



Tooth Extraction

What Is It?

Tooth extraction is the removal of a tooth from its socket in the bone.

What It's Used For

If a tooth has been damaged by decay or a fracture, your dentist will try to repair it and restore it with a filling, crown, or other treatment. Sometimes, though, the damage is too extensive for the tooth to be repaired. This is the most common reason for extracting a tooth.

Here are other reasons for extraction:

1. Some people have extra teeth that block other teeth from coming in.
2. People undergoing orthodontic work may need teeth extracted to create room for the teeth that are being moved into place.
3. People receiving radiation to the head and neck may need to have teeth in the field of radiation extracted.
4. People receiving chemotherapy may develop infected teeth because chemotherapy weakens the immune system, increasing the risk of infection. These teeth may need to be extracted.
5. People receiving an organ transplant may need some teeth extracted if the teeth are at risk of becoming sources of infection after the transplant, when immunosuppressive medications are given.

Wisdom teeth, also called third molars, often are extracted either before or after they come in. They commonly come in during your late teen years or early twenties. Impacted teeth get stuck in the jaw and often need to be removed if they are decayed or cause pain. A wisdom tooth that has emerged partially may be blocked by other teeth or may not have enough room to come in completely. This can irritate the gum, causing pain and swelling, which requires the tooth to be removed.

Preparation

1. Your dentist or oral surgeon will ask about your medical and dental histories. He or she will take an X-ray of the area to help plan the best way to remove the tooth. If you are having all of your wisdom teeth removed, you may have a panoramic X-ray, which takes a picture of all of your teeth at once. This type of X-ray shows the relationship of your wisdom teeth to your other teeth, as well as the upper teeth's relationship to your sinuses and the lower teeth's relationship to the inferior alveolar nerve, which provides sensation to your lower jaw, lower teeth, lower lip and chin.
2. Some health care professionals prescribe antibiotics to be taken before and after surgery, but this varies by the dentist or oral surgeon. Antibiotics are more likely to be given to people with infection at the time of surgery or with weakened immune systems, those who will be undergoing longer surgeries, or very young or elderly people.
3. If you're going to have conscious sedation or deeper anesthesia, wear clothing that has short sleeves or will allow you to roll the sleeves up easily so that an intravenous (IV) line can be placed in a vein. You will be told not to eat or drink anything for six hours before the procedure. You should also make sure you have someone available to drive you home.

How It's Done

There are two types of extractions:

1. A simple extraction is performed on a tooth that can be seen in the mouth. General dentists commonly do simple extractions, and most can be done under a local anesthetic, with or without anti-anxiety drugs. In a simple extraction, the dentist will grasp the tooth with forceps and move the forceps back and forth to loosen the tooth before removing it. Sometimes, an instrument called a luxator, which fits between the tooth and the gum, is used to help loosen the tooth.
2. A surgical extraction involves teeth that cannot be seen easily in the mouth, either because they have broken off at the gum line or because they have not come in yet. Another reason for a surgical extraction is that for the tooth to be removed requires a flap be cut in the gum for access to remove bone or a section of the tooth. Oral surgeons commonly do surgical extractions. They can be done with local anesthesia or conscious sedation. Patients with special medical conditions and young children may be given general anesthesia. In a surgical extraction, the dentist will need to make an incision in your gum to reach the tooth. In some cases, the tooth will need to be broken into sections to be removed.

If you are having teeth extracted and are receiving conscious sedation, you may be given steroids in your IV line to help reduce postoperative swelling.

If you need all four wisdom teeth removed, they usually are taken out at the same time. The top teeth usually are easier to remove than the lower ones.

Here are the types of wisdom teeth in order from easiest to remove to most complex to remove:

1. Erupted (already in the mouth)
2. Soft-tissue impacted (just under the gum)
3. Partial-bony impacted (partially stuck in the jaw)
4. Full-bony impacted (completely stuck in the jaw)

Also, if your wisdom teeth are tilted sideways, they can be harder to remove than if they are vertical.

Follow-Up

Most simple extractions do not cause much discomfort after the procedure. You may take an over-the-counter non-steroidal anti-inflammatory drug (NSAID) such as ibuprofen (Advil, Motrin and other brand names) for several days, or you may not need any pain medication.

Because surgical extractions are more complicated, they generally cause more pain after the procedure. The level of discomfort and how long you have discomfort depend on the difficulty of the extraction. Your dentist may prescribe a prescription pain medication for a few days and then suggest an NSAID. Most post surgical pain disappears after a couple of days.

A cut in the mouth tends to bleed more than a cut on the skin because the incision cannot dry out and form a scab. So after an extraction, you'll be asked to bite on a piece of gauze for about 20 to 30 minutes to put pressure on the area and allow the blood to clot. The area may still bleed minimally for the next 24 hours or so and taper off after that. Don't disturb the clot that forms on the wound.

You can put ice packs on your face to reduce postoperative swelling. If your jaw is sore and stiff after the swelling dissipates, try warm compresses. Eat soft foods for a few days then try other food, as you feel comfortable. Rinse with warm salt water (1/2 teaspoon of salt in a cup of water) for the first few days to help keep the area clean. Most swelling and bleeding ends within one or two days of the surgery. Overall healing takes between one and two weeks.

If the extraction needs to be closed with stitches, the stitches are usually dissolvable and should disappear in one to two weeks. Rinsing with warm salt water will help the stitches to dissolve.

You should not smoke, use a straw, or spit after surgery. These actions can pull the blood clot out of the hole where the tooth was. That causes more bleeding and can lead to a dry socket, which occurs in about 5% of all extractions. It is most common when lower back teeth are removed and happens more often in smokers and women who take birth control pills.

Risks

Infection can set in after an extraction, although you probably won't get an infection if you have a healthy immune system. A common complication called a dry socket occurs when a blood clot doesn't form in the hole or the blood clot prematurely breaks off or breaks down. In a dry socket, the underlying bone is exposed to air and food. This can be very painful and can cause a bad odor or taste. A dry socket needs to be treated with a medicated dressing to stop the pain and encourage the area to heal. Other potential complications include:

- Accidental damage to adjacent teeth, such as fracture.
- An incomplete extraction, in which a tooth root remains in the jaw. Your dentist usually removes the root to prevent infection, but occasionally it is less risky to leave a small root tip in place.
- A fractured jaw (a risk most often encountered in older people with osteoporosis of the jaw) caused by the pressure put on the jaw during extraction.
- A hole in the sinus during removal of an upper molar. A small hole will usually close up by itself in a few weeks but may require additional surgery if it doesn't heal spontaneously.
- Sustained numbness in the lower lip and chin, caused by trauma to the inferior alveolar nerve (during removal of the lower wisdom teeth). Complete healing of the nerve may take three to six months. In rare cases, the numbness, although not disfiguring, may be permanent.

When To Call a Professional

Call your dentist or oral surgeon if the swelling gets worse instead of better, or you experience fever, chills or redness in the area. If you have an infection, your dentist usually will prescribe antibiotics. Also call your dentist or oral surgeon if the area of the extraction becomes very painful, a sign that you may have a dry socket. If the area continues to bleed after the first 24 hours, notify your oral surgeon.