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| Table: I Studies Characteristics |
| Study | **Study Type** | **Orofacial Pain Group Type** | **Overall n** **& Gender Distribution** | **Psychosocial scales** | **Psychological Comorbidity** | **Prevalence in percentages** | **Ref** |
| 1. Adamo et al, 2019(Italy) | CSS | BMS | 52; M:19%, F:81% | HARSHDRS | AnxDep | -- | 102 |
| 2. Bäck et al, 2019(Sweden) | CSS | TMD with severe pain / TMD with Headaches: Cases n=82,C n=977 | 1059; F:100% | HADS | Anx Dep  | Cases 51.2%, C 21.2%Cases 32.9%, C 7.2% | 71 |
| 3. Chang et al, 2019(China) | CSSRetrospective | TN: Cases n=45, C n=61 | 106; M:44%, F:56% | HARSHDRS | AnxDep | -- | 110 |
| 4. Godazandeh et al, 2019 (UK) | CSSProspective cohort | TN: TN n=68. TN with MS n=26 | 94; TN M:21%, F:79%; TN with MS M:23%, F:77% | HADS | Anx Mild/SevDep Mild/Sev | TN 63.3% (43.3%/20.0%)TN with MS 53.9% (23.1%/30.8%)TN 33.3% (15.0%/18.3%)TN with MS 56.0% (16.0%/40.0%) | 111 |
| 5. Heinskou et al, 2019(Denmark) | POS | TN: TN After medicine intervention n=103, TN After surgical intervention n=50 | 103; M:35%, F:65% | Self-reported survey | Anx and/or Dep | TN After medicine intervention 14.6% TN After surgical intervention 14.0%  | 109 |
| 6. Huttunen et al, 2019(Finland) | RCT | TMD | 80; M:23%, F:77% | RDC/TMD  | Dep (Mod/Sev) B | 42.5% (27.5%/15.0%)  | 72 |
| 7. Jivnani et al, 2019(India)  | CSS | TMD: TMD pain and Headaches n=15, TMD pain with disc displacement n=19,No TMD n=34 | 68; M:49% F:51% | HADS | Anx (BClin//Clin)Dep (BClin/Clin) | TMD pain and Headaches 47.0% (27.0%/20/0%), TMD pain with disc displacement 53.0% (42.0%/11.0%)No TMD 6.0% (6.0%/0.0%)TMD pain and Headaches 66.0% (13.0%/53.0%), TMD pain with disc displacement 63.0% (26.0%/37.0%)No TMD 24.0% (18.0%/6.0%) | 73 |
| 8. Le Bris et al, 2019(France) | RS | BMS | 38; M:16%, F:84% | Self-reported questionnaire | Dep symptoms | 50% | 101 |
| 9. Lira et al, 2019 (Brazil) | CSS | TMD: Cases n= 92, C n=37 | 129; F:100% | HADS | AnxDep | -- | 74 |
| 10. Melek et al, 2019(UK) | CSS | Ne: TN n=40, PTTN n= 97 | 137; M:30%, F:70% | GAD-7PHQ | Anx (Clin)Dep (Mild-to-Mod/Mod-Sev-to-Sev) | TN: 38.5%, PTTN: 34.4%TN: 53.6% (35.7%/17.9%), PTTN: 35.9% (25.0%/10.9%) | 125 |
| 11. Yang et al, 2019China | CSS | BMS: BMS n=30, C n=18 | 48; M:17%, F:83% | ZSASZSDS | Anx (Mild)Dep (Mild)Dep (Mod) | BMS 30%BMS 50%BMS 36.6% | 100 |
| 12. Adamo et al, 2018(Italy) | CSS | BMS: BMS n=200, C n=200 | 400; M:17%, F:83% | HARSHDRS | Anx (Mild-Mod)Anx (Mod-Sev)Dep (Mild)Dep (Mod/Sev) | BMS 27%BMS 18%BMS 32%BMS 34% | 99 |
| 13. Daher et al, 2018(Brazil) | CSS | TMD: TMD A n=10,TMD Muscular n=15, C n=10 | 35; M:20%, F:80% | HADS | Anx | -  | 75 |
| 14. Di Stasio et al, 2018 (Italy) | CSS | BMS: BMS n=25, C n=24 | 49; M:13%, F: 87% | STAIHDRS | AnxDep | -- | 98 |
