

## Dental Extractions

### 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 that can occasionally occur. The section **“What problems can occur after the operation?”** describes these, and we would particularly ask you to read this. The headings from this section will also be included in the consent form you will be asked to sign before your operation.

### Why do I need to have teeth removed?

There are many reasons for removing teeth, the most common reasons are for teeth which have previously been infected, are decayed or painful. Teeth can also be removed for other reasons such in preparation for orthodontic treatment when there is crowding of teeth or in preparation for other medical treatment, for example prior to radiotherapy to the head and neck, cardiac surgery or before certain medications are started.

### How will the teeth be removed?

Most teeth can be removed simply in a straight forward manner, however sometimes the tooth needs to be uncovered by cutting the gum. Occasionally 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?

Teeth are removed under local anaesthetic. Depending on the complexity of the procedure you may be offered some intravenous sedation or general anaesthetic. Your surgeon will discuss these options with you and help you choose the most appropriate method, depending on your individual circumstances, medical history and the amount of surgery you will need.

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

### What happens before the teeth are removed?

This depends on the choice of anaesthetic. Teeth to be removed under local anaesthetic are treated in the out-patient department. We would expect you to eat and drink as normal before the appointment and to take all routine medications as normal, unless you have been instructed by the doctor otherwise. If you are to have intravenous sedation or general anaesthetic you will be given further information about where to go, the requirement of an escort and starving instructions.

### After the teeth have been removed

After the procedure someone will go through how to care for your mouth over the next few days. They will discuss appropriate pain relief and what to do if you have problems. You will also be given this information in a leaflet to take away with you.

Occasionally dissolving stitches are placed in the area where the tooth has been removed. If stitches are placed, the surgeon will let you know. They usually fall out between 10 and 21 days.

## When can I go home?

This 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 your operation. If your surgery is with local anaesthetic alone, you will be able to leave after the procedure is over. If you have had intravenous sedation, there will be a short recovery period of 30-60 minutes which is to allow the effects of the sedation to wear off. Most individuals who are having general anaesthetic will be able to go home on the same day as the procedure, usually within a few hours of the surgery. Very occasionally people will be required to stay in hospital overnight. You will be informed if this is the case.

## What will I need to do at home?

You will need to keep your mouth clean to encourage quick healing. You must brush your teeth, but carefully.

You will need to start using Chlorhexidine mouth rinses (which can be purchased from most chemists) from the day after surgery. It is advised to use these mouthrinses after meals for 60 seconds and at a separate time to brushing your teeth. Continue to use the mouthrinse for 10 days.

If you prefer, hot salt water mouthwashes can be used instead. (¼ teaspoon salt in a tumbler glass of warmed water).

**Please avoid smoking, alcohol, exercise & very hot food/drink for 24 hours**

## Eating and drinking

It is important to try and eat a normal diet to encourage quick wound healing. Avoid any particularly chewy foods which will may your jaw muscles ache. Drink plenty of fluids.

## Pain relief

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 pain killers 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.

## What problems commonly occur after teeth removal?

It is normal to experience some **pain, swelling, bruising** and **limitation in mouth opening/ jaw ache** after teeth removal. These symptoms will be at their worst 48 hours after surgery and then will gradually improve over 5-7 days.

## What are the risks and complications?

The extraction of teeth is a common procedure but as with any surgery there are risks. Any significant and relevant risks will be discussed during the consultation.

## Bleeding

If a tooth socket starts to bleed at home, take a clean cotton handkerchief or gauze (given to you at your appointment) dampen it, and roll it into a "sausage shape" then place it over the affected area. Bite on it hard for 15-20 minutes.

## Dry socket

Occasionally the blood clot in the socket dissolves leaving the bone exposed. This can cause constant throbbing pain but can be simply treated with a dressing placed in the socket by a doctor. This complication occurs **more frequently in people who smoke**, this risk can be reduced by avoiding smoking while the wounds are healing.

## Infection

This is uncommon and can often be prevented with the use of Chlorhexidine and/or hot salt water mouth rinses. Occasionally there may be a need to give antibiotics.

## Sinus problems

Upper premolar and molar teeth lie close to the sinus cavity. Occasionally either due to long roots or a low lying sinus, on removal, a hole is created running from the mouth through to the sinus cavity. This usually heals on its own. Sometimes it can cause temporary sinusitis type symptoms which may require further treatment.

## Weakening of the jaw

Very rarely if a tooth is associated with a large cyst or a very thin lower jaw, there is a risk of fracture. If this is the case, the surgeon will warn you before the procedure and advise you how best to look after your mouth following the surgery. This will usually involve having a soft diet for a number of weeks following surgery.

## The risks of general anaesthetic

General anaesthetics have some risks, which may be increased if you have chronic medical conditions, but in general they are as follows:

- **Common temporary side effects** (risk of 1 in 10 to 1 in 100) include bruising or pain in the area of injections, blurred vision and sickness, these can usually be treated and pass off quickly.

- **Infrequent complications** (risk of 1 in 100 to 1 in 10,000) include temporary breathing difficulties, muscle pains, headaches, damage to teeth, lip or tongue, sore throat and temporary problems with speaking.

- **Extremely rare and serious complications** (risk of less than 1 in 10,000). These include severe allergic reactions and death, brain damage, kidney and liver failure, lung damage, permanent nerve or blood vessel damage, eye injury, and damage to the voice box. These are very rare and may depend on whether you have other serious medical conditions.

## 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.

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by RD&E staff undertaking procedures at the RD&E hospitals.

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