Removal of Wisdom Teeth

Introduction

We expect you to make a rapid recovery after your operation and to experience no serious problems. However, it is important that you should know about minor problems which are common after this operation, and also about more serious problems which occur more rarely. The section “What problems can occur after the operation?” describes these, and we would particularly ask you to read this.

Why am I having my wisdom teeth removed?

Removal may:

- help reduce discomfort you may:  
  – have had  
  – be having  
  – will have in the future

- prevent:  
  – the wisdom teeth damaging adjacent teeth  
  – some (but not all) crowding of the other teeth

Should my wisdom teeth be removed?

The surgeon will help you reach this decision after checking your medical history and undertaking a thorough examination which will involve one or more x-rays being taken. X-rays can help identify problems that you may not be aware of.

If a decision to remove your wisdom teeth has been made, you will usually be asked to sign a consent form for the operation.

How will the teeth be removed?

Some wisdom teeth can be removed in a straightforward manner, however sometimes the tooth needs to be uncovered by cutting the gum. Some of the bone adjacent to the tooth, or the tooth itself, may need to be cut to allow removal of the tooth.

Will I have to have an anaesthetic?

Wisdom tooth removal can be carried out under local anaesthetic with or without intravenous sedation or general anaesthetic. The surgeon will help you choose the appropriate method, depending on your individual circumstances, medical history and the amount of surgery that you will need.

You will receive further information and instructions on what to do before your operation depending on the anaesthetic you are having.

AFTER THE OPERATION

Will I have any stitches?

Some, but not all patients will have stitches. You will be told by the surgeon if you have them. The stitches are usually dissolving, which means they will fall out at any time between 10 and 21 days.

When can I go home?

This mostly depends on what type of anaesthetic you have had, how fit you are, who is at home with you and how comfortable you are after the operation. If your surgery is done with local anaesthetic alone, you will be free to leave.
as soon as the procedure is over. If you have had some sedation, a short recovery period of approximately 30-60 minutes is required to allow the sedation to wear off, before it is safe for you to leave.

If you have a general anaesthetic, most people go home on the same day as the operation, usually within a few hours of the procedure, but others may need to stay one or more nights in hospital.

**What do I need to do when I go home?**

You will need to keep your mouth as clean as possible. You must use your toothbrush carefully, the cleaner the mouth, the quicker the healing.

You will need to start chlorhexidine mouth rinses (which can be purchased from any chemist) on the day after surgery and repeat every 8 hours for 10 days. These rinses will help reduce swelling, ease restriction of mouth opening and promote healing.

You may also use hot salt mouthwashes (¼ teaspoon of salt in a tumbler of warmed water) if you wish.

Avoid smoking, alcohol, exercise, very hot food/drink for 24 hours.

**Eating and drinking**

Eat what you are able, but avoid chewy foods as your jaw muscles will be stiff after surgery and may ache. Drink plenty of fluids.

**Will I have to take painkillers?**

Most people will experience some pain after teeth are removed if they don’t take any painkillers. This discomfort can usually be controlled with simple over the counter painkillers that you would normally take for a headache. It is advised to have some of your usual painkillers at home for after your surgery. Occasionally your surgeon will issue a prescription for painkillers.

Even after taking painkillers it is still normal to feel some discomfort or soreness.

**What problems commonly occur after the operation?**

Following the operation to remove your wisdom tooth there will be some:

- Swelling
- Limitation of mouth opening and jaw ache
- Bruising

These symptoms are normal and the severity varies from person to person. These symptoms will all disappear after 5-7 days.

A review appointment is not usually made, however one can be requested if there are any concerns during the post-operative recovery period.

**What if I have problems before my surgery?**

**Reason for problem**

Food traps under the gum around a wisdom tooth. If it is not removed, the tooth may decay and cause a painful swelling.

**Immediate treatment**

Brush the gum over the tooth vigorously with chlorhexidine dental gel twice daily. Rinse vigorously with chlorhexidine mouthwash three times a day. Both gel and mouthwash can be bought without a prescription.

If problems do not resolve within 2 days, contact a dentist.

**Long-term treatment**

The oral surgeon will advise on the need for removing your wisdom teeth.

**What are the risks and complications?**

These will be discussed with you by the surgeon and when you understand them you will be asked to sign a consent form.
The removal of wisdom teeth is a common procedure but as with any surgery there are risks such as side effects from the anaesthetic, bleeding or infection and possible complications such as numbness.

**Numbness**

Impacted or buried wisdom teeth may be close or in actual contact with the nerves that supply sensation to the teeth, gums, tongue, chin, cheeks, lips and taste to the tongue.

Occasionally these nerves are bruised when the tooth is removed causing numbness, tingling, discomfort or a combination of these. If this happens the nerve usually repairs itself in time. In a minority of cases these symptoms may be permanent (approximately 1 in 200 cases).

**Dry socket**

Healing can be delayed if the blood clot covering the socket dissolves. This exposes the bone and may lead to a constant throbbing pain that can easily be treated with a dressing. This occurs more commonly in patients who smoke, and therefore the risk of this complication can be reduced by avoiding smoking while the wounds are healing and the stitches are still present. Avoiding rinsing on the day of the surgery will also reduce this risk.

**Bleeding**

If the tooth sockets start to bleed at home, take a clean cotton handkerchief or gauze (that may be given to you at your appointment) and dampen it, roll it into a “sausage shape” and bite hard on it over the affected area. You must bite continuously for approximately 30 minutes. If this is ineffective, follow the **What should I do if there is a problem?** advice at the end of this leaflet.

**Infection**

Infection is a less common complication. It can usually be treated (and often prevented) by frequent hot salt and/or chlorhexidine mouthwashes and sometimes antibiotics.

**Sinus problems**

Because some upper wisdom teeth are near to a sinus cavity the removal of these teeth can open a small hole into the sinus cavity on rare occasions. This hole usually heals on its own, but if a problem persists, further treatment may be needed.

**Retained Roots**

Where it is not possible to remove all of the tooth, a decision may be made to leave part of the root in the socket. This rarely causes problems, however if it does a further operation may be needed.

**Weakening of the jaw**

In rare cases removal of an impacted wisdom tooth can weaken the jaw making it more susceptible to fracture. The surgeon will inform you if your jaw is weak and advise you to avoid hard foodstuffs and violent or contact sports/jobs.

**What should I do if there is a problem?**

If you have problems following treatment, please call one of the numbers listed below.

Monday to Friday, 0900-1700 hours

01392 402216
01392 403711
01392 403320

Out of Hours

For emergency advice regarding increasing swelling or bleeding, please contact or visit your GP or attend the Emergency Department.