



Removing wisdom teeth

An operation to take out wisdom teeth that are causing problems

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This information is based on *Clinical Evidence*, the *British Medical Journal's* worldwide survey of the best, most up-to-date medical research, used by doctors everywhere.

You can find out more about your condition and your treatment choices at NHS Direct Online (www.nhsdirect.nhs.uk).

This information tells you about an operation to remove your wisdom teeth. It explains how the operation is done, how it can help you, what the risks are and what to expect afterwards.

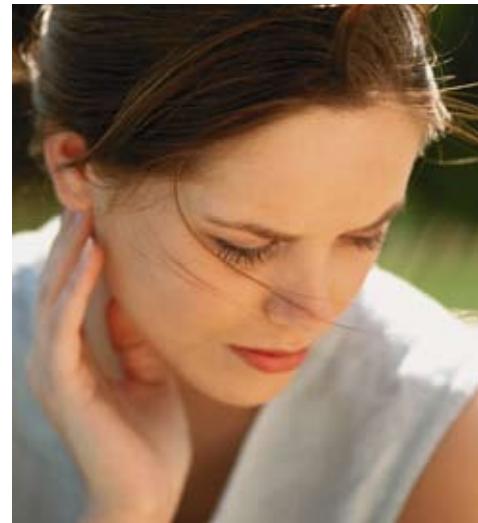
The benefits and risks described here are based on research studies and might be different in your hospital or clinic. You may want to talk about this with the doctors and dentists treating you.

What is surgery to remove wisdom teeth?

An operation to remove your wisdom teeth involves making a small cut in your gum, separating the tooth from your jawbone and taking it out of your mouth. The teeth might be taken out whole or in small pieces.

Your wisdom teeth are the last adult teeth to come through. There are four of them, right at the back of your mouth. They usually come through in your late teens or early 20s.

Sometimes, wisdom teeth don't come through the gum properly. This usually happens when there isn't enough space, or when the teeth are growing in the wrong direction. If they don't come through properly, they're called **impacted wisdom teeth**.



Who should have this operation?

Taking out wisdom teeth is one of the most common operations in the UK. But most people **don't need their wisdom teeth removed**, even if the teeth are impacted.

Guidelines from the National Institute for Health and Clinical Excellence (NICE), the government body that advises about treatments, say that an impacted wisdom tooth should **only be taken out if it's causing you problems.¹**

Problems include:

- An infection around the tooth
- Damage to a neighbouring tooth
- Decay (a cavity) in the tooth that your dentist can't treat
- A cyst (a sac filled with fluid) in your jaw.

If you do have one of these problems, you might get:

- Pain or tenderness in your gums or jawbone
- Bad breath
- Redness or swelling in your gums
- An unpleasant taste in your mouth
- Headaches or jaw ache.

If your impacted wisdom teeth **aren't causing you problems**, it's best to keep them and avoid the risks of surgery.²

Sometimes, as your wisdom teeth come through, your gums may feel sore or tender for a while. This is normal, and isn't usually a reason for having them removed.

If you do need to have one or two of your wisdom teeth removed, it doesn't mean that you need to have them all taken out.

What happens during surgery?

Your usual dentist may be able to do this operation. Or a surgeon might take out your impacted wisdom teeth. It depends on how easy or difficult each tooth is to remove.

Upper wisdom teeth are often easier to take out than lower ones. If there's a chance that your teeth won't come out easily, you'll probably need to see a surgeon.

Before the operation

You and your dentist or surgeon will need to decide what kind of anaesthetic to use. Most people have a **local anaesthetic**. This is an injection that numbs part of your mouth. It's the same painkiller you might have had for a filling. You'll need two or three injections into your gum. It works for the length of the operation: about 40 minutes. But your lip or tongue will still feel numb two or three hours after.

Some people have a **general anaesthetic**. This makes you sleep. There are more risks with a general anaesthetic than a local anaesthetic. It's normally only given in hospital.

Your surgeon may suggest a type of anaesthetic called **conscious sedation**. A sedative drug is fed through a needle into the back of your hand. Or you could be given a pill, but this isn't as common. You'll feel very relaxed and sleepy, but you'll still be awake. You won't feel any pain.

During the operation

The operation usually lasts for about 40 minutes. But it could take up to an hour if you're having all four teeth removed or they're hard to get out.

