Comorbidities Associated with Orofacial Pain and Headache: A Continuing Emphasis

Sleep disturbance is well recognized as a common comorbidity in patients with a chronic pain condition, including TMD patients. The article by Park et al found that sleep disturbance is especially apparent in those TMD patients with a high level of disability. They also found that these patients had significantly elevated plasma levels of proinflammatory cytokines, as well as the anti-inflammatory cytokine IL-10, which is also interesting in the context of sleep disturbances in TMD patients since anti-inflammatory cytokines have been shown to disrupt sleep. Other articles in this issue also address the role of cytokines (Hawkins and Durham) as well as other chemical mediators including endogenous opioids (Ma et al, Macedo et al) and purines (Qi et al) in animal models of orofacial pain. Collectively, the articles in this issue of the journal emphasize the multidimensionality of orofacial pain conditions and the many factors that must be considered in their etiology, pathogenesis, and management. They also underscore the applicability of the biopsychosocial model to orofacial pain and headache conditions.

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References