WISDOM TEETH

and what to do about them

isdom teeth (also called "third molars") usually do not push through the gums until people are in their late teens, twenties or even older. Wisdom teeth are usually the last teeth to come through the gums.

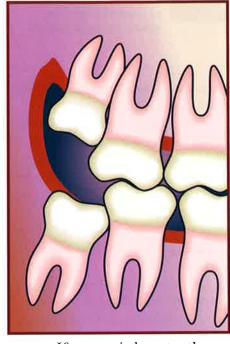
Most people have four wisdom teeth. Some people have no wisdom teeth.

Often there is little space at the rear of the jaws for wisdom teeth to come easily through the gums. If the jaw does not have enough room for the wisdom tooth to come through, the tooth will become wedged in or "impacted".

Some impacted wisdom teeth remain buried and cause no trouble. However, other impacted wisdom teeth may cause severe problems.

Often one or more wisdom teeth will cause problems and must be removed. If one or more of your wisdom teeth causes problems, your dentist may recommend that it be removed.

Removal of a wisdom tooth is a very common procedure. Removal of troublesome wisdom teeth should usually be done as soon as possible before the problems get



worse. If your wisdom teeth are likely to be difficult or complicated to remove, your dentist may refer you to an oral and maxillofacial surgeon.

Due to the shape and position of some wisdom teeth and the shape of the jaws, it may be preferable in such cases for an oral and maxillofacial surgeon to remove the teeth. An oral and maxillofacial surgeon is specially trained in surgery of the mouth, teeth, gums and jaws.

DEAR DENTIST: When you discuss this pamphlet with your patient, remove this sticker and put it on the patient's medical history or card. This will remind you and the patient that this pamphlet has been provided. Some surgeons ask their patients to sign the sticker to confirm receipt of the pamphlet.

TREATMENT INFORMATION PAMPHLET
Procedure:
PATIENT'S NAME:
DOCTOR'S NAME:
EDITION NUMBER:DATE: (day)(month)(year)

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Ask your dentist

his pamphlet is intended to provide information about your wisdom teeth. It is not a substitute for advice from your dentist. This pamphlet does not contain all known facts about wisdom teeth and the surgery to remove them.

If you are not sure about the benefits and risks of getting your wisdom teeth removed, ask your dentist.

Your dentist will be able to answer any questions or concerns you may have about the teeth, diagnosis, surgery and anaesthesia.

This pamphlet should be used only in consultation with your dentist.

Interpreter Service

If you have trouble reading English, telephone the Translating and Interpreting Service on 13 14 50.

إذا كنت تواجه صعوبة في قراءة اللغة الانكليزبة، إتصل بخدمة الترجمة التحريرية والشفوية على رقم الهاتف 14 50.

如果您閱讀英文有困難,請打電話 給電話翻譯服務處,號碼: 13 14 50.

Εάν δυσκολεύεστε με τα Αγγλικά, τηλεφωνείστε στην Υπηρεσία Μεταφραστών και Διερμηνέων στο 13 14 50.

Se avete difficoltà a leggere in inglese, telefonate al Servizio Traduzioni e Interpretariato al 13 14 50

İngilizce okumakta güçlük çekiyorsanız, 13 14 50 numaradan Sözlü ve Yazılı Çevirmenlik Servisi (Translating and Interpreting)'ni arayınız.

Nếu quí vị không đọc được tiếng Anh, vui lòng điện thoại cho Sở Thông-ngôn và Phiên-dịch qua số 13 14 50.

Problems caused by in

Impacted wisdom teeth can cause the following problems.

Infection

When an impacted wisdom tooth starts to push through the gum, an infection can start around the top of the tooth.

Infection and inflammation (swollen, red gums) can cause pain, swelling, and jaw stiffness.



Swallowing may be painful. The person may feel generally unwell.

The infection can cause bad breath and an unpleasant taste.

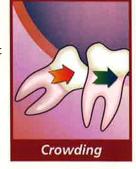
Pain

Pressure from the wisdom tooth may cause pain in the tooth next to it. Pain can also be caused by infection around the wisdom tooth.

Crowding

A wisdom tooth may push nearby teeth out of their correct position and may help cause crowding of front teeth.





Treatment of a wisdom tooth infection

our dentist may gently clean the infected area around the tooth. You may be advised to rinse your mouth often with a warm saltwater mouthwash.

Use one teaspoon of salt in a glass of warm water.

The water should be as warm as possible, but not too hot.

Your dentist may also suggest a disinfectant mouthwash and a pain killer for you to use.

Your dentist may prescribe antibiotics. Tell your dentist if you have ever had an allergic reaction to any antibiotics or other drugs.

Take the complete course of antibiotics.

The decision to remove teeth

After inspecting your mouth, jaws and X-ray films, your dentist can discuss the diagnosis with you.

Your dentist may recommend removal of the wisdom teeth or other options.

If the area around the tooth has been infected, your dentist may decide to delay surgery while the infection is being treated.