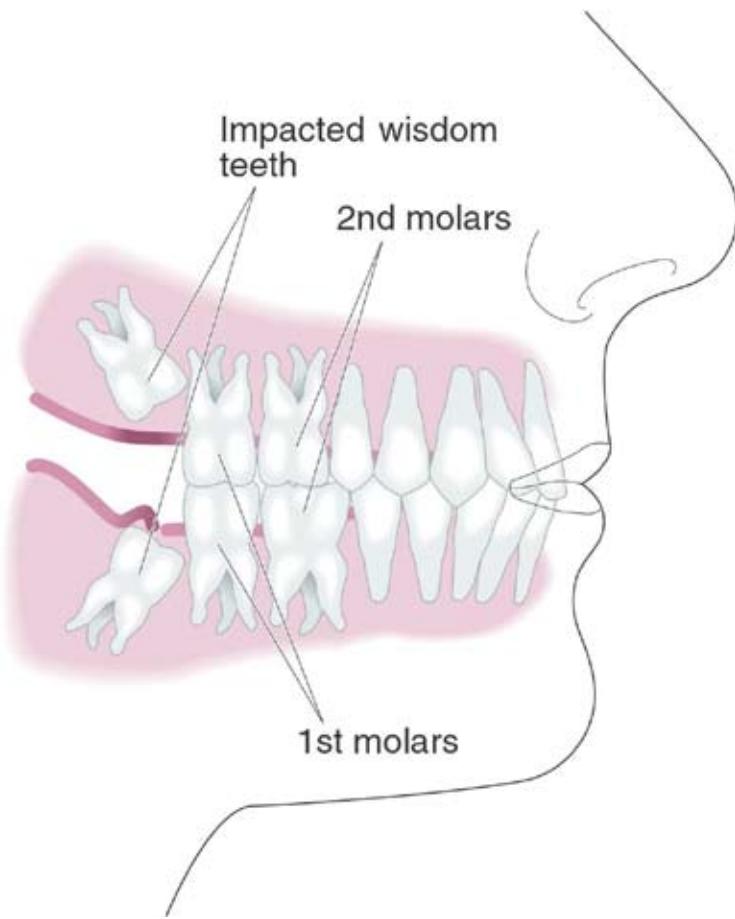
Here's what happens.

- Your dentist or surgeon will make a small cut into your gum to get to the tooth underneath.
- Then, he or she will remove bone around the tooth and take out the tooth. A drill is usually used, but sometimes the operation is done with a small chisel.
- Depending on the position of the tooth, your dentist or surgeon may need to cut the tooth into pieces to make it easier to take out. A salt-water spray is put into your mouth to wash away blood and bits of tooth.
- Once the tooth is removed, your dentist or surgeon will stitch your gum back up using stitches that will dissolve.

How well does the operation work?

If your impacted wisdom teeth are causing problems, you shouldn't have any more symptoms after the operation. You shouldn't have any more infections or pain. Problems like bad breath and an unpleasant taste in your mouth should clear up.

Your wisdom teeth will not grow back.



What are the risks of an operation coronary artery bypass to remove impacted wisdom teeth?

All operations have risks, and your dentist or surgeon should talk to you about things that could go wrong.

Anaesthetics can have **side effects**. These are more likely with a general anaesthetic. You may have an allergic reaction to the anaesthetic, or get breathing or heart problems. These problems are serious, but very rare. If you have any allergies, **tell your doctor**.

It's hard to say exactly how often problems happen with surgery to remove wisdom teeth. The research isn't very good. You can use the figures we give below as a guide, but it's important to discuss with your dentist or surgeon how often problems happen in your hospital or surgery. About 1 in 20 people get problems during or after an operation to take out their wisdom teeth. These problems aren't usually serious or permanent.³ But you may get more serious problems if you're over 25 and have deeply impacted teeth.

- Usually, people have a sore mouth and swollen cheeks after their operation.^{4 5}
- You may keep bleeding. Everyone bleeds after surgery, but it should stop by the time you go home. Less than 1 in 100 people have bleeding that is difficult to stop (a **haemorrhage**).⁶
- You might get an infection. This happens to about 1 or 2 out of 100 people.^{7 8 9}
- Between 1 in 10 and 1 in 100 people get a throbbing pain after their operation.^{6 9} It probably happens because the blood clot over the healing gum breaks off. This is called a **dry socket**. You'll need treatment. You're more likely to get a dry socket if you smoke.¹⁰
- Nerves in your mouth may be damaged during surgery to remove your lower wisdom teeth. Your lower lip, chin or tongue may feel tingly or numb. This happens to between 1 and 8 out of 100 people.^{11 12 13} For 1 in 100 people, the numbness is permanent.¹⁴ A nerve that helps you sense pain and temperature in your mouth can also be damaged. This is called the **lingual nerve**. This nerve may be permanently damaged in up to 1 in 100 people.¹⁵ The risk of damage may be greater if your tooth is deeply impacted. Dentists and surgeons often use an instrument called a **lingual nerve retractor** to move the nerve out of the way. But this can actually increase the risk of damage.^{15 16} However, the numbness is usually only temporary. You should get feeling back within three months.¹³
- A small part of the tooth's root might get left behind.¹⁷ This happens to about 5 in 100 people.⁶ You might need to have the fragment removed if it causes problems.
- Your other teeth could be damaged when a wisdom tooth is taken out. But this is rare and happens to less than 1 in 100 people.⁶
- Your jawbone could get fractured when your teeth are removed, but this problem is very rare.