| 15. Fernandes Azevedo et al, 2018 (Brazil) | CSS | TMD: TMD n=38, No TMD n=67 | 105 | STAI | Anx (St Anx Mod)Anx (Tr Anx Mod) | TMD 39.5%, No TMD 29.9%TMD 36.8%, No TMD 46.3% | 76 |
| 16. Lee and Chon et al, 2018 (Korea) | CSSICHD | BMS: BMS with sleep problem n=15, BMS without sleep problem n=10 | 25; F:100% | SCL-90R | AnxDep | -- | 97 |
| 17. Miura et al, 2018(Japan) | CSSRetrospective | AO | 383; M:15%, F:85% | DSM-VZSDS | AnxDep | 10.1%15.4% | 133 |
| 18. Moura et al, 2018(Brazil) | CCS | BMS: BMS n=15, C n=15 | 30; M:20%, F:80% | BAIBDI | Anx (Mild/Mod)Anx (Mod)Dep BMS (Mod/Sev) | BMS 16.6%/33.3%C 13.3%BMS 16.7%/8.3%, C 0.0%/0.0% | 96 |
| 19. Natu et al, 2018(Singapore) | CSS | TMD: No TMD n=142, Mild TMD n=79, Mod TMD n=23 | 244; M:16%,F:84% | DASS-21 | AnxDep | -- | 77 |
| 20. Nazeri et al, 2018(Iran) | CCS | TMD: TMD MP & Migraines n=50, TMD MP n=25, Migraines n=15, C n=38 | 128; M:24%, F:76% | HADS | Anx and/or Dep | TMD MP & Migraines 90.0%TMD MP 24.0%Migraines 66.7%, C 31.6% | 78 |
| 21. Paulino et al, 2018(Brazil) | CSS | TMD: TMD n=171, No TMD n=132 | 303; M:31%, F:69%  | HADS | AnxDep | TMD 46.8%, No TMD 26.5%TMD 10.5%, No TMD 9.1% | 79 |
| 22. Reiter et al, 2018(Israel) | CSS | TMD | 163; M:25%, F:75% | GAD-7PHQ-9 | Anx (Mild/Mod/Sev)Dep (Mild/Mod/Sev) | 19.6%/8.0%/4.9%26.4%/12.3%/8.0% | 80 |
| 23. Sikora et al, 2018(Croatia) | CSS | BMS: BMS n=43, C n=50 | 93; M:18%, F:82% | STAIBDI | AnxDep | -- | 95 |
| 24. Sruthi et al, 2018(India) | CSS | TMD: TMD MP n= 27, TMD JP n=26, TMD Mixed n=23, C n=24 | 100; M:46%, F:54% | DASS-42 | AnxDep | -- | 81 |
| 25. Tu et al, 2018(Japan) | CSS | AO n=272, AO-BMS n=83 | 355; M:12%, F:88% | ZSDS | Dep  | - | 124 |
| 26. Yoo et al, 2018(Korea) | CSS | BMS: BMS n=50, C n=50 | 100; M:42%, F:58% | SCL-90-R | AnxDep | -- | 94 |
| 27. Mitsikostas et al, 2017 (Greece) | Case Series | BMS | 8; F:100% | HARSHDRS | Anx (Mild-Mod)Anx (Mod-Sev)Dep (Mod-Sev) | 50.0%12.5%100% | 93 |
| 28. Naikoo et al, 2017(India) | CCS | TMD: TMD n=100, C n=100 | 220; M:36%, F:64% | HADS | AnxDep | TMD 53.0%, No TMD 21.0%- | 82 |
| 29. Reiter et al, 2017 (Israel) | CSS | TMD: RDC n=142, DC n=157 | 299; M:24%, F:76% | TMD/RDCDC/TMD(GADS-7PHQ-9) | RDC Anx (Mod/Sev)RDC Dep Mod/Sev)DC Anx (Mod/Sev) DC Dep (Mod/Sev) | 51.4% (27.9%/235%) 54.2% (29.6%/24.6%) 10.2% (7.6%/2.6%) 17.8% (9.6%/8.2%)  | 83 |
| 30. Su et al, 2017(China) | CSS | TMD: TMD low pain intensity n=156, TMD high pain intensity n=164 | 320; M:22% F:78% | GAD-7PHQ-9 | Anx (Mild/Mod/Sev) Dep (Mild/Mod/Sev) | Low pain 23%/8.9%/2.5%High pain 9.5%/16.4%/11.5%Low pain 31.4%/7.0%/3.2% High pain 26.8%/15.8%/17.7% | 84 |
| 31. Tan et al, 2017(Malaysia) | CSS | TN | 75; M:31%, F: 69%  | HADS | AnxDep | 41.3%24.0% | 108 |
| 32. (Tournavitis et al, 2017 (Greece) | CSS | TMD | 75; M:48%, F:52%  | STAICES-D | AnxDep | -- | 85 |
