WISDOM TEETH

WHAT ARE WISDOM TEETH?

Wisdom teeth, officially referred to as third molars, are usually the last teeth to develop and are located in the back part of your mouth. They usually complete development between the ages of 15 to 20.

WHAT ARE IMPACTED **WISDOM TEETH?**

Since the wisdom teeth are the last to develop, they usually do not have enough room to adequately erupt into the mouth and become fully functional. This lack of room or space can result in a number of harmful effects on your overall dental and medical health. When this occurs, they are said to be impacted, indicating their inability to erupt into a position which will allow them to function in the chewing process. A special x-ray of your mouth and jaws will be taken to determine if your wisdom teeth are impacted.

WHY SHOULD I HAVE IMPACTED TEETH REMOVED?

If you do not have enough room in your mouth for your third molars to erupt and they are impacted, a number of problems may occur including: infection, damage to adjacent teeth and cyst formation.

Unless you have an active problem at the time of your consultation, the reason for removal is primarily preventative to avoid long-term problems, which may increase in severity and risk as you age.

WHAT IS THE BEST AGE TO HAVE THEM REMOVED?

If it is recognized that you do not have enough room in your mouth for your third molars to erupt, it is usually advisable to have them removed at your earliest convenience, to avoid the risks noted above.

In some patients this can be as early as 14, while in others it may not be until 17 to 18 years of age. The timing is largely dependent on your root development. Teeth with shorter, less developed roots are generally easier to remove. Younger patients will usually experience:

- · Faster healing
- More predictable final healing
- Fewer complications than an older patient



WHAT IF I DON'T HAVE THEM REMOVED IN MY **TEENAGE YEARS?**

If you do not have your impacted wisdom teeth removed in your teenage years or early twenties, more extensive problems may arise later in life. When it is necessary to remove impacted wisdom teeth in your thirties, forties, or beyond, the postoperative course can be prolonged and there is a higher complication rate. Treating these complications is more difficult and

less predictable than with a younger patient.

WHAT HAPPENS ON THE DAY MY WISDOM TEETH ARE REMOVED?

Unless otherwise instructed, expect to be in the office for a little over an hour. Return home for a soft meal, pain medication, ice, and rest.

Our surgeon will recommend a variety of options to help make patients more comfortable before, during, and after surgery. We provide sophisticated, safe, and effective anesthesia services, including intravenous sedation.

Plan to spend the rest of the day following your surgery at home with a responsible adult available to help, should the need arise. You will be given appropriate medications to make your postoperative course as comfortable as possible. We will provide specific verbal and written postoperative instructions.

WHAT HAPPENS AFTERWARD -**HOW WILL I FEEL?**

Each individual's reaction to surgery varies, typically ranging from mild to moderate discomfort. You can expect approximately five to seven days of some discomfort before noting improvement. Facial swelling may be present for several days following surgery. You will be given instructions to minimize this discomfort and swelling. You may also experience stiffness in your jaw muscles, chafing around the corners of your lips, facial bruising, and a small amount of oozing from the extraction sites. Most patients feel they are "over the hump" in 3 to 5 days.

Having your wisdom teeth removed can be a stressful event. Our incredible oral surgery team will ensure that you have the best experience possible.



EXPOSURE AND BRACKETING

In most cases, there is normal eruption of adult or secondary teeth, when primary teeth (baby teeth) are lost. Occasionally, an adult tooth has insufficient room to erupt into the mouth or may format an angle that does not allow it to erupt properly. When this occurs, the tooth is said to be impacted. Of these teeth, the most common are the upper canines ("eye teeth"). To save these teeth and bring them into a normal position in the mouth, we can work in conjunction with your orthodontist to expose the teeth and slowly guide them into position.

This procedure is done by making a small incision to uncover the impacted tooth, and an orthodontic bracket is then bonded to the tooth with a gold or elastic chain attached. On occasion, a temporary anchorage device is also placed to facilitate the movement of the tooth. The orthodontist will attach the chair to the existing orthodontic wire and will intermittently tighten it to guide the impacted tooth into the mouth. Recovery from this procedure is usually uneventful with mild discomfort and swelling.

Typically we request that a Cone Beam Dental CAT Scan and 3D digital models be done to evaluate the position of the impacted tooth for surgical access. These images are shared with your orthodