STABILISERINGSSKINNE


### Intraoral orthopedic appliance compared to no treatment, placebo (non occlusal splint), minimal treatment for patient with TMD

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Anticipated absolute effects* (95% CI)</th>
<th>Relative effect (95% CI)</th>
<th>Ne of participants (Studies)</th>
<th>Quality of the evidence (GRADE)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain reduction</td>
<td>The mean pain reduction in the intervention group was 0.214 higher (0.8 higher to 5.75 higher)</td>
<td>-</td>
<td>216 (3 RCTs)</td>
<td>LOW</td>
<td>Hard stabilization appliances, when adjusted properly, have good evidence of modest efficacy in the treatment of TMD compared to no treatment. Other types of appliances have some RCT evidence of efficacy but adverse events are higher. OR &gt; 1 implies that the successful outcome (pain reduction) occurs more often in intervention group than in control group.</td>
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<tr>
<td>Pain reduction</td>
<td>The mean pain reduction in the intervention group was 0.245 higher (1.56 higher to 3.86 higher)</td>
<td>-</td>
<td>434 (7 RCTs)</td>
<td>LOW</td>
<td>Hard stabilization appliances, when adjusted properly, have good evidence of modest efficacy in the treatment of TMD compared to no occluding appliances. Other types of appliances have some RCT evidence of efficacy but adverse events are higher. OR &gt; 1 implies that the successful outcome (pain reduction) occurs more often in intervention group than in control group.</td>
</tr>
<tr>
<td>Pain reduction</td>
<td>The mean pain reduction in the intervention group was 0.93 standard deviations lower (1.33 lower to 0.53 lower)</td>
<td>-</td>
<td>455 (11 RCTs)</td>
<td>MODERATE</td>
<td>Although the SMD suggested a large effect in splint therapy reducing pain, rescaling the SMD to natural units suggested a modest effect. SMD of 0.2 to represent a small difference, 0.5 medium difference and 0.8 large difference.</td>
</tr>
</tbody>
</table>

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the relative effect of the intervention (and its 95% CI).

CI: Confidence interval; RR: Risk ratio; OR: Odds ratio;

GRADE Working Group grades of evidence

- **High quality**: We are very confident that the true effect lies close to that of the estimate of the effect
- **Moderate quality**: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different
- **Low quality**: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect
- **Very low quality**: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

1. Only one study met all level 1 criteria
2. Vurdert bare engelsk litteratur, finnes kanske nyere studier som viser andre resultater
3. Subjektiv måling av smerter
4. Owing lack of reporting allocation, concealment and masking of personnel