| 33. van Selms et al, 2017 (Netherland) | CSS | TMD: TMD n=268, C n=254 | 522; M:14%, F:86% | GAD-7PHQ-15 | AnxDep | -- | 86 |
| 34. Yeung et al, 2017(UK) | CSS | TMD | 162; M:20%, F:80% | GAD-7PHQ-9 | Anx (Mild/Mod/Sev)Dep (Mild/Mod/Sev) | 27%/12%/8%27%/20%/14% | 87 |
| 35. Zakrzewska et al, 2017 (UK) | CSSIASP | TN: TN-no IMP n=155, TN with IMP n=32, TN with AN sym n=38 | 225; M:37%,F:63% | HADS | Anx (BClin/Clin)Dep (BClin/Clin)   | TN-no IMP 46.4% (21.5%/25.2%)TN with IMP 40.7% (11.1%/29.6%)TN with AN 77.8% (50.0%/27.8%)TN-no IMP 30.6% (15.3%/15.3%)TN with IMP 29.6% (18.5%/11.1%)TN with AN 55.5% (22.2%/33.3%) | 107 |
| 36. Bertoli and de Leeuw, 2016 (USA) | CSS | TMD | 1,241; M:12%, F:88% | SCL-90-R | AnxDep | 28.9%30.4% | 70 |
| 37. Braud and Boucher, 2016 (France) | CSS | BMS | 18; M:6%, F:94% | HADS | AnxDep | 38.8%33.3% | 139 |
| 38. das Neves de Araújo Lima et al, 2016 (Brazil) | CSS | BMS n= 64, SOB n=99 | 163; M:19%, F:81% | BAIBDI | Anx (Mild/Mod/Sev)Dep (Mild-Mod/ Mod-Sev) | BMS 30.0%/6.7%/13.3%SOB 20.0%/10.0%/0%BMS 53.1%/28.1%SOB 16.1%/6.0% | 138 |
| 39. Davies et al, 2016(UK) | CSS | BMS: BMS n=30, Other oral conditions n=11 | 41; M:12%,F:88% | Customised questionnaire & Clinical interviews | AnxietyDep | -- | 164 |
| 40. Diracoglu et al, 2016 (Turkey) | CSS | TMD | 273; M:22%, F:78% | HADS | AnxDepAnx and/or Dep | 31.1%40.7%49.8% | 67 |
| 41. Mousavi et al, 2016 (USA) | CSS | TN | 21; M:14%, F:86% | DSM-IV | Anx DiagDep Diag | 52.3%42.8% | 137 |
| 42. Patil et al, 2016 (India) | CSS | TMD: Cases Ch n=60, no TMD n=60 | 120, M:25%, F:75% | BDI | Dep (BClin/Mod/Sev) | Cases 30.0% (13.3%/13.3%/3.3%)C 10.0% (6.7%/3.3%/0.0%) | 68 |
| 43. Sevrain et al, 2016  (France) | RS | BMS | 35; M:9%, F:91% | HADS | AnxDep | 54.3%25.7% | 92 |
| 44. Tang et al, 2016(China)  | CSS | TN | 167; M:40.7%, F:59.3% | BAIBDI | AnxDep | 20.4%72.5% | 134 |
| 45. Visscher et al, 2016 (Netherland) | RS | TMD | 112; M:13%, F:87% | SCL-90 | Dep | 25.8% | 69 |
| 46. Al-Havaz et al, 2015 (Iran) | CSS | TMD | 171; M:43%, F:57% | RDC/TMD | Dep (Mod/Sev) | TMD 7.0% | 62 |
| 47. Brailo and Zakrzewska, 2015  (UK) | CSS | TN n=48, TMD n=112, CIFP n=85 | 245; M:24%, F:76% | HADS | Anx (BClin/Clin)Dep (BClin/Clin) | TN 39.3% (17.9%/21.4%)TMD 55.7% (26.2%/29.5%)CIFP 38.5% (15.4%/23.1%)TN 32.1% (25.0%/7.1%)TMD 32.8% (19.7%/13.1%)CIFP 42.3% (11.5%/30.8%) | 122 |
| 48. Kotiranta et al, 2015 (Finland) | CSS | TMD | 399; M:17%, F:83% | RDC/TMD SCL-90-R | AnxDep | **-****-** | 63 |
| 49. Lei et al., 2015 (China)  | CSS | TMD: MP n= 128, Non-MP n=382 | 510; M:24%, F:76% | DASS-21 | AnxDep | 36.5%; MFP 62.5%, No MFP 27.7%17.6%; MFP 31.3%, No-MFP 13.1% | 64 |
| 50. Lopez-Jornet et al,  2015 (Spain)  | CSS | BMS: Cases n=70, C n=70 | 140; M; 9% F: 91% | HADS | Anx Dep | **-****-** | 91 |