Will surgery be painful?

The pain usually peaks three hours to six hours after the operation.¹⁸ It normally goes away after five days to seven days.⁶ You'll need to take painkillers at first. You could take:

- Nonsteroidal anti-inflammatory drugs, such as ibuprofen
- Painkillers, such as paracetamol or codeine.

You may want to take painkillers regularly for the first few days, then only when you feel you need them after that.

What are the alternatives to surgery?

An operation is the only way to take out your wisdom teeth.

What will happen if I don't have surgery?

If your impacted wisdom teeth are causing you problems, it's hard to know what will happen if you keep them. There isn't much research, but most experts agree that it's best to take them out.

If you keep them, you could get mild infections that come and go. You might need to take **antibiotics** for these.

Serious infections are rare, but can be dangerous. You could get a high temperature and swelling in your mouth bad enough to block your airways.

An impacted tooth may damage your other teeth. You may also get a cyst (a sac filled with fluid) around the root of the impacted wisdom tooth, and the bone in your jaw may get damaged.

If your wisdom teeth are impacted but aren't causing problems, taking them out may do more harm than good. But the research on wisdom teeth isn't very good, so it's hard to say for certain what will happen.

- You may never get any symptoms at all. Many impacted wisdom teeth never cause problems.¹

- Your impacted wisdom teeth may eventually emerge normally.¹
- On the other hand, you may get a problem in the future, such as an infection, a cavity or gum disease. Sometimes impacted wisdom teeth can damage nearby teeth and bone.¹⁹

What can I expect after surgery?

If you had a local anaesthetic, your mouth will be numb for a couple of hours after your operation. Once the anaesthetic has worn off, your mouth will feel sore and your jaw may ache. It's often difficult to open your mouth fully at first. Occasionally, this lasts for a couple of weeks.

Any swelling in your cheeks should start to go down within a couple of days. Sometimes, your face and neck will be slightly bruised.

If you had a general anaesthetic, you may be more likely to feel sick or vomit.²⁰

If your mouth starts to bleed, you should sit upright and press a small cloth, such as a handkerchief, over the place where the tooth was removed. Bite firmly on it for five or ten minutes until the bleeding stops. If you can't stop the bleeding yourself, **contact your dentist or the hospital**.

Getting back to normal

The time it takes for you to fully recover depends on how many teeth you had taken out and how difficult the operation was. You'll get back to normal more quickly after a local anaesthetic than after a general anaesthetic.

Most people will feel fine between five days and seven days after their operation.^{21 22} But sometimes it can take up to two weeks.

You'll find it **difficult to eat** at first. For the first few days, avoid hot drinks, alcohol, and hard or chewy foods. Hot food or drink can cause bleeding in your mouth. Leave your soup or cup of tea to cool down before taking a sip.

You're unlikely to get an infection or other problems. But your doctor or dentist might give you a course of antibiotics just in case.²³

Don't use mouthwash for the first 24 hours as it can cause bleeding. But after this you might want to rinse after each meal with salt water. Dissolve a level teaspoon of salt in a glass of warm water. Or you could use an antiseptic mouth rinse. You can get this from your pharmacist.

Usually, surgeons or dentists say that you can drive:

- Straight away if you had a local anaesthetic
- Eight hours after conscious sedation
- A whole day after a general anaesthetic (24 hours from the time of your operation).

You can go back to work or school:

- The day after the operation if you had a local anaesthetic
- One or two days after conscious sedation
- Four or five days after a general anaesthetic.

But you should **wait a week or two** before doing any rigorous exercise. Your blood pressure goes up when you get active. This can make you bleed. So it's a good idea to take it easy at first.

Your stitches will probably take a week to dissolve. You don't need to have them removed.

You should contact your dentist or the hospital if:

- You can't cope with the pain even if you take painkillers
- You're still in a lot of pain after a week
- Your cheeks are still very swollen after a week
- You have numbness in your lower lip or tongue after a few days. This usually goes away by itself within a few days or months. But in rare cases, you'll need another operation to check if any damage has been done to a nerve.

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