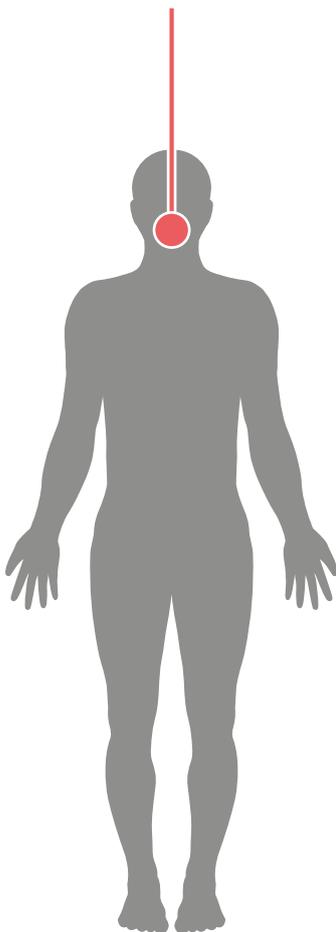


Get Well Soon

Helping you to make a speedy recovery after removal of wisdom teeth

Wisdom teeth extraction



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This leaflet is a guide to recovering from an operation to remove one or more wisdom teeth. It does not provide specific medical advice or diagnosis. Nor does it give advice about whether you should consent to an operation. All of these matters depend on individual medical advice from your consultant surgeon based on your own health, medical condition, and personal circumstances.

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Who this leaflet is for

Print instructions:

To print this document click once on the print icon in your Acrobat Browser, or go to File, then Print on the drop down menu.

To print only one page, select the page number you want in your print menu, usually under 'options' or 'preferences' depending on the printer type.

To save ink, select the 'draft' option.

This leaflet is for anyone who is recovering from, or is about to undergo, surgery to remove one or more wisdom teeth. It should be read in conjunction with any other information you have been given about your procedure.

You may need to have your wisdom teeth out if you have been experiencing repeated attacks of infection in the gums surrounding those teeth or other problems (specific guidelines are available from the National Institute of Clinical Excellence – <http://guidance.nice.org.uk/TA1>).

The technical term for your operation is surgical removal of mandibular and/or maxillary third molars, which is how your surgeon and other health professionals who are helping you may refer to it.

Obviously, every individual has different needs and recovers in different ways – so not all of the advice in this leaflet will be suitable for everybody. When you are weighing up how to make the decisions that are right for you, talk with your occupational health service at work, if you have one, otherwise, speak with your dental surgeon. Either will help you make the right choices for a safe and speedy recovery.

Wisdom teeth are generally removed on a day-case basis, so you should usually be able to go home on the same day. Your surgery may take place under local anaesthetic (an injection similar to that used for dental fillings), which will permit a simple appointment that you can attend alone.

If the surgery is more difficult, and/or you are anxious, you may be prescribed conscious sedation using a sedative drug that will relax you and prevent you from remembering the surgery. Alternatively, if you have several difficult teeth to remove, the surgeon may prescribe a day-stay general anaesthetic. These last two techniques require that you attend your appointment with an escort who should oversee your recovery for the following 48 hours. In these cases, you should avoid looking after children or dependants, driving or using machinery, and reviewing or signing legal documents, for 48 hours.

The advice in this leaflet offers broad guidelines for people who do not have any complications with their surgery or other specific medical circumstances, such as a relevant long-term condition. It is designed to help you make decisions about your recovery. Your surgeon, general practitioner (GP), and other healthcare professionals will offer you advice – but ultimately, it's you that has to make the decisions.

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What to expect after the operation

It is very important that you maintain good oral hygiene and brush your teeth as usual as best you can, gradually brushing nearer to the wound day by day, eventually brushing away the stitches after several days. You may be recommended to use an antimicrobial mouthwash, and often you will be prescribed salt-water rinses to help with wound healing; do this gently on the first postoperative day to avoid dislodging the clots that will have formed over the wounds.

