

GENERAL INFORMATION REGARDING REMOVAL OF IMPACTED AND UNERUPTED TEETH

WHAT IS AN IMPACTED TOOTH?

An impacted tooth is one which has been prevented from erupting into the mouth. The tooth may be blocked by another tooth, or dense bone or a pathological condition. Any tooth can be impacted, but more often than not, impacted teeth are wisdom teeth or third molars as dentists call them.

Some people have enough room in the backs of their mouths for their third molars to grow out straight and healthy, and they may function well for a lifetime. However, many others do not have enough room, and the wisdom teeth are crowded and tilted.

WHAT HARM CAN IMPACTED TEETH DO?

1. Impacted teeth may grow in any direction; however they often grow forward and push against the adjacent second molar. This can result in pain in the second molar and possibly damage to the roots or crown. The second molar may also be pushed out of position. 2. All teeth develop in sacs deep in the bone. If the tooth erupts normally, the sac generally disappears. If the tooth is impacted, the sac can fill with fluid and enlarge to form a cyst. The cyst can cause destruction of surrounding bone and damage to other teeth in the area. 3. Whenever saliva can reach the tooth, decay may occur, and since such cavities cannot be filled severe pain may result. This may be followed by the formation of an abscess. 4. Bacteria in the saliva may cause an infection around the crown of the wisdom tooth and under the flap of gum tissue which may be covering part of the tooth. This infection may spread to the cheek, throat or neck and result in severe pain, stiffness of the jaws, fever, and severe generalized illness. 5. Pressure from the wisdom teeth may cause crowding of the front teeth. This is why some orthodontists do not consider orthodontic treatment complete until impacted third molars have been removed.

WHEN IS IT BEST TO HAVE WISDOM TEETH REMOVED?

The dentist can study x-rays of the teeth and jaws, and can frequently tell by the teen years if the wisdom teeth are going to be impacted. At this stage the roots are usually not fully formed in most people and the bone is less dense. Therefore, the wisdom teeth are less complicated to remove and the healing is generally faster.

WHAT IS IT LIKE TO HAVE AN IMPACTED TOOTH REMOVED?

Because the impacted tooth is usually completely beneath the surface of the gum and often encased in bone, we consider its removal an operation in every sense of the word. This is said not to frighten the prospective patient, but rather to give a better understanding about certain features regarding cost, careful preparations and the need for good aftercare. Either local and general anaesthesia or local and sedation may be used. The dentist chooses the method of treatment based on each individual situation. Having a comfortable patient helps to control bleeding, allows the dentist to work without haste and causes less physiological disturbance to the patient. The actual removal of the tooth is done in keeping with recognized surgical principles, with meticulously sterile instruments, good light, a dry operative field, gentle handling of the soft tissue and bone and the advantages of a well trained team. Depending on the degree of difficulty of the individual case, the procedure may last from fifteen to sixty minutes. If sedation or general anaesthesia is used there will be a recovery period from thirty to ninety minutes. The surgical wound may be sutured with a material of the dentist's choice. Most often dissolving sutures are used.

WHAT SHOULD I EXPECT AFTER SURGERY?

After any surgical procedure a certain amount of discomfort is anticipated. For this reason you will be provided with pain relieving medication before you leave the office. You are to take your pain medication as directed by the dentist; instructions will be on the bottle. Your dentist will decide if antibiotic medication is necessary and if this medication has been prescribed then it should be taken until all tablets are gone. Swelling after surgery is normal. You should expect to be most swollen forty eight to seventy two hours after surgery. The swelling then begins to resolve. Certain individuals have bruising after wisdom teeth surgery. The bruising may extend into the neck and chest. This should not alarm you as in some individuals this is the normal sequence of events.

Stiffness of the jaws is also normal after wisdom teeth surgery and is usually at its worst two or three days after surgery. One should start to exercise the jaws on the second or third post operative day to return the jaws to normal.

Although it will probably be difficult to eat after surgery in the mouth one must remember that the body heals itself by drawing upon its reserves of protein, vitamins, minerals, calcium and iron. Failure to replenish the body's supplies of the above mentioned nutrients can result in fatigue, infections and even delayed healing. For the first twenty-four hours following surgery your food and beverages should be warm or cold NOT HOT. Eggs, custards, yogurt, milkshakes, baby food, etc., are both nutritious and manageable. Fluid intake should be approximately two litres or eight juice glasses per day for the average adult.

Detailed post operative instructions will be provided before you leave the office.

ARE THERE ANY COMPLICATIONS OR RISKS?

Any operation carries some degree of risk. This risk is minimized by careful preoperative assessment of your physical condition, by careful examination of all of the diagnostic materials, by careful preparation of instruments and all facilities, and by the skill of your dental team. The most commonly encountered complications will be discussed below.

Post-operative bleeding is usually encountered when the patient has not placed the gauze pack DIRECTLY over the surgical site. Pressure over the site for forty-five to sixty minutes will control most post-operative bleeding. If you are still concerned call the office and the problem will be dealt with promptly.

A condition known as dry socket occurs in approximately five percent of patients. It is more common in smokers and in female patients on the pill. It is manifest by a dull throbbing pain which starts five or seven days after the operation and is accompanied by a foul odour from the mouth. The treatment for this problem is simple and consists of two or three dressing changes. Healing is slightly slower than normal.

The roots of lower impacted teeth very often rest on and around the main nerve of the lower jaw. Very rarely, in spite of all precautions, during the removal of lower third molars this nerve is bruised, slightly lacerated or even severed. The result will be numbness of the lower lip, chin, and all of the teeth on that side. This effect does not last longer than a few weeks in most cases. It improves as the nerve repairs itself and regenerates. Occasionally the numbness may last as long as two or five years and even more rarely it may be permanent. Also in the region of the lower third molar is the nerve which supplies sensation to the lateral part of the tongue. It may on occasion be stretched with a resultant numb tongue. This problem usually resolves within several weeks or months. Upper impacted third molars lie against the wall of the sinus. Great care is taken to insure that no injury occurs to this structure but occasionally the thin wall of bone cracks and blood seeps into the sinus. Occasionally there may be formed a communication between the sinus and the mouth. If your dentist suspects this to be the case you will be informed and additional medication will be prescribed. Infections after the removal of wisdom teeth are rare. Redness, increasing swelling after an initial decrease, foul tasting discharge into the mouth, fever and chills are all signs of infection. If these should appear call the office and you will be attended to promptly. Occasionally large fillings in the second molar teeth may be loosened or cracked during the removal of the wisdom teeth in spite of immaculate care and skill. If the possibility of this exists prior to surgery, you will be informed.

Another very rare complication is a cracked or fractured lower jaw. This occurs when the wisdom tooth is very severely impacted. If your dentist is concerned about this possibility, you will be informed.

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