

information sheet for patients wisdom teeth

What are the problems with them?

Removal of wisdom teeth is necessitated by recurrent infections (pericoronitis) which causes pain, swelling and reduced opening, decay, serious gum disease, the development of a cyst or impaction (no room left) of the teeth.

What will the NHS Dentist do?

Wisdom teeth may be removed in this surgery under local anaesthetic or by referral to a specialist oral surgeon for sedation or general anaesthetic (depending on the level of difficulty). This will be at a hospital or clinic. There are long waiting times for hospital treatment due to a shortage of funds to employ specialists.

You will have an appointment to assess the wisdom teeth and then another appointment to have them extracted, probably one by one.

What to expect after the extractions?

- The socket may ooze slightly for a few hours. Some bony spicules may outline the edge of the wound. These will either be separated and exfoliated or reabsorbed into the healing socket. These symptoms usually improve rapidly within a week.
- Some bruising and stiffness will occur and you may experience some difficulty in opening your jaw wide. This will usually pass over the following week or two.
- · Pain and discomfort may be relieved with ordinary pain killers such as paracetamol and ibuprofen (not aspirin). You may also be prescribed antibiotics.

Complications

- · Occasionally wisdom teeth sockets become infected. This will cause the pain, stiffness and swelling to last longer than normal.
- Some patients will suffer a tingling or numb sensation in the lower lip or tongue. This is because the nerve supply to the lip lies just below the lower wisdom teeth. This nerve supply may be bruised and can be permanently damaged.
- · You may be bruised during the procedure.

Should any of these occur, you are advised to contact your dentist.