Recovery after wisdom tooth surgery is generally quite straightforward, but you are likely to experience pain and swelling, particularly in the first 2 days. Rarely, complications can occur, such as poor healing of the tooth socket or nerve injury. If you have had adult intravenous sedation or a general anaesthetic, you will require someone to escort you to and from surgery, and it is important to take it easy for a day or two after the operation.

Pain

You are likely to experience pain for the first 48 hours, although your mouth may well be sore for up to a week or so after the operation. Local anaesthetic injections given during the procedure ensure that you have no pain for the first 3–4 hours after surgery, but once the anaesthetic wears off, you need to take the painkillers given to you. You should take these regularly to ensure that you sleep well on the first night; this will maximise your recovery. You will normally be prescribed paracetamol and ibuprofen; when these two drugs are taken together, they enhance the effect of each other because they work in different ways. Be sure to follow the directions given to you by your surgeon or the pharmacist. Some patients may not be able to take these medications due to medical problems, but in these cases, alternatives will be provided.

The area around the extraction sites will be

sore and you may find it difficult to clean your teeth. Follow the instructions for good oral hygiene in this leaflet as this is very important to minimise the risk of infection. Antibiotics will only be prescribed if there is active ongoing infection.

Swelling

Swelling, particularly in the cheek area, both inside and outside the mouth, is common. Again, it is worst for the first 2 days, after which it will gradually subside; it can be relieved by using ice packs, starting shortly after surgery. Bruising to the skin of the face may also occur.

Jaw stiffness

You may have difficulty opening your mouth and experience pain or stiffness of the jaw joint. This will normally disappear after a couple of days, but can occasionally last for up to 2 weeks. You may need to eat a soft diet for a week or so.

Be careful not to force your jaw open before it is ready and do allow time for the swelling to go down. Ibuprofen will help to relieve this pain.

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What to expect after the operation

Teeth sensitivity

Sensitivity of the teeth next to the wisdom tooth socket is common. Good oral hygiene will resolve this, although it may last for several weeks.

Bad breath

You may experience bad breath; this is unlikely to last more than a week.

Stitches

Stitches will dissolve by themselves and so do not need removing, but it is important that 3–4 days after surgery you start brushing the sutures away to minimise food trapping.

When the tooth is removed the roots leave a 'socket' in the bone. This hole in the gum may last for up to 3 months. As your wound heals, blood clots form over the empty tooth sockets; it is important not to dislodge these.

Bleeding

If later bleeding occurs from the extraction site, you will need to bite on a cotton gauze or handkerchief for 3–5 minutes to stop it. Avoid drinking or eating food that is hot or very cold as this may restart bleeding.

Follow-up appointments are not usually booked after wisdom tooth surgery. However, if you have complications, or your bleeding does not stop, you should contact your surgeon.

Tiredness

Your body is using energy to heal itself, so you may feel more tired than normal – this is perfectly normal.

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What to expect after the operation

Exercise and sport

It is important to avoid strenuous activity and exercise for the first few days. While you're building up your activities, you probably won't feel like doing much, but walking is the best way to return to fitness. If you play rugby or do martial arts, you should discuss returning to these activities with your surgeon, before the operation.

Complications

Dry socket happens in 5–10% of patients; it presents as intense and persistent pain occurring 3–5 days after the initial pain has subsided. If this occurs, it is important that you contact your surgeon as soon as possible, who will wash out the socket and remove the trapped debris that is causing the pain.

Nerve injury is far less common and is normally caused by bruising of the nerve(s) that lie very close to the roots of the lower wisdom teeth. Rarely, it can be caused by the injections given during surgery. Nerve injury occurs in up to 2% of patients and is generally temporary, but it can be permanent in 0.5% (1 in 200) of patients.

Nerve injury can cause pain, tingling, altered sensation (pins and needles), or numbness, and may occur to the inferior alveolar nerve (the sensory nerve supplying your lower lip, inside and outside, and your lower gums and teeth) or lingual nerve (the nerve that supplies feeling to one or other side of your tongue and adjacent gums).

If your lower wisdom tooth is positioned close to the 'lip' nerve, you will be advised that the likelihood of nerve injury is more common (20% of patients are likely to experience temporary injury and 2% permanent injury). If this is the case, you may need an additional special X-ray investigation (cone beam CT scan) and be offered a different surgical approach to minimise the injury (coronectomy).

