finally some papers were published in peer-review journals. Only gradually, the idea of finishing these with a dissertation developed. I am thankful to many people, who in some way, in those 25 years, have contributed to this course of events.

At the time, after it seemed almost certain that my freelance work would develop into a steady job, dark clouds started to cover the sky. Three dental schools in The Netherlands had to close down, and it became clear that I would have to leave the premises shortly. The Social Dentistry members allowed me to try and find new work within the faculty, by getting involved in the treatment of difficult dental patients. The first group were denture patients, who were referred to me by Pieter van Mens. Although most patients adapt to their denture reasonably well, some encounter problems, for example, if they develop an extreme gag reflex. Together with Gerold Moltzer and Conny Pronk, both sociologists, we studied these patients and produced our first paper reports on the subject. It was stimulating to work together and to begin developing a researcher's mind. The second patient group came from the then called 'craniomandibular' disorder clinic, mostly with complaints of chronic orofacial pain, who were referred to me by professor Tore Hansson. Another research activity was started when the chairman of the Department of Social Dentistry, Albert Tan, who has also died many years ago, succeeded in collecting funds for me to do a research project on occupational stress of dentists. This led to the publication of a report and some papers about the subject and the start of a series of stressmanagement training groups for dentists, which I organised on a private basis.

It was a policy of the Social Dentistry department to spend the means available for travel abroad in such a way that in due time, each member got his or her turn. It was in 1987 when I made my first trip and participated in the annual meeting of the International Association for Dental Research (IADR), which was held in Chicago. This allowed me to be introduced to dental scientists and practitioners, who had developed a cooperation with clinical psychologists in their teams, and had formulated research projects to systematically examine the disorders they were trying to treat. These contacts were not only tremendously inspiring for me, but had some far-reaching consequences. Since one of the scientists present, Sam Dworkin, lived in Seattle, where I would visit my brother after the conference, I could also pay him a visit at the clinic where he worked. Afterwards he very generously forwarded me a psychological screening questionnaire for TMD patients. It was later developed into the official questionnaire of the RDC/TMD guidelines in 1992. I translated that first questionnaire, and started using it with the TMD patients. This also gave me the opportunity to collect data for the type of research that could be

accomplished in the little time that I had available then. The support I received in those first years at the Social Dentistry department made the start of my research activities possible.

In 1986, I was officially appointed to do clinical psychological work, for two days a week, at the Dental schools of both the University of Amsterdam and the Free University, which together, were later called the Academic Centre for Dentistry Amsterdam (ACTA). In several years the workweek gradually grew into a fulltime job, when I also started working for the Centre for Special Dental Care (SBT). For the dental fear patients, which had become the third patient group referred, two new colleagues arrived. This left all my available working time for somatic complaints: temporomandibular disorders, problems with dentures, dental implants or other prosthetic devices, and aesthetic complaints, which were often affected by psychological factors. I have seen thousands of patients, of both sexes and with different ages, ethnic backgrounds, nationalities, and as many different psychosocial backgrounds. It has been very interesting and rewarding work.

I appreciated working in teams with dentists and the physiotherapists, and admired their skills and their motivation to try and find solutions for their patients' suffering. I have also appreciated how much they were open to introducing the psychological aspects in their work and follow the advice given. At the SBT, I worked with pleasure in the maxillofacial prosthodontics (MFP) department led by Yang Tjiok, where difficult denture and implantology patients were treated. Together, we presented our study of long-term satisfaction with Dyna implants at the IADR conference in Singapore. With several of the dentists we made a wonderful trip to an Indonesian dentists' conference in Bandung, where it became clear that for them, having a psychologist in the team, was an as yet un-affordable luxury. In the temporomandibular disorder (TMD) section, which was at first led by Henk Sulkers, and later by Bing Tjiok and Frans van der Vijgh, we worked together very productively and had a lot of laughs at our meetings.

Although time to do research was not available at the SBT, my research activities were encouraged and my participation in the IADR conferences were financially supported, thanks to the director of the SBT, Wouter Roschar, which I appreciated very much. Since the dentists discovered that the information I brought back from the dental conferences were of immediate practical use, this situation worked well. I want to thank all dentists, and the physiotherapist of the TMD and MFP treatment teams of the SBT for allowing me this space and stimulating my research activities.

