Removal of impacted wisdom teeth



This leaflet has been designed to improve your understanding of any treatments you may need and contains answers to many of the commonly-asked questions. If you have any other queries that this leaflet does not address, or would like further explanation, please ask.

The problem

The wisdom tooth (or third molar) is usually the last to appear into the mouth, and this takes place at any time after 16 years of age. Often there is not enough room in the jaw to accommodate wisdom teeth and so they do not establish themselves in proper alignment with the other, older teeth.

When this happens, the wisdom teeth are said to be 'impacted', meaning that they are blocked as they push through the gum into your mouth. They are usually impacted either forwards into the tooth, in front, or backwards into the jawbone.

Why do I need treatment?

An impacted wisdom tooth can cause a number of problems, and often the best solution is to remove it. The most common problems are:

- Repeated attacks of infection in the gum surrounding the tooth, causing pain and swelling
- Food packing, which causes decay in either the wisdom tooth or the one in front of it
- Cysts can form around the wisdom tooth if it does not grow into the mouth properly. A cyst occurs when fluid fills the sac that normally surrounds a developing wisdom tooth.



What does the treatment involve?

Because the wisdom tooth has not fully appeared into the mouth, it is often necessary to make a cut in the gum.

Sometimes it is also necessary to remove some bone surrounding the crown of the wisdom tooth. Rarely, the tooth needs to be cut into 2 or 3 pieces to remove it.

Once it has been removed, the gum is repaired with stitches. In the majority of cases these stitches are dissolvable and take a few weeks to disappear.

What type of anaesthetic is used?

A number of options are available and the choice will 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 one that your dentist would use for
 a filling. The injection takes a couple of minutes to numb the area and
 you will feel no pain, although you may experience some pressure. This
 is the best option for wisdom teeth that are simple to remove.
- 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.
- General anaesthetic It is usually possible to remove wisdom teeth under a 'day case' general anaesthetic. This means that you will be put to sleep completely, but will still be able to go home on the day of surgery.

How long does it take to remove a wisdom tooth?

This varies depending on the circumstances. Some wisdom teeth may take only a few minutes to remove, while more difficult cases, where there is a need to cut the teeth into pieces, can take around 30 minutes.

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

After surgery, it is likely that there will be some discomfort and swelling on both the inside and the outside of your mouth. The first three days are usually the worst, 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 your surgeon believes it is likely to be sore, they will arrange painkillers for you. There may be some bruising to the skin of your face, which can take up to a fortnight to fade away.

Is there anything else I need to do after the extraction?

It is important to keep the extraction site(s) as clean as possible for the first few weeks after surgery.

It may be difficult to clean your teeth around the site(s) of the extraction due to soreness and, if this is the case, it is best to keep the area free from food debris by gently rinsing with warm salt water (dissolve a flat teaspoonful of kitchen salt in a cup of warm water) the day after surgery.

Do I need to take any time off 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 may well not be able to drive (for 24 hours after intravenous sedation and for 48 hours after a general anaesthetic).

What are the possible problems?

 Although there may 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 Oral and Maxillofacial Surgery department.

Oral and Maxillofacial

- Infection is uncommon.
- Two nerves 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 these nerves may be bruised when a wisdom tooth is taken out. This can cause tingling 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 100 people will have problems that last more than a year. These risks may be higher if your tooth is in a difficult position. The surgeon will tell you if you are considered to be at increased risk.

For further information please contact: Montagu Hospital Te: 01709 649064.

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

The contact details are:

Telephone: 01302 642764 or 0800 028 8059

Email: dbth.pals.dbh@nhs.net

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