Even though a wisdom tooth has caused problems, it may "settle down" after it pushes through the gum. Your dentist may delay surgery to see if the tooth stops causing problems.

While impacted wisdom teeth may cause problems, some never

cause trouble and may not need to be removed.

The decision to have wisdom teeth removed is always yours.

If you decide to have wisdom teeth removed, your dentist may ask you to sign a consent form. Read it carefully. If you have any questions about the form, the surgery or anything else, ask your dentist.

If you are uncertain about your dentist's advice or diagnosis, you may wish to seek the opinion of another dentist or an oral and maxillofacial surgeon.

Early removal of wisdom teeth

Your dentist may recommend early removal of one or more wisdom teeth due to the following reasons.

- There is not enough room for the tooth to push through.
- You need orthodontic work, and the remaining teeth must not be crowded by wisdom teeth.
- The tooth has started to cause trouble. It should be removed soon so that pain, infection or other problems do not get worse.

It is best to have troublesome wisdom teeth removed while the person is young.

In young people, a tooth's roots have not formed totally, and the bone surrounding the tooth is softer.

This allows easier removal of the tooth, and there is less risk of damage to nerves, bone or other teeth.

Giving your dental and medical history to your dentist

our dentist will ask you questions about any problems you may have had with your health and teeth. Some health problems may interfere with surgery, anaesthesia and care after surgery.

That is why your dentist needs to know your dental and medical history. This helps your dentist plan the best possible treatment.

Your dentist may recommend blood tests or other health tests.

Medicines

Give your dentist a list of all medicines you are taking now or have been taking recently.

This includes the "Pill" and any over-the-counter medicines, such as aspirin or cough medicines.

Tell your dentist if you have ever had any type of allergic or bad reaction to antibiotics or any other medicine.

Pregnancy

Tell your dentist if you are or may be pregnant. This could affect your treatment, including:

- X-ray examination
- anaesthesia
- pain treatment
- antibiotics and other medicines
- whether removal of a wisdom tooth should be delayed.

Bleeding or blood disorders

Tell your dentist if you:

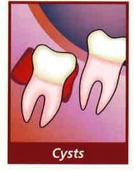
- bleed too much when you are injured or have surgery
- have any blood disorders, such as haemophilia.

npacted wisdom teeth

removed, a sac of fluid called a cyst can form around the tooth and may displace the tooth. The cyst can destroy bone and damage other teeth and the gums. Cyst formation around unerupted teeth is uncommon.

Damage to nearby molars

An impacted wisdom tooth



may keep pushing against the molar next to it.

This can cause an "erosion cavity" where the wisdom tooth hits the other molar.

This often leads to serious damage to both teeth.

The molars may become infected or "abscessed". Removal of both molars is often needed.

Ulcer

An upper wisdom tooth may push sideways out of the gum. It

may cause an ulcer where it rubs against the inside of the cheek.

A food trap Food becomes trapped between the wisdom tooth and the molar next to it. This



can cause cavities in both teeth.

X-ray examination

Your dentist needs to take X-ray films of your jaw. The films will help your dentist plan the best way to remove troublesome wisdom teeth.



X-ray film of impacted wisdom tooth

Where to have surgery

Your dentist will advise you whether your wisdom teeth should be removed in the surgery, hospital or in a day-surgery hospital.

If you go into hospital

As part of routine procedure, your dentist may want you to have some tests.

You may be given a sedative to help you relax.

Do not drive after surgery

A family member or friend should take you home after the surgery.

Arrange this well in advance. You should not drive after surgery.

Stopping pain during surgery

After discussion with your dentist, a decision will be made whether the wisdom tooth will be removed under a local anaesthetic or a general anaesthetic. Discuss the options with your dentist.

Local anaesthesia: If a wisdom

tooth removal is fairly simple, your dentist may give you a local anaesthetic with a needle. The local anaesthetic will numb the gums and lower parts of the face.

The dentist can then remove the tooth. Your dentist may give you a tablet to help you relax during the surgery.

General anaesthesia: For some people, the dentist may recommend "general anaesthesia", that is, putting them to sleep with an injection.

General anaesthesia is given by a specialist anaesthetist. General anaesthesia may be used in people who:

- have wisdom teeth that may be a little more difficult to remove
- do not want to remain awake during the surgery
- have other problems with their wisdom teeth, gums or jaws.

NOTE: For six hours before surgery under a general anaesthetic, do not eat or drink anything.

If your surgery will be done in the morning, do not eat or drink after midnight the night before.

If you smoke, you should stop smoking two weeks before the surgery.

Your dentist or anaesthetist will give you full instructions.

Modern anaesthesia is safe with few risks. However, a few people have may have serious reactions to them. If you have ever had a reaction to an anaesthetic drug, tell your dentist.

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Removal of wisdom teeth

Your dentist will have to make an incision to open your gums to remove the wisdom tooth. A small portion of the bone may have to be removed so your dentist can get to the tooth.

The tooth may have to be divided into segments so it can be removed easily and safely.

The incision in your gums may have to be closed with stitches.

