Quick Poll Results—“Phantom Bites” Are a Real Problem for Dentists

In our June 2016 Quick Poll, 46 percent of our 338 respondents said they’ve had up to 10 patients in the past 5 years who complained of their bite “being off.” Almost 25 percent of respondents said they have had more than 25 patients with this complaint.

However, the practitioners couldn’t find a problem for many of these patients. About 40 percent of respondents said that up to one-fourth of these patients had a normal bite and no obvious problem, while 13 percent said that more than three-fourths of the patients appeared fine.

Little is known about the prevalence, causes, or treatment for these “phantom bites,” also known as occlusal dysesthesia, where patients are convinced that their bite is abnormal, despite repeated attempts to adjust their occlusion.

Our Quick Poll participants reported trying various treatments for their patients with phantom bites. Here are the most commonly tried treatments and the percentage of respondents who tried them:

- Occlusal adjustment (77 percent)
- Night guard (50 percent)
- Jaw muscle relaxation exercises (34 percent)
- Bite splint (31 percent).

Respondents also referred patients to other providers, including orthodontists and orofacial pain specialists. Ten respondents (3 percent) said they referred their patients to a psychologist or psychiatrist. More than 58 percent of respondents said patients with phantom bites are difficult to treat in a dental office.

When asked about getting trained for and providing brief counseling or behavioral treatment for these patients, nearly two-thirds of respondents said they would be interested or very interested.

In summary, the Quick Poll shows that most respondents:

- Have treated at least one patient who has a phantom bite
- Have treated these patients with occlusal adjustments and night guards or bite splints
- Say the condition is difficult to treat
- Are interested in learning more about and providing patients with a brief behavioral intervention.
References