| 51. Majumder et al, 2015 (India) | CSS | TMD: TMD n=311, No TMD n=689 | 1000; M:45%, F:55% | HADS | Anx and/or Dep  | TMD 66.2%No TMD 31.1% | 65 |
| 52. Marino et al, 2015Italy | CCS | BMS: BMS n= 58, C n=58 | 116; M:21%, F:79% | HARSMADRS | Anx (Mild-Mod/Mod-Sev)Dep (Mild/Mod/Sev) | BMS 80.7% (31.6 %/49.1%)BMS 49.1% (47.3%/1.8%/0%) | 136 |
| 53. Reiter et al, 2015 (Israel)  | ROS  | TMD: Acute n= 49, Ch n=139 | 207; M:24%, F:76% | RDC/TMD SCL-90-R | Anx (Mod/Sev) Dep (Mod/Sev)  | TMD 54.1% (29.5%/24.6%%Acute 44.9% (28.6%/16.3%)Ch 58.3% (30.2%/28.1%)TMD 56.0% (33.3%/22.7%)Acute 40.8% (26.5%/14.3%Ch 61.2% (36.0/25.2%) | 66 |
| 54. Tokura et al, 2015 (Japan) | CSS | BMS: BMS n= 65, C n= 116 | 181; M:19%, F:82% | BDI | Dep (Diag Major depressive disorder) | BMS 14% | 135 |
| 55. Wu et al, 2015 (Korea) | RCS | TN: TN Case n= 3273, C n= 13092 | 16,365; M:62%, F:38% | ICD-9 CM | Anx (Diag)Dep (Diag) | TN Cases 1.8%, C 0.60%TN Cases 2.2%, C 0.79% | 106 |
| 56. Calixtre et al, 2014 (Brazil) | LS | TMD | 19; M:5%, F:94% | HADS | AnxDep | -- | 54 |
| 57. Cioffi et al, 2014 (Italy)  | CSS | TMD/Migraines: TMD MP n=676, Migraine n=39, TMD MP+Migraine n=66 | 781; M:22%, F:78% | RDC/TMD (SCL-90) | Dep | - | 121 |
| 58. Davis et al, 2014  (USA) | CSS | TMD | 50; M:8%, F:92% | Psych Diag-(MR) STAI  | Anx (Diag)Dep (Diag) | 30.0%18.0% | 55 |
| 59. Gerrits et al, 2014 (Netherland) | LCS | OFP: OFP n=13 | 614; M:39%, F:61% | DSM-IV CIDI Version 2.1 | AnxDep | **--** | 131 |
| 60. Komiyama et al,  2014 (Japan) | CSS | TMD | 1437; M:29%, F:71% | RDC/TMD | Dep | **-** | 167 |
| 61. Minghelli et al, 2014 (Portugal)  | CSS | TMD: Cases n=633, C n=860 | 1493; M: 32% F:68% | HADS | Anx or Dep  | Cases 61.4%C 38.6% | 57 |
| 62. Reissmann et al,  2014 (Germany) | CCS | TMD: Cases n= 320, C n= 888 | 1208; M:36%, F:64% | STAIRDC/TMD | St Anx (Mod-Sev)Dep (Mod/Sev) | Cases: 56.6% (25.3-31.3%)C: 32.2% (22.2-10%)Cases: 45.9% (20.6%/25.3%)C: 38.5% (16.9%/21.6%) | 58 |
| 63. Smriti et al, 2014 (India) | CSS | TMD: TMD n= 27, No TMD n=123 | 150; M:31%, F:69% | ZSAS | Anx (Mild-Mod)   | TMD 25.9%No TMD 6.5% | 59 |
| 64. Sood et al, 2014 (India) | CSS | TMD: TMD n=104, No TMD n=396 | 400; M:25%, F:75% | HADS | AnxDep | -- | 60 |
| 65. Vasudeva et al, 2014 (India)  | CCS | TMD: TMD n=255, No TMD n=250 | 505; M:64%, F:36% | HADS | Anx (BClin/Clin) | TMD 55.9% (45.0%/10.9%)No TMD 20.4% (19.2%/0.8%) | 61 |
| 66. Castelli et al, 2013 (Italy) | CCS | TMD (Ch MP): Cases n=45, C n=45 | 90; F:100% | BDISTAI-Y1 | AnxDep | -- | 51 |
| 67. Chen et al, 2013 (USA)  | CCSSecondary Analysis | TMD: TMD Cases no pain n=14, TMD Cases with ch pain n=145, No TMD n=131 | 290; F:100% | STAISCL-90-R | AnxDep | -- | 52 |
| 68. Ligthart et al, 2013 (Netherland)  | LCS | OFP: Facial pain n=401 (at two-year follow-up) | 2981(Total); M:34%, F:66% | BAIIDS-SR | AnxDep | -- | 129 |
