

Department of Oral and Maxillofacial Surgery

Removal of Impacted Wisdom Teeth

This leaflet aims to improve your understanding of any forthcoming treatment and contains the answers to frequently asked questions. If you have any other questions that the leaflet does not answer or would like further information please ask a member of staff.

The problem

The wisdom tooth (or third molar) is usually the last tooth to erupt into the mouth (anytime after about 16 years of age). Frequently there is not enough room to accommodate wisdom teeth. When this happens, the wisdom teeth are said to be “impacted”. Wisdom teeth are usually either impacted forwards into the tooth in front or backwards into the jaw bone.

Why do I need treatment?

An impacted wisdom tooth can cause a number of problems that mean the tooth is best removed. Most commonly these are:

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



Patient Information

What does the treatment involve?

- As the wisdom tooth has not fully erupted into the mouth it is often necessary to make a cut in the gum over the tooth
- 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 the wisdom tooth has been removed the gum is put back into place with stitches. In the majority of cases these stitches are dissolvable and take around two weeks to disappear

What type of anaesthetic is used?

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

- **Local anaesthetic** - this is an injection into gum surrounding the wisdom tooth, rather similar to that you may have had at your dentist for a filling. This will numb the area and means that you will feel no pain while the wisdom tooth is removed. 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, where you will be asleep, you will be able to go home on the same day as surgery. You will need someone to look after you for 24 hours and to drive you home.

How long does it take to remove a wisdom tooth?

This is a variable. Some wisdom teeth may take only a few minutes to remove. More difficult wisdom teeth can take around 20 minutes to extract.

Patient Information

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

- It is likely that there will be some discomfort and swelling both on the inside and outside of your mouth after surgery. This is usually worse for the first three days but it may take up to two weeks before all the soreness goes
- You may find that your jaw is stiff and that you need to eat a soft diet for a week or so. Staff can advise you about this
- If it is likely to be very sore your surgeon will arrange painkillers for you
- It may be necessary for you to have a course of antibiotics after the extraction
- There may be some bruising of the skin on your face that can take up to a fortnight to fade away

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

- It is important to keep the extraction sites as clean as possible for the first few weeks after surgery
- It is best to keep the area free from food debris by gently rinsing with a mouthwash or warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water) starting the following day
- Avoid alcohol and smoking for the first 24 hours

Do I need to take any time off work?

- Usually it will be necessary to take a few days off work
- Avoid strenuous exercise for this time
- Depending on the type of anaesthetic used you might not be able to drive (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.

Patient Information

- 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 clean, damp handkerchief or swab. If the bleeding does not stop, please contact Clinic 11 on 024 7696 6500 during office hours. Out of hours please contact University Hospital Coventry and Warwickshire on 024 7695 4000 and ask for the Maxillofacial Senior House Officer on call.
- Infection is uncommon particularly if antibiotics are used.
- There are two nerves that 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 10 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 an increased risk.
- The risks will be discussed with you before you sign a consent form.

Adapted from British Association of Oral and Maxillofacial Surgeons

<http://www.baoms.org.uk/>

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 6500 and we will do our best to meet your needs.

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