

April 5, 2006

Dear Ms Ferraro:

I am responding to your article in yesterdays New York Times on the subject of TMJ.

I am a retired dentist who has spent a major portion of his productive years attempting to turn the profession away from entrenched mechanically oriented and harmful dogma. The persistence of that dogma has held the dental community (starting with the dental schools) captive for a very long time. Your article, and the commonly held views it presents, focuses on the issue and the reason of my letter to you.

The uncertainties and multiple modalities promulgated by "experts," in the diagnosis and treatment of TMJ serves to point up the confusion surrounding this important health area.

In July of 1975, (that long ago) I was the guest editor of a symposium entitled "An Alterable Centric Relation In Dentistry," published by Saunders in *The Dental Clinics Of North America*. In addition to my own clinical contribution (copy enclosed), respected educators in the fields of physiology, anatomy, histology, endocrinology, and others weighed in on the underlying question of whether the lower jaw was genetically fixed and unchangeable at birth, or was responsive to functionally induced therapeutic change.

Monumental stakes in the determination of proper diagnosis and treatment were in play. The hue and cry that resulted from the symposium's conclusions and publication were tremendous and immediate as well as widespread clear across the country.

Virtually every area of dentistry would be dramatically affected. However, many reputations and potential law suits were also on the line for those having potentially caused iatrogenic (dentally created) disease for thousands of patients, including some suffering TMJ symptoms, only after treatment.

Despite its physiologic validity, and the unanimous conclusions reached by all of the symposium contributors its results were fought ferociously by those who had the most to lose. In the end, the powers that governed retained their power, and over time, rational physiologic treatment was muted, though certainly not forgotten or abandoned by many knowledgeable colleagues. A return to what had always been done and taught in the schools, carried the day. Unbelievable as it would appear, that essentially holds true to the present time.

Aside from the very real prospect of a new and serious challenge to the status quo, founded upon proven scientific data; it should be noted and understood that there are a good number of "functionally" oriented dentists today, who have profited from the work of earlier workers including my youngest son, who practice their profession in an enlightened and successful manner.

I am sending along a copy of a piece found by my eldest son while doodling on the internet just the other day. I remain optimistic that physiologically arrived at diagnosis and treatment will ultimately prevail for the improved health and comfort of our dental patients, the betterment of the profession, and mankind in general.

Should your interest be roused sufficiently, I strongly recommend that you obtain a copy of the Dental Clinics of North America July 1975 from any dental library.
I would certainly be happy to receive a response from you.

Philip H. Levy