

Removal of impacted wisdom teeth

Information for patients

This leaflet has been designed to help you understand what happens when you have impacted wisdom teeth removed, and has answers to many of the commonly asked questions. If after reading this leaflet you have any further questions, please ask a member of staff.

What is an impacted wisdom tooth?

The wisdom tooth (or third molar) is usually the last tooth to erupt in a person's mouth, usually anytime after 16 years of age. There is often not enough room in the mouth to house the wisdom teeth and as such they do not come into the mouth normally. When this happens, the wisdom teeth are said to be 'impacted'.

Wisdom teeth are usually either impacted forwards in to the tooth in front or backwards into the jaw bone (see diagram below).

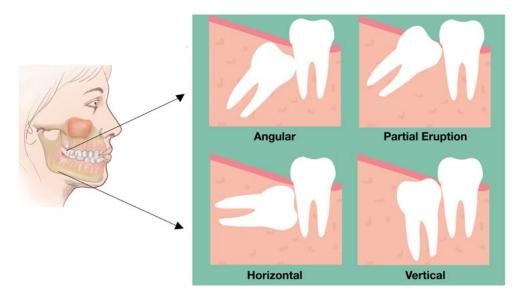


Diagram showing impacted wisdom teeth



Why do I need treatment?

An impacted wisdom tooth can cause a number of problems that mean the tooth is best removed. The most common problems are:

- Repeated attacks of **infection in the gum** surrounding the tooth: this leads to pain and swelling
- Food packing which can cause **decay** in either the wisdom tooth or tooth in front; and
- **Cysts** that can form around the wisdom tooth if it does not come into the mouth properly. A cyst develops when fluid fills the sack that normally surrounds a developing wisdom tooth.

What will happen if I choose not to have my wisdom tooth/teeth removed?

This will depend on why we have recommended the removal.

- If your gums are getting **inflammed (swollen)** there may be an opportunity to keep your gums pristine (clear and in perfect condition), which could mean you can avoid surgery. This will depend on the position of your tooth, how much of your tooth can be seen, and how loose your gum is. Please discuss this with your doctor, to see if this is an option for you.
- If there is **decay in your wisdom tooth or decay in the molar in front of your wisdom tooth**, things will probably get worse if you do not have your wisdom tooth removed. Your molar may have to be removed as well.
- If you have an **infection** in your wisdom tooth, then you will almost certainly continue to have further infections, as root canal treatment for wisdom teeth is incredibly difficult.
- If you have **a cyst** around your wisdom tooth, the cyst may not change in size or it may get bigger. This will push your wisdom tooth closer to the nerve in your jaw, increasing the risk of causing numbness to your lip/chin/teeth on that side.

What does the treatment involve?

Because your wisdom tooth has not fully erupted into your mouth it is often necessary to make a cut in your gum over the tooth. Sometimes it is also necessary to remove some bone surrounding the crown of your wisdom tooth. Rarely, the tooth needs to be cut into two or three pieces to remove it.

Once your wisdom tooth has been removed, the gum is put back into place with stitches. In most cases these stitches are dissolvable and take around two weeks to disappear.

How long will I be in hospital for?

This procedure is carried out as a day case, so you will return home after your procedure.

How long does it take to remove a wisdom tooth?

This varies from patient to patient. Some wisdom teeth may take only a few minutes to remove. More difficult wisdom teeth, that need to be cut into pieces to remove, can take around 20 minutes to remove.

Are there any risks to this procedure?

As with all surgeries there are risks when having your wisdom teeth removed.

- **Infection.** If your doctor thinks you are at significant risk of infection due to bone removal/a difficult extraction, or your medical history shows the need for antibiotics, the hospital will prescribe these to you. This will be decided on an individual basis.
- Filings may become dislodged and need to be repaired by your dentist.
- **Soft tissue damage** (such as cuts to the surrounding skin and lip burns) should heal within a week or so.
- Small pieces of root may break off as your teeth are taken out. If your doctor feels there is a risk that this will cause damage to your nerve, they may choose to leave them. This is not a problem as they will either be absorbed by your body or they are treated like a foreign object and pushed out of your gums, where your dentist can remove them at a later date.
- Less than one in every 1000 patients will have a **fractured jaw**. If this happens during your procedure and there is movement in your jaw, small titanium plates are used to stabilise it. If the fracture is not bad or moving, then we will just need to monitor you.

What type of anaesthetic is used?

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

- Local anaesthetic is an injection into the gum surrounding your wisdom tooth, similar to what 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, but will still feel pushing/pressure which can be uncomfortable, while your wisdom tooth is removed. This is the best option for wisdom teeth that are simple to remove.
- It is usually possible to remove wisdom teeth under a **general anaesthetic** (you are asleep for the procedure). You are still able to go home the same day as your surgery.

Is there much pain or swelling after the procedure?

- It is likely that you will feel some **discomfort and swelling** after surgery, both on the inside and outside of your mouth. This is usually worse for the first three days but it may take up to two weeks before all the soreness goes.
- You may also find that **your jaw is stiff** and you may need to eat a soft diet for a week or so. If it is likely to be sore your surgeon will provide you with painkillers to take home after your procedure.
- It may also be necessary for you to have a course of **antibiotics** after your procedure. If this happens, it will be discussed with you after your procedure.
- There may be some **bruising** on your face that can take up to two weeks to fade.

How should I care for my wound when I get home?

It is important to **keep the extraction sites as clean as possible** for the first few weeks after your surgery. It may be difficult to clean your teeth around the sites of the extraction as it is sore. If this is the case, it is best to keep the area(s) free from pieces of food by gently rinsing with a mouth-wash or warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water) starting on the day after your surgery.

Do I need to take any time off work?

Usually you will need to take a few days off work after this surgery and avoid strenuous exercise during this time.

When can I drive again?

You can drive yourself home after a local anaesthetic.

After **a general anaesthetic** we advise you not to operate heavy machinery (driving included) for 24 to 48 hours, and that you arrange for someone to take you home from the hospital and stay with you for the rest of the day.

What if I have any concerns or questions when I return home?

If you have had a **local anaesthetic** and have any questions or concerns, please contact the Maxillo Facial Unit at William Harvey Hospital on 01233 61 60 45 during office hours. If you need to speak to a member of staff out of these hours, please call the hospital switchboard on 01233 63 33 31 and ask to speak with the on call Maxillo Facial Senior House Officer.

If you have had a **general anaesthetic** and have any questions or concerns either contact your GP or one of the following helplines.

- Channel Day Surgery, **William Harvey Hospital**, Ashford Telephone: 01233 61 62 63 (24 hours a day, 7 days a week)
- Canterbury Day Surgery Centre, Kent and Canterbury Hospital, Canterbury Telephone: 01227 78 31 14 (7:30am to 8pm) Telephone: 07887 68 76 45 (8pm to 7:30am)
- Day Surgery Unit, Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 44 99 (7:30am to 8pm) Telephone: 07887 65 11 62 (8pm to 7:30am)

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhuft.nhs.uk/ patientinformation