| 69. Ozdemir-Karatas et  al, 2013) (Turkey) | CSS | TMD | 104; M:38%, F:62% | RDC/TMD SCL-90-R | Dep | **-** | 53 |
| 70. Sipilä et al, 2013 (Finland)  | LCS | Chronic OFP: Cases n=162, C n=200; F-up Cases n=63, F-up C n=85 | Baseline:362;F-up:148 | SCL-25 | Dep (Symp)Dep (Diag) | Baseline Cases 17.5%, C 7.0%F-up Cases 6.3%, C 1.2% | 130 |
| 71. Smith et al, 2013 (UK)  | CSS | Ne: PPTNI | 89; M:32%, F:68% | HADS | Anx (BClin/Clin)Dep (BClin/Clin) | 51.2% (17.5%/33.7%) 29.8% (14.3%/15.5%) | 105 |
| 72. de Lucena et al, 2012 (Brazil) | LPS | TMD: Cases n=99 C n=54 (two time periods; T1 and T2) | 153; M:46%, F:54% | HADS | Anx Dep  | Cases T1 61.6% / T2 60.6%C T1 22.2% / T2 37.0%Cases T1 16.2% / T2 26.3%C T1 5.6% / T2 14.8%  | 45 |
| 73. de Souza et al, 2012  (Brazil) | CSS | BMS: Cases n=30, C n=31 | 61; M:3%, F:97% | MINI-PlusHRSDBDI, STAI | Anx (Diag)Dep (Diag) | Cases 36.7%, C 9.7%Cases 46.7%, C 12.9% | 89 |
| 74. Diniz et al, 2012 (Brazil) | LS | TMD: Baseline TMD n=20, No TMD n=35; F-up TMD n=28,No TMD n=27 | 55 | BAI | Anx (Mild/Mod-Sev) | Baseline TMD 65.0% (55.0%/10%)F-up TMD 64.3% (18.6%/39.3%) | 46 |
| 75. Guarda-Nardini et al, 2012 (Italy)  | CSS | TMD: Acute n=51, Ch n=59 | 110; M:19%, F:81% | HARS, HDRSSCL-90-R | Anx Dep (Mod-Sev) | -TMD Acute and Ch 48.0% (30-18%) | 47 |
| 76. Kindler et al, 2012  (Germany) | LPS  | TMD: TMD JP n=122, No TMD JP n=2884, TMD MP n=50, No TMD MP n = 2984  | 6,040; M:49%, F:51% | CID-S | Anx (Symp) Dep (Symp) | JP 64.8%, No JP 47.1% MP 78.0%, No MP 47.3% JP 49.2%, No JP 28.3% MP 46.0%, No MP 29.0%  | 48 |
| 77. Komiyama et al,  2012 (Japan) | CSS | Ne: BMS n=282 (Acute n=169, Ch n =113), TN, n=83 (Acute n=43, Ch n=40) | 365; M:20%, F:80% | RDC/TMDSCL-90-R | Dep | **-** | 120 |
| 78. Rodrigues et al, 2012 (Brazil) | CSS | TMD: TMD pain n=54, TMD no pain n=129 | 183; M:42%, F:58% | RDC/TMD  | Dep (Mod/Sev)  | TMD 41.5% (30.2%/11.3%) | 49 |
| 79. Schiavone et al,  2012 (Italy)  | CSS | BMS: Ch BMS n= 53, C n= 51 | 104; M:30%, F:70% | HDRSSTAI-Y1/Y2 | AnxDep | -- | 90 |
| 80. Schwahn et al, 2012 (Germany)  | CSS | TMD | 3904; M: 50%F: 50% | CID-S | Dep | - | 50 |
| 81. Wan KY et al,2012 (Hong Kong) | CSS | OFP: CD n=200, IE n=200 | 400 | GHQ-12 | Psychological Distress | CD: 4% IE: 11.0% | 128 |
| 82. Celic et al, 2011  (Croatia) | CSS | TMD: Acute TMD n=126, Ch TMD n=28 | 154; M:24%, F:76% | RDC/TMD (SCL-90-R) | Dep (Sev) | TMD (Acute and Ch) 19.5% | 40 |
| 83. Dworkin et al, 2011  (Italy, Israel, Amsterdam)  | CSS | TMD | 1149; M:20%, F:80% | SCL-90-R | Dep (Mod/Sev) | 45.4% | 41 |
| 84. Gustin et al, 2011  (Australia)  | CCS | Ne/TMD: TNP n=24, TMD n=21, C n=38 | 83; M:24%, F:76% | STAIBDI | AnxDep  | **-****-** | 16 |
