



Oral Surgery FAQs

What is Oral Surgery?

Oral and maxillofacial surgery is the specialty of dental practice that deals with the diagnosis and surgical treatment of diseases, injuries and defects of the mouth, jaws, face and related structures. This includes the removal of impacted and decayed teeth, placement of dental implants, biopsy and removal of cysts and tumours of the mouth and jaws, treatment of facial trauma and reconstructive jaw surgery.

What does maxillofacial mean?

Maxillofacial refers to the face and jaws, which along with the mouth comprise the areas of expertise of an oral and maxillofacial surgeon.

What does it mean to have impacted wisdom teeth?

Wisdom teeth are the third set of molars located in the very back of the mouth. They are the last teeth to grow in, usually between the ages of 17 and 21. In many people, wisdom teeth are unable to grow in normally. The teeth either become stuck under the gum or are only able to partially break through the gum. Dentists call these teeth impacted. Wisdom teeth usually become impacted because the jaw doesn't have enough space for all the teeth that are growing in or because the tooth comes in at the wrong angle.

Impacted wisdom teeth are fairly common. Although some people never have any trouble with them, impacted wisdom teeth can cause problems. An impacted wisdom tooth can sometimes trap food, plaque, and other debris in the soft tissue around it, leading to swelling, gum tenderness, and bad breath. Because they may damage other teeth — or cause pain or infection — dentists or oral surgeons sometimes remove impacted wisdom teeth.

Is an impacted wisdom tooth a problem?

It is common to see swelling, infection, pain of the impacted teeth and the gums. Damage commonly extends to the adjacent healthy teeth and the surrounding jawbones. Impacted teeth also develop into cysts, abscess, and tumours that may destroy a great area of one's jawbones.

If I am having a general anaesthetic why must I fast prior to surgery?

Anaesthesia depresses the normal gag reflex that prevents solids and liquid matter from entering our lungs. The process of reflux of material from the stomach into the trachea and lungs is called aspiration. Fortunately, the incidence is quite low. Assuring that the stomach is as empty as possible prior to anaesthesia is a mainstay in aspiration reduction. This has been routinely accomplished by nothing to eat or drink after midnight, the day of surgery.

Is there an alternative to a general anaesthetic?

Yes, you may have your wisdom teeth removed under local anaesthesia by a dentist or oral surgeon. This means you are awake, but the area around the wisdom tooth is completely numb. Sedative drugs can be given with a local anaesthetic to help you relax during the procedure.

What is IV Sedation?

When a drug, usually of the anti-anxiety variety, is administered into the blood system during dental treatment, this is referred to as Intravenous Conscious Sedation (aka "IV sedation"). Conscious sedation is sometimes (incorrectly) referred to as "twilight sleep" or "sleep dentistry". These terms are more descriptive of deep sedation. Deep sedation isn't commonly used, and is more closely related to general anaesthesia.

What does it feel like? Will I be asleep?

A lot of dental offices use terms such as "sleep dentistry" or "twilight sleep" when talking about IV sedation. This is confusing, because it suggests that IV sedation involves being put to sleep. In reality, you remain conscious during IV sedation. You will also be able to understand and respond to requests from your dentist.

However, you may not remember much about what went on because of two factors: firstly, in most people, IV sedation induces a state of deep relaxation and a feeling of not being bothered by what's going on. Secondly, the drugs used for IV sedation can produce either partial or full memory loss (amnesia) for the period of time when the drug first kicks in until it wears off. As a result, time will appear to pass very quickly and you will not recall much, or perhaps even nothing at all, of what happened. So it may, indeed, appear as if you were "asleep" during the procedure.

How is IV sedation administered?

"Intravenous" means that the drug is put into a vein. An extremely thin needle is put into a vein close to the surface of the skin in either the arm or the back of your hand. This needle is wrapped up with a soft plastic tube. The needle makes the entry into the vein, then is slid out leaving the soft plastic tube in place. The drugs are put in through that tube (which is correctly referred to as an "indwelling catheter", but more commonly known by the tradename of Venflon). The tube stays in place throughout the procedure.

Throughout the procedure, your pulse and oxygen levels are measured using a "pulse oximeter". This gadget clips onto a finger or an earlobe and measures pulse and oxygen saturation. It gives a useful early warning sign if you're getting dangerously low on oxygen.

What are some risks of general anaesthesia?

The rate of complications will vary with the health status of the patient and the magnitude of the procedure. The common side effects of general anaesthesia include nausea, muscle aches and shivering postoperatively. The most severe complication, death is very rare.

How am I monitored?

The monitors we use under general anaesthesia depend on both the type of operation and the patient's medical condition. The minimal monitors under general anaesthesia include: blood pressure, EKG, heart rate, temperature, stethoscope and two monitors of breathing. The pulse oximeter (placed on the fingertips) measures the oxygen saturation of

haemoglobin (oxygen carrier) in your blood. This monitor has markedly improved the safety of anaesthesia.

What should I do after my oral surgery (e.g. dental extraction or implant surgery)?

Right after the procedure, you are supposed to bite onto the gauze over the surgical site for one hour. Even though the bleeding has stopped when you are discharged, it is normal to taste blood.

Do not spit out, rinse your mouth or brush your teeth for 24 hours. Swallow your saliva instead. Rinsing your mouth and spitting out may dislodge the blood clot and bleeding may start again.

The surgical site usually stays numb for approximately two hours. Food and hot drinks should not be consumed until the sensation has recovered. After that, eat over the normal, un-treated area. It is crucial to take all the medication as prescribed and keep your follow-up appointment to ensure uneventful healing.

Would I be out of action after the procedure?

Most patients will feel drowsy and tired for a few hours after the procedure. The area around the extraction will be sore for approximately 5 days and you may notice some swelling, this is normal. We recommend that you take an anti-inflammatory and some pain relief until symptoms subside. Your surgeon will discuss aftercare with you and recommend some medication. On rare occasions patients may acquire an infection in the cavity left behind by the extraction, this can become painful but is easily treated with antibiotics. Should this occur please contact the surgery for an appointment.