Damage to adjacent teeth may also occur if they are heavily restored.

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Things that will help you recover more quickly

Pain relief

Once the local anaesthetic starts to wear off, start to take your painkillers – take these as prescribed to maximise your first night's sleep after surgery..

Good oral hygiene

It is very important that you maintain good oral hygiene and brush your teeth as usual as best you can, gradually brushing nearer the wound day by day, eventually brushing away the stitches after several days. You may be recommended to use an antimicrobial mouthwash, and often you will be prescribed salt-water rinses to help with wound healing; do this gently on the first day after your operation to avoid dislodging the clots that will have formed over the wounds. Gentle rinsing will also help keep the extraction site free from food debris.

Eat healthily

Avoid food and drink altogether for the first 6 hours or so after the operation.

Fresh fruit and vegetables will help to ensure that your body has all of the nutrients it needs to heal. This is important even though you may not feel like eating. Eat soft or liquid foods for the first few days and once you get onto more solid foods, chew with your other teeth for the first few days. Avoid alcohol and very hot or very cold drinks.

Stop smoking

By not smoking – even if it's just for the time that you're recovering – you immediately start to improve your circulation and your breathing, not to mention a whole list of other benefits to the heart and lungs. This is a good time to give up, as you often don't feel like smoking for a week or two after surgery!

Family and friends

Family and friends can give you two important things:

- Practical help with the tasks you might temporarily be unable to do in the first day or so – such as driving or looking after dependants.
- Keeping your spirits up!

Keep a routine

Get up at your normal time in the morning, get dressed, move about the house. If you get tired, you can rest later.

Build up gradually

Have a go at doing some of the things you'd normally do, but build up gradually. If you feel tired or are in pain, you have probably just overdone things a little, so slow down. If you are concerned, consult your dentist or surgeon.

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Returning to work

You do not need your GP's permission to go back to work – this is ultimately your decision.

Fact: Work can be part of your recovery

Everyone needs time off to recover after an operation – but too much of it can stand in the way of you getting back to normal. Getting back to your normal routine sooner rather than later can actually help you to recover more quickly.

Getting back to work

How quickly you return to work depends on a number of things:

- How you heal
- How you respond to surgery
- Whether you have had a local anaesthetic, conscious sedation or a general anaesthetic
- The type of job you do.

How soon can I go back?

Every person recovers differently and has different needs. Removal of wisdom teeth is a relatively minor procedure and most individuals who are doing administrative roles will normally be back at work 1–3 days after the surgery.

Many people take 2 days off work, including the day of the operation, whilst others take 3 days, particularly if they have had several teeth removed at the same time, and/or had a general anaesthetic.

People whose work involves heavy physical activity, or work that is more physically demanding, should take it easy for 3–4 days after the operation before resuming physically demanding tasks.

Contact sports or roles involving control and restraint should be avoided for a little longer, but are best discussed with your surgeon.

If your employer has an occupational health nurse or doctor, they will advise you; alternatively, your GP can do so, but ultimately, it's your decision about when you return to work.

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Planning for your return

3 golden rules for a speedy recovery:

Stay active.

Keep a normal daily routine.

Keep social contact with people.

Most people who have wisdom tooth surgery will be off work for anywhere between 1 and 3 days, including the day of surgery. Talk with your Occupational Health Service and work out when and how are best for you to return to work.

If you have an HR Department at work, they will be able to advise you regarding sick pay or any other benefit you may be entitled to during your time off. Alternatively, talk directly with your employer.

If you have a physically demanding job, you might just want to ask your employer about returning to work on lighter duties over the first few days. This might mean:

- Spending more time sitting rather than standing
- Doing work that is mostly paperwork, using a computer or telephone
- Avoiding tasks such as prolonged loading or unloading, packing or unpacking.

Confidence

It will take you a little while to regain your full confidence when you go back to work. You may be slower than normal at first, so don't take on too much responsibility too soon. Don't be too hard on yourself about this - it's perfectly normal and you'll start to get back up to speed after a few days.