| 85. Macianskyte et al,  2011 (Lithuanian) | CSS | Ne/IP: TN+Ch FP n=30, ATFP n=30 | 60; M:15%, F:85% | CASBDI | AnxDep (Mod-Sev) | **-**TN 76.7% (46.7%/30.0%), ATFP 0% | 118 |
| 86. Monteiro et al, 2011 (Brazil) | CSS | TMD: Ch TMD n=49, No TMD n=101 | 150; M:78%, F:22% | STAI | Anx St Anx T  | -- | 42 |
| 87. Taiminen et al, 2011 (Finland) | CSS | Ne/IP: BMS n= 40, ATFP n= 23 | 63; M:10%, F:90% | SCID-I | Anx (Diag)Dep (Diag) | BMS: 47.5%, ATFP: 30.4%BMS: 35%, ATFP: 26% | 119 |
| 88. van Seventer et al,  2011 (UK, Netherland, Canada)  | SA PCT  | Ne (posttraumatic peripheralneuropathic pain): TN n=unknown  | 254; M: 49%, F: 51%  | HADS | AnxDep | **--** | 104 |
| 89. Velly et al, 2011 (USA) | Pr Co S | TMD Ch Pain onset (GCPS-1) n=261 Pain prog (GCPS II-IV) n=309 | 570 B, M: 15%, F: 85%  | BDI | Dep (Mod/Sev) B   | TMD 10.3%: GCPS-I: 7.0%,GCPS-II-IV: 14.0% | 43 |
| 90. Xu et al, 2011 (China)  | CSS | TMD | 162; F:100% | SCL-90-R | AnxDep | 7.4% 11.7%  | 44 |
| 91. Bakhtiari et al, 2010  (Iran) | CSS  | BMS: BMS n=50, HC=50 | 100, M:17%, F:83%  | Ct AS | St anxietyT anxiety | **-****-** | 103 |
| 92. Giannakopoulos  et al, 2010  (Germany)  | CCS | TMD: MP n=88, JP n=43,Non TMD FP n=45, C n=46 | 222; M:27%, F:73%  |  HADS | AnxDep | **--** | 35 |
| 93. Kim et al, 2010 (Korea)  | CSS | TMD: TMD Trauma n=34, TMD no trauma n=340 | 374; M:29%, F:71% | SCL-90-R | AnxDep | **-****-**  | 116 |
| 94. Lajnert et al, 2010  (Croatia)  | CSS | TMD: Acute n=30, Ch n=30,C n=30 | 90; F:100% | RDC/TMD | Dep (Mod/Sev)  | Acute 52.7% (28.0%/24.7%)Ch 77.4% (30.0%/6.0%)C 36.0% (30.0%/6.0%) | 36 |
| 95. Manfredini et al,  2010a (Italy) | CSS | TMD | 111; M:19%, F:81%  | RDC/TMDSCL-90-R | Dep (Mod/Sev) | 41.4% (1.8%/39.6%) | 37 |
| 96. Manfredini et al, 2010b (Italy, Israel, Netherland)  | CSS | TMD: Acute n=293, Ch n= 856 | 1149; M:20%, F:80%  | RDC/TMD (SCL-90) | Dep (Mod/Sev)   | Acute 45.0% (23.1%/21.9%)Ch 47.7% (25.1%/22.6%) | 38 |
| 97. McMillan et al, 2010 (Hong Kong) | CS CCS | OFP: Cases n= 200; C n = 200 | 400; M:36%, F:64%  | SCL-90 | Dep  | Cases 31.0%C 11.0% | 127 |
| 98. Pesqueira et al, 2010 (Brazil)  | CS CCS | TMD: Cases n=61, C No TMD n=89 | 150  | STAIRDC/TMD  | St anxietyT anxiety | -- | 39 |
| 99. Takenoshita et al,  2010 (Japan) | CSSIASP | Ne/IP: BMS n=125, AO n = 37 | 162; M:13%, F:87% | SDSPsych Dia MR | Dep Tendencies Dep (Dia)Anx (Dia) | BMS 32.1%, AO 33.3% BMS 32.0%, AO 21.6%BMS 9.6%, AO 10.8% | 117  |
| 100. Bonjardim et al,  2009 (Brazil) | CSS | TMD: TMD n=98, No TMD n=98 | 196; M:49%, F:51% | HADS | Anx (BClin/Clin)Dep (BClin) | TMD 43.9% (26.5%/17.3%) No TMD 24.5% (21.4%/3.1%)TMD 6.6, No TMD 3.1% | 31 |
| 101. Choi et al, 2009 (Korea) | RS | Ne/PIFP/TMD: TN n=8, Ne n=9; PIFP n=8; TMD n=138 (TMD MP n=73, TMD JP n=24, TMD MP+JP n=41) | 163: M:40%, F:60%  | HADS | AnxDep | -- | 115 |