Some stitches dissolve after a few days. Other stitches will be removed by your dentist.

After the surgery

After the tooth has been removed, you will have to rest for a while before you go home. Your dentist will check on you as you recover.

When your dentist is satisfied with your recovery, you can go home.

If you have been staying in hospital, you will return to your room when you recover from the anaesthetic.

Taking care of yourself after surgery

- Rest at home after the surgery.
- Do not drive, engage in active exercise, or operate machinery.
- Take several days off from work, school or other duties.
- Do not drink beer, wine, spirits or other alcoholic drinks while you are taking pain killers or antibiotics.
- Eat soft foods such as soups, blended (pureed) vegetables and meats, and gelatine for the first two days.
- Drink lots of fluids.
- Ice packs may reduce swelling and pain.

PAIN RELIEF AFTER SURGERY

Pain may be minor in some people and greater in others. Your dentist will prescribe a pain reliever for you.

If you are uncertain about the best pain relief medicine for you, ask your dentist. Pain usually starts to decrease after the second day. However, some people may still need pain relief after one week.

If your pain does not seem to get less as the days go by, tell your dentist.

CONTROL OF BLEEDING

You can apply pressure over the area of bleeding by biting gently but firmly on a piece of cotton gauze.

The pressure helps stop bleeding, and a blood clot forms. It is important not to disturb the area or bleeding may start again. The gums may ooze blood slightly for a day after surgery.

Any bleeding should stop by the second day. If bleeding does not stop, contact your dentist.

SWELLING

Swelling almost always occurs after surgery and can vary from a little to severe. Most swelling takes four to five days to go down completely.

Swelling can be reduced by applying ice packs on the cheeks.

FOLLOW-UP

A follow-up visit is important. Your dentist will want to check on healing. Stitches may be taken out.

Possible side effects of the surgery

ll types of surgery have risks. Removal of a wisdom tooth also has risks.

Complications can occur. The following list is not complete but is intended to inform you about possible problems. They do not happen often but may occur. There may be other uncommon complications. If you have any concerns about possible risks or complications, always ask your dentist.

Numbness or altered sensation

An impacted wisdom tooth may be close to nerves. Sometimes, the impacted wisdom tooth may be touching a major nerve. When the tooth is removed, the nerve may become bruised. This can cause numbness, tingling and loss of feeling in teeth, gums, cheeks, lips, chin, tongue and around the upper jaw and lower jaw.

If a nerve is injured, it usually will heal. As it heals, the numbness and tingling go away. Often this takes less than four weeks. In some people, complete healing of the nerve may take six months to 18 months. In rare cases, the nerve may not heal completely, and numbness or altered sensation may be permanent.

Dry socket

After the wisdom tooth is removed, a blood clot will form over the bone. This clot is important for proper healing and relief of pain.

If the blood clot is washed away or dissolves, the bone will be exposed. This is called a "dry socket". The result is a constant throbbing pain which may last for many days.

If you have pain like this, contact

your dentist. To help prevent a dry socket:

- For the first day after surgery, do not rinse out your mouth or spit with force. This can loosen the blood clot and may slow healing.
- After the first day, you can rinse your mouth <u>very gently</u> with warm salt water. Rinse every four hours or more often. This will help healing, reduce swelling and pain, and reduce the risk of infection.
- Do not smoke after surgery.
- For the first day after surgery, do not brush your teeth around the area of surgery. After the first day, brush gently.

Infection

An infection in the gum or bone is usually treated with an antibiotic. Tell your dentist if you have ever had an allergic reaction to any antibiotic or other drug.

Difficulty in opening the mouth

Pain or discomfort when opening the mouth is common after removal of a wisdom tooth. This usually goes away in a few days after the swelling goes down.

Fever

The body temperature may be slightly higher after surgery. It should go back to normal after 12 to 24 hours. A fever which lasts longer may be an indication of an infection or other problems. You should contact your dentist.

Excessive bleeding (haemorrhage)

Although rare, haemorrhage may occur. It may be caused by too much exertion or by vomiting. It can be stopped by putting gauze over the wound and applying pressure by biting gently on the gauze for 15 minutes. If severe bleeding does not stop, tell your dentist at once.

Lip sores

While the tooth is being removed, pressure or stretching of the lip by the surgical instruments may cause bruises or small sores.

They usually heal without any problems. These lip sores are not common.

Damage to a nearby tooth or fillings

When a wisdom tooth is removed, the tooth or filling next to it may be chipped or loosened. This is rare.

Vomiting

Some people may vomit when they are recovering from the effects of the anaesthetic.

Sinus problems

The roots of the upper wisdom teeth are close to the sinuses. In some cases, a sinus may be opened when a wisdom tooth is removed. The opening will usually heal quickly without infection.

However, if an infection sets in or other problems start, more treatment may be necessary.

Weak jaw

Removal of an impacted wisdom tooth can cause the jaw bone to become temporarily weaker. This is rare and usually only occurs in the elderly.

Your Dentist		