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Driving

Ultimately, it is your responsibility to ensure that you are in control of the vehicle at all times and to feel confident that you would be able to demonstrate this if asked.

Normally, you may want to wait a couple of days before you drive; you will usually be fit to drive 24 hours after the operation if you have had intravenous sedation, or 48 hours after if you have had a general anaesthetic.

Before resuming driving, you will need to be fully recovered from your surgical procedure. You should also be free from the distracting effect of pain or the sedative or other effects of any pain-relief medication you are taking, and be able to concentrate fully on driving. You should be comfortable in the driving position and able to safely control your car, including freely performing an emergency stop.

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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
1–2 days	Your mouth will feel sore, and fatter than it did before the operation. This is normal and you shouldn't worry about it. If you would like to, monitor your progress using the recovery diary.	<ul style="list-style-type: none"> • Get up, get dressed, move around the house. • Eat soft or liquid foods and avoid alcohol and very hot or very cold drinks. • Go for a short walk in the morning, then go home and rest; take another longer walk later in the day; this will help to avoid stiffness of the muscles and joints. • If you feel tired, rest for a while, then try moving around again later. • Take regular sips of water to prevent dry mouth and throat. • Take pain relief only as prescribed by your doctor. 		No/getting there

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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
3 + days	<ul style="list-style-type: none"> For about a week your mouth will still feel a little sore and your back teeth may be more sensitive to cold than before the operation. Avoid hard physical exercise for the first few days. 	<ul style="list-style-type: none"> Continue as for days 1–2; have a go at some of the things you would normally do. Start eating more solid foods but chew with your other teeth for the first few days. You should now be able to walk as much as you like, and you could even try a short gentle jog. You may still occasionally need to take mild pain relief at this time. Try to avoid crowds and people with colds. 		Getting there/yes
1–2 weeks	You should be able to return to normal sports by the end of the first week, but follow the advice from your surgeon before resuming sports such as rugby and martial arts.			

Keeping a track of what you've achieved each day will help you to stay positive and get back to enjoying your normal life more quickly.

Remember, take a step-by-step approach to getting better, and build up your activities in small stages. Don't push yourself too far too fast. If you're concerned about anything, or if you feel you're not making progress fast enough, ask your surgeon or call your GP.

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Recovery tracker

Day	Got up at ... am	Activities (went for walks, mouthwash/teeth brushing)	How have I been feeling? Any pain/swelling?	Went to bed at ... pm
1				
2				
3				
4				
5				
6				
7				

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Recovery tracker

Day	Got up at ... am	Activities (went for walks, mouthwash/teeth brushing)	How have I been feeling? Any pain/swelling?	Went to bed at ... pm
8				
9				
10				
11				
12				
13				
14				

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Website links

The internet's a great thing – anything you want to know is there for you at the click of a mouse, but do be careful about the way you use it when it comes to getting information about your health. It's hard to know which sites to trust and none of them can tell you anything that's specific to your individual medical needs.

If you do want to know more about your operation, recovery or return to work, here is a list of trusted websites that offer safe, sensible, useful information:

[Royal College of Surgeons of England](http://www.rcseng.ac.uk/)
<http://www.rcseng.ac.uk/>

[British Association of Oral Surgeons](http://www.baos.org.uk/)
<http://www.baos.org.uk/>

[NHS Stop Smoking Service](http://smokefree.nhs.uk/)
<http://smokefree.nhs.uk/>

[NHS Choices](http://www.nhs.uk/Pages/Homepage.aspx)
<http://www.nhs.uk/Pages/Homepage.aspx>

[Department for Work and Pensions](https://www.gov.uk/government/organisations/department-for-work-pensions)
<https://www.gov.uk/government/organisations/department-for-work-pensions>

[GOV.UK](https://www.gov.uk/)
<https://www.gov.uk/>

[DVLA - Driver and Vehicle Licensing Agency](https://www.gov.uk/browse/driving/disability-health-condition)
<https://www.gov.uk/browse/driving/disability-health-condition>

Call 111 for nonemergency medical advice