| 102. Gao et al, 2009(China) | CCS | BMS: BMS n=87, C n=82 | 169; M:24% F:76% | SASSDS | AnxDep | -- | 165 |
| 103. Licini et al, 2009  (Italy)  | CSS | TMD | 308; M:25%, F:75%  | RDC/TMD | Dep (Mod/Sev) | 65.7% (13.3%/52.6%) | 32 |
| 104. Macfarlane et al,  2009 (UK) | Pr Co S | TMD: OFP in young adults n=78 | 337; M: 43%, F: 57% | CES-DPSS  | Dep | OFP 33.3%No OFP 18.9% | 33 |
| 105. Stavrianos et al, 2009 (UK)  | Prospective cohort | TMD | 22; M:36%, F:64%  | IAS | Heart PhobiaCancer Phobia | **-****-** | 34 |
| 106. Streffer et al, 2009  (Switzerland) | CSS | OFP | 102; M:22%F:78%  | HADS | Anx (BClin/Clin)Dep (BClin/Clin) | 51.7% (33%/18.7%)32.6% (16.9%/15.7%) | 126 |
| 107. Baad-Hansen et al,  2008 (Denmark)  | CSS | TMD/AO: TMD n=41, AO n=46  | 87; M:17%, F:83% | SCL-90-R | Dep | - | 113 |
| 108. Ballegaard et al, 2008 (Denmark) | CSS | TMD/Headache: TMD with headache n=55, Headache without TMD n=44 | 99; M:23%, F:76% | RDC/TMD | Dep (Mod to Sev) | TMD with headache 70.9%Headache without TMD 34.1% | 123 |
| 109 Buljan et al, 2008  (Croatia)  | CSS | BMS: Cases n=42, C n=78 | 120; M:39%, F:61% | BAISDS | AnxDep | **--** | 88 |
| 110. Castro et al, 2008  (Brazil) | CSS | TN/TMD: TN n=15, TMD n=15 | 30; M 27%, F:73%  | HADS | Anx Dep | **-** | 114 |
| 111. Lee et al, 2008 (China)  | CSS | TMD | 87; M:12%, F:88%  | RDC/TMD  | Dep (Mod/Sev) | 42.5% (26.4%/16.1%) | 29 |
| 112. Reissmann et al, 2008 (Germany)  | CSS | TMD | 225; M:14%, F:86%  | RDC/TMD  | Dep | 47.6% (21.8%/25.7%) | 30 |
| 113. Bertoli et al, 2007  (USA) | RS | TMD | 445; M:9%, F:91% | SCL-90-R | Dep | **-** | 26 |
| 114. John et al, 2007 (Germany) | CSS | TMD Ch | 416, M:21%, F:79% | RDC/TMD Axis-II | Dep (Mod/Sev) | 46.2% (19.7%/26.5%) | 27 |
| 115. List et al, 2007 (Sweden) | CCS | AO: Cases n=46, C n=35 | 81; M:22%, F:78% | SCL-90-R | Dep (Mod/Sev) | Cases 74% (26.0%/48.0%)C 54% (37.0%/17.0%) | 132 |
| 116. Mongini et al, 2007 (Italy)  | CSS | TMD/OFP: TMD MP n=462,TMD A n= 70, Ne (TN+PNe) n=68, FPD n=49 | 649; M:22%, F:78%  | DSM-IV (SCID) | Anx (Diag)Dep (Diag) | TMD MP 33.5%, TMD A 15.7%Ne 16.2%, FPD 30.6%TMD MP 22.3%, TMD A 15.7%Ne 10.3%, FPD 44.9% | 112 |
| 117. Nifosi et al, 2007  (Italy) | CSS | TMD: TMD MFP n=19, TMD JP n=26, TMD MFP+JP n=18 | 63; M:25%, F:75%  | DSM-IV (SCID) HARS,HDRS, SCL-90-R | Anx (Diag)Dep (Diag)Anx and Dep Sym | TMD 15.9%TMD 20.6%- | 28 |
| 118. GaldÓn et al, 2006 (Spain) | CSS | TMD: TMD MP n= 58, TMD A n= 56 | 114; M:11%, F: 89% | BSI-18 | Anx, General distress | **-** -  | 166 |
