

Oral Surgery - Surgical Removal of Wisdom Tooth NEC - Surgical Removal of Tooth

Introduction

The COVID pandemic has had a significant impact on the NHS' ability to provide routine elective services. We recognise that patients are waiting longer than we would like and that it is not always possible to say when treatment will take place. This document provides our patients with information on how you can support yourself while waiting for treatment at the hospital. The guidance has been written by the clinicians who are responsible for your care.

Wisdom teeth are usually the last teeth to erupt into the mouth at any time after about 16 years of age. Frequently there is not enough room to accommodate wisdom teeth and as such they may not come into the mouth normally. When this happens, they are said to be "impacted". Wisdom teeth can either be impacted forwards into the tooth in front or backwards into the jaw bone.

Why do I need my wisdom tooth removed?

There may be a number of reasons as to why your wisdom tooth needs to be removed, including:

- Repeated attacks of infection in the gum surrounding the tooth (called "pericoronitis"). This leads to pain and infection.
- Food packing between the wisdom tooth and the tooth in front, which causes decay in either tooth.
- Gum disease or bone loss around the wisdom tooth.
- A cyst forming around the wisdom tooth if the tooth does not erupt into the mouth properly. A cyst occurs when fluid fills the sack that normally surrounds the developing wisdom tooth.

After your initial consultation you will be placed on a waiting list for treatment- your procedure will be marked as routine, soon or urgent depending on your symptoms and the severity of your condition.

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Guidance for Patients

What does the procedure involve?

Because the wisdom tooth has not fully erupted into the mouth it is often necessary to make a cut in the gum over the tooth. Sometimes it is also necessary to remove some bone surrounding the crown of the wisdom tooth. Sometimes the tooth needs to be cut into a few pieces to remove it. Once the wisdom tooth has been removed the gum is put back into place with stitches. In the majority of cases these stitches are dissolvable and take around 2 weeks to disappear.

What type of anaesthetic is used?

A number of options are available and depend on how difficult the wisdom tooth is to remove:

- Local anaesthetic- this is an injection into the gum surrounding the wisdom tooth, rather similar to that you may have had at your dentist for a filling. The injection takes a couple of minutes to numb the area and means that you will feel no pain while the wisdom tooth is removed.
- Local anaesthetic and oral sedation- in addition to a local anaesthetic injection you can be given a tablet one hour prior to the procedure to relax you. You will need to bring an escort with you for this procedure.
- Local anaesthetic and intravenous sedation- in addition to a local anaesthetic injection you can be given an injection into your arm. This makes you feel relaxed and less aware of the procedure. You will need to bring an escort with you for this procedure.
- General anaesthetic- this is when you are asleep when the wisdom tooth is removed. This would be done as a 'day case' procedure, meaning that you would be able to go home on the same day as the surgery. You will need to make arrangements for someone to collect and be with you for 24 hours after discharge.

How can I prepare for the procedure?

Depending on the type of anaesthetic used, you may be asked to either eat and drink as normal prior to the procedure (usually for local anaesthetic), or to fast (usually for intravenous sedation or general anaesthetic). You will be advised what to do at your initial consultation.

How long does it take to remove a wisdom tooth?

This is variable. Some wisdom teeth may only take a few minutes to remove. More difficult wisdom teeth that need to be cut into pieces can take longer to extract.

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Is there much pain or swelling after the removal of wisdom teeth?

It is likely that there will be pain, bruising and swelling both on the inside and outside of your mouth after surgery. This usually gets worse before it gets better and it may take up to two weeks before all this goes. You may also find that your jaw is stiff and you may not be able to open your mouth as wide. There may be some bruising of the skin of your face that can take up to a fortnight to fade away. As the socket heals you will also notice the site looking yellow, ulcerated and sloughy. This is simply part of the healing process.

Is there anything I need to do after wisdom tooth removal?

The advice below should be followed after wisdom tooth removal:

- Avoid rinsing and spitting out for 24 hours following surgery. Doing so may cause the extraction socket to bleed.
- It is important to keep the extraction sites as clean as possible for the first few weeks after surgery. You can do this by brushing the rest of your teeth normally and gently brushing over the extraction site.
- After 24 hours, keep the area free from food debris by gently rinsing with warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water), at least three times a day for five to seven days following surgery.
- Avoid smoking for at least 48 hours following surgery- doing so may increase your chances of developing an infection called a “dry socket”.
- Avoid drinking alcohol for 24 hours.
- Stick to a softer diet following surgery.
- Take regular pain relief following surgery- the optimal pain relief is paracetamol and ibuprofen in combination (paracetamol up to 1g 4 times a day, ibuprofen up to 400mg 3 times a day). If you have a particularly difficult wisdom tooth removal you may have stronger painkillers prescribed for you.
- If you have any bleeding, use the gauze provided and roll into a tight pack, dampen with water and place directly over the extraction site and bite firmly for 15-20 minutes. If bleeding continues after 30 minutes of continuous pressure, please contact the department.

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What should I do if my health is deteriorating?

While waiting for the procedure

If you experience any serious problems before your procedure date, including wisdom tooth infections causing gum swelling, facial swelling, severe pain, you should contact your local dentist for advice. If this cannot be managed whilst waiting then your dentist may contact the department for further advice or assessment.

If you experience more severe symptoms whilst waiting for your procedure, for example severe facial swelling, facial swelling causing difficulty breathing or raising of the tongue or spreading infection tracking to your eyelid, then this is more serious and may require a visit to your local Emergency Department.

After the procedure has been carried out

- Although there may be only a little bleeding at the time of the extraction this usually stops very quickly and is unlikely to be a problem if the wound is stitched. Should the area begin to actively bleed this can usually be stopped by applying pressure over the area for at least 15-20 minutes, as mentioned before. If the bleeding continues after 30 minutes of continuous pressure, please contact the department.
- Infection- it is uncommon to develop an infection following wisdom tooth removal, but occasionally you may develop a swelling or abscess with an associated bad taste. Sometimes you may also feel feverish or unwell. If you suspect that you have an infection, please contact the department.
- There are two nerves that lie very close to the roots of lower wisdom teeth. One of these nerves supplies feeling to your lower lip, chin and lower teeth. The other nerve supplies feeling to your tongue and also helps with taste. Sometimes these nerves may get bruised during wisdom tooth removal. This can cause, tingling, burning or numbness in your lip, chin or tongue and more rarely altered taste. About one in ten people will have some tingling or numbness that can last several weeks. Less than one in a hundred people will have nerve problems that last more than a year although permanent damage to the nerve is rare. The risk of nerve injury may be higher if your tooth is in a difficult position. The surgeon will inform you if you are considered to be at an increased risk.

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