Temporomandibular joint (TMJ) arthroscopy has been considered a safe surgical procedure in the treatment of TMJ derangement. However, it is not exempt from complications. This study evaluates the complications of arthroscopy in patients with internal derangement of TMJ. Five hundred consecutive patients (670 joints) with TMJ derangement who underwent arthroscopy between 1995 and 2004 were retrospectively analyzed. All the patients were classified as II to V in the Wilkes classification. Lysis and lavage, electrocautery of Open access peer-reviewed chapter. Temporomandibular Joint Arthroscopy versus Arthrotomy. By Edvitar Leibur, Oksana Jagur and Ulle Voog-Oras. Submitted: April 23rd 2012Reviewed: November 12th 2012Published: February 27th 2013. Although some patients with temporomandibular joint (TMJ) disorders are successfully treated by nonsurgical means or by arthrocentesis or arthroscopic surgery, there is still a group of patients who do not respond to these procedures and for whom an arthrotomy and disc surgery (discoplasty) are necessary. Temporomandibular joint arthroscopy: a 6-years multicenter retrospective study of 4831 joints. J Oral Maxillofac Surg. 1992;50:926–930. 14. McCain JP Principles and practice of temporomandibular joint arthroscopy. 1996 St Louis Mosby-Year Book Inc.:42. Cited Here 15. Al Kayat A, Bramley P. A modified pre-auricular approach to the temporomandibular joint and malar arch. Br J Oral Surg. 1979;17:91–103.