At the ACTA department of Oral Function I had the pleasure to combine the clinical work with teaching and research. It was at the ACTA department where the research projects were shaped and scientific presentations were critically discussed. While preparing abstracts, posters and presentations for the IADR conferences, and started writing the first papers, the idea of rounding off the studies with a dissertation was brought up many times, and was just as frequently dismissed again. I certainly made the idea 'never to rush things' come true, and Chiel Naeije and Frank Lobbezoo were very patient indeed! In the meantime, I learned much from both of them.

Especially Chiel was very good at pointing out circular reasoning, 'woolly' use of the language, redundant words and sentences, and, not to forget, discovering the spelling mistakes! We had quite different temperaments, or maybe it was an incompatibility of our zodiac signs, but

we were both often mutually and genuinely surprised at each other's reactions. This has not at all affected my respect and appreciation for his dedication to the department and its members.

If I would have met Frank when I was younger, I would have asked him to try and teach me to be orderly like him. I'm afraid it's too late for that now. It has amazed me how efficiently he worked. He was reliable, gentle and very supportive. He always gave me the pleasant feeling that everything would go well, which I appreciated very much.

While working on the papers, Irene Aartman did a terrific job in taking care of the statistics and methodology parts. She could work out a question very quickly and effectively, and helped to make our manuscript into something that the editors accepted for publication.

Not long before I would be pensioned, I had plans to write a fifth and last paper for a thesis on the subject of TMD patients' feelings of optimism about the chances of recovery from the symptoms they were going to be treated for. To my surprise, answers to the optimism question were not associated with any of the other variables. Human nature, cannot always be so easily moulded into our theories. This is what I find interesting about people and psychology, but it also made me, at that moment, decide to definitely give up the idea of a doctoral thesis. Just as I was about to leave ACTA, it was Frank who gave me the last push in the right direction, by reminding me of the possibility to use the still-to-be-finished short OHIP paper as a fifth article for a dissertation. So, if it hadn't been for Frank, this manuscript would not have been written!

I have learned much from all Kinesiology department members, both by their comments on my work, by the discussions of their own projects, their helpful practical advise and, not in the least, by visiting *their* dissertation ceremonies. I'm glad that it will be my turn now. I enjoyed our meetings and our shared travels abroad. Thank you all: Chiel Naeije, Frank Lobbezoo, Corine Visscher, Maurits van Selms, Stani Kalaykova, Ghizlane Aarab, Annemiek Rollman, Els van Velzen, Bart Bervoets, the members of the department who are no longer working there, and all the masters. I have enjoyed working with everybody, and this includes the secretaries of SBT and ACTA, and all the dental assistants, who played an enormously important role as go-between between clinician and patients.

I have appreciated the help and support I received from Carel Davidson and Michel Steenks over a very long time. During all these years, the group of psychologists working in Special Dental Care centres in The Netherlands, which we started many years ago has been very stimulating. Our twice-yearly meetings were interesting and enjoyable.

At the IADR conferences, I have been inspired by many scientists. I would especially like to mention Sam Dworkin, who started and led the scientific work of the orofacial pain group. He was very hospitable when I visited him in Seattle and generously shared information and questionnaires with me. I have listened with pleasure when he talked, showing the way his mind worked and how he digested and worked with new pieces of information. I thought he did this very creatively, like an artist does. I have had the pleasure of having had Mike John and Richard Ohrbach as co-authors. They have both been a source of inspiration and very pleasant company.

I am very thankful that Leszek Sczaniecki was willing to turn my amateur Photoshop cover design into a beautiful professional work.

I also want to thank the members of the commission to have taken the time and energy to read my dissertation, and more importantly, to have come to a positive judgement.

In my private life, I have felt the support of my brother and sisters and their partners. My friends have all reacted very enthusiastically to my plans, and have also helped with the editing of the final parts of the thesis, and this has been really stimulating! Last but not least, my two sons were there all the time of course. They were and still are a strong driving force for me to persist, even in difficult times. Whenever tempted to sink back in small attacks of self-pity, their words “Niet zeuren ma!”, immediately brought me back at my feet. Although I am the first to state that we have to take the results of scientific research seriously, the recent research finding that people with children are less happy than people without children, simply cannot be true, as far as I’m concerned, and if it is, I am most certainly an exception to this finding. I am very happy that they are in my life, and their presence has given me the energy to complete this dissertation.