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INSPIRING HEALTH
Comprehensive medical centre

**SURGICAL REMOVAL
OF IMPACTED
WISDOM TEETH**



About surgical removal of impacted wisdom teeth

The wisdom tooth (or third molar) is usually the last tooth to erupt into the mouth, this can happen any time after about 16 years of age. Frequently, there is not enough room in the mouth to accommodate the erupting wisdom teeth, and therefore, they might not always come into the mouth normally. When this happens, the wisdom teeth are said to be 'impacted'. Wisdom teeth are usually either impacted forwards into the tooth in front or backwards into the jaw bone.

Why do I need treatment?

An impacted wisdom tooth can cause a number of problems if not removed: repeated attacks of infection in the gum surrounding the tooth, leading to pain and swelling food packing, which causes decay in either the wisdom tooth or the tooth in front. Cysts can form around the wisdom tooth if it does not come into the mouth properly. A cyst occurs when fluid fills the sack that normally surrounds a developing wisdom tooth.

Intended benefits

To prevent any problems that can occur from an impacted wisdom tooth, most commonly being infection. This procedure will be performed by a suitably qualified and experienced dental surgeon.

Before your procedure

The type of anaesthetic will be discussed with you before the operation, together with any possible complications of the surgery. 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 the injection you might 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. For wisdom teeth that are simple to remove, this is the best option.

Local anaesthetic and intravenous sedation – in addition to a local anaesthetic injection you can be given an injection into your arm or back of your hand. This makes you feel relaxed and less aware of the procedure.

General anaesthetic – it is usually possible to remove wisdom teeth as a day case under general anaesthetic, that is, although you are put to sleep completely you will be able to go home on the same day as the surgery.

During the procedure

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 wisdom tooth and/or section the tooth into two or three pieces to remove it. Once the wisdom tooth has been removed the gum is put back together with stitches. In the majority of cases these stitches are dissolvable and take around two weeks to disappear. Some wisdom teeth can take a few minutes to remove. More difficult wisdom teeth that need to be cut into pieces to remove can take around 30-60 minutes to remove.

After the procedure

How you will feel after the removal of your wisdom teeth will depend on what has been done, whether you had a local or general anaesthetic and how well you heal. It is likely that there will be some discomfort and swelling both on the inside and outside of your mouth after surgery. This is usually worse for the first three days but it can take up to two weeks before all the soreness disappears. You might also find that your jaw is stiff and you might need to eat a soft diet for a week or so. If it is likely to be sore, your surgeon will arrange painkillers for you. It might also be necessary for you to have a course of antibiotics after the extraction. There can be some bruising of the skin of your face that can take up to a fortnight to fade away.

Eating and drinking

For the first 12 hours (after the numbness has worn off) avoid hot drinks (which can break down the clot). Take only liquid or soft foods. Resuming normal activities including work. Usually it will be necessary to take a few days off work and avoid strenuous exercise for this time.

Depending on the type of anaesthetic used, you might not be able to drive (for 24 hours after intravenous sedation or a general anaesthetic).

Resuming normal activities including work

Usually it will be necessary to take a few days off work and avoid strenuous exercise for this time. Depending on the type of anaesthetic used, you might not be able to drive (for 24 hours after intravenous sedation or a general anaesthetic).

Special measures after the procedure

When you have any teeth extracted (removed) you are left with a hole (tooth socket) in your jawbone, in which a blood clot forms first and then heals over with stronger gum. It is important to keep the extraction sites as clean as possible for the first few weeks after surgery. It might be difficult to clean your teeth around the sites of the extraction because it is sore. If this is the case, it is best to keep the area free from food debris by gently rinsing with a mouthwash or warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water). Start this on the next day after surgery.

Significant, unavoidable or frequently occurring risks of this procedure

You might have swelling and stiffness of the jaw which can last for about one week. Although there might be 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 bleed again when you get home this can usually be stopped by applying pressure over the area for at least 10 minutes with a rolled up handkerchief or swab. If the bleeding does not stop, please contact the medical centre.

Pain and discomfort after surgery can usually be well controlled by pain killers prescribed by the surgeon. Infection is uncommon, particularly if good oral hygiene is maintained after surgery.

There are two nerves that lie very close to the roots of the lower wisdom teeth. One of these nerves supplies feeling to your lower lip, chin and lower teeth. The other supplies feeling to your tongue and helps with taste. Sometimes, when a wisdom tooth is taken out, these nerves can be bruised. This causes tingling or numbness in your lip, chin or tongue, and more rarely can alter taste.

About one in 10 people will have some tingling or numbness that can last several weeks. Less than one in 100 people will have problems that last more than a year.