| Note: Only percentages of psychological functioning impact of orofacial pain conditions were included (at decimal point level presented in study papers). Abbreviations: Anxiety (Anx), Anxiety Symptoms (Anx Sym), Autonomic Symptoms (AN Sym), Atypical Facial Pain (ATFP), Atypical Odontalgia, (AO), Baseline (B), Beck Depression Inventory (BDI), Beck’s Anxiety Inventory (BAI), Borderline Clinical (BClin), Brief symptom Inventory-18 (BSI-18), Burning Mouth Syndrome (BMS), Case Control Study (CCS), Cattell Anxiety Scale (CtAS), Centre for Epidemiological studies Scale (CES-D), Chronic (Ch), Chronic Idiopathic Facial Pain (CIFP), Clinically Significant (Clin), Community Based Survey (CBS), Community Dwellers (CD), Comorbidity (Comorb), Composit International Diagnostic Interview, version 2.1 (CIDI), Composite International Diagnostic-Screener (CID-S), Controls (C), Covi’s Anxiety Scale (CAS), Cross Section Study (CSS), Cross Sectional (CS), Depression (Dep), Depression Diagnosed (Dep Dia), Depression, Anxiety and Stress Scale -21 (DASS-21), Depressive Disorder (Dep Dis), Depressive symptoms (Dep Sym), Diagnosis (Diag), Diagnostic and Statistical Manual of mental disorders (DSM-IV), Facial Pain (FP), Facial Pain Disorder (FPD), Females (F), Follow up (F-up). General Health Questionnaire (GHQ-12), Graded Chronic Pain Scale (GCPS), Graded Chronic Pain Score (GCPS), Hamilton anxiety rating scale (HARS), Hamilton Depression Rating Scale (HDRS), Healthy Control (HC), Hospital Anxiety and Depression Scale (HADS), Intermittent pain (IMP), Idiopathic Pain (IP), Illness attitude scale (IAS), Institutionalised Elderly (IE), International Classification of diseases-(9 Revision) Clinical Modification (ICD-9 CM), Inventory of Depressive symptomatology (IDS-SR), Longitudinal Cohort study (LCS), Longitudinal Population Based Study (LPS), Longitudinal Study (LS), Males (M), Manchester Orofacial Pain Disability Scale (MOPDS), Medical Record (MR), Moderate (Mod), Myofascial Pain (MFP), Neuropathic Pain (Ne), Numeric Rating Scale (NRS), Orofacial Pain (OFP), Painful Post Traumatic Nerve Injury (PPTNI), Perceived Stress Scale (PSS), Persistent Neuropathic pain (PNe), Population Based Prospective Study (PBPS), Population Based Survey (PBS), Progression (Prog), Prospective Cohort Study (Pr Co S), Psychiatric Diagnosis (Psych Diag), Research Diagnostic Criteria / Temporomandibular Disorders Axis II questionnaire (RDC/TMD), Retrospective Cohort Study (RCS), Retrospective Observational Study (ROS), Retrospective Study (RS), Sample size (n), Secondary Analysis of a Placebo –Controlled clinical Trial (SA, PCT), Severe (Sev), State Anxiety (St Anx), State Anxiety Inventory (STAI), Structured Clinical Interview for DSM-IV (SCID), Symptom checklist-25 (SCL-25), Symptom Checklist-90-Revised (SCL-90-R), Temporomandibular Disorder pain (TMD), TMD Arthrogenous (A), TMD Joint pain (JP), TMD Muscle pain (MP), Trait Anxiety (T Anx), Trier Inventory for Chronic Stress (TICS), Trigeminal Nerve Injuries (TNI), Trigeminal Neuralgia (TN), Zung’s Self Rating Anxiety Scale (ZSAS), Zung’s Self-Rating Depression scale (SDS) |