These risks can be higher if your tooth is in a difficult position.

A dry socket (alveolitis) can lead to a persistently painful tooth socket which can be slow to heal.

The socket then needs to be cleaned and a dressing is usually placed in the socket by the surgeon. Damage to adjacent teeth and fractures of the mandible (lower jaw or jaw bone) are very rare complications and you will be advised if this risk applies to you.

Alternative procedures that are available

Asymptomatic (not showing any symptoms of disease) wisdom teeth are usually best left alone. Whether or not to take out wisdom teeth that are not (yet) causing problems remains debatable. Most dentists will recommend that impacted wisdom teeth are removed particularly if there have already been infections. If the teeth are only partially erupted teeth, they are more likely to become decayed and infected. Gum disease might develop and the next tooth in the row can become decayed.

I have read the information provided and understand to my satisfaction the treatment I'm going to receive, including the possible side effects and complications, and have had the opportunity to discuss this with my dentist.

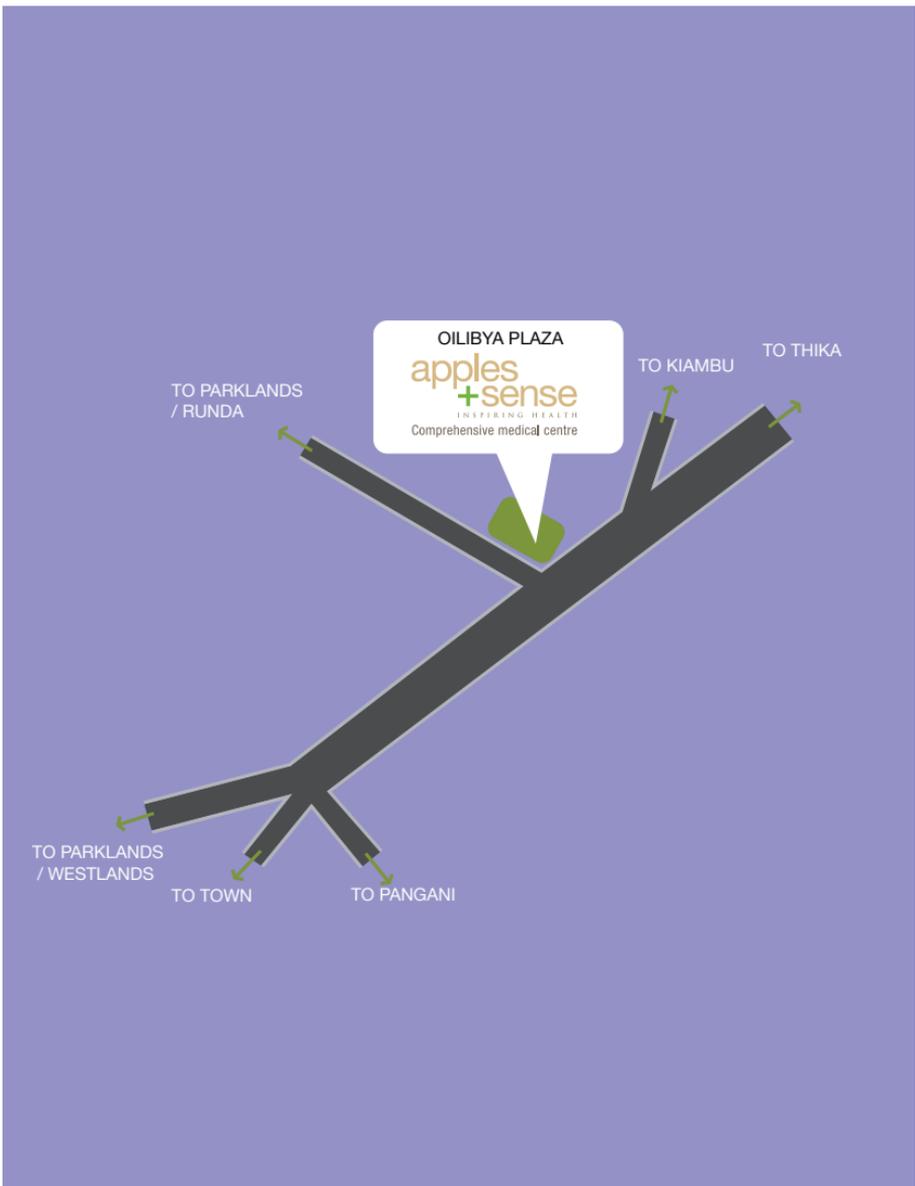
I consent to the proposed treatment being carried out by

Patients' Reference Number: _____

Patients' Name: _____

Signed _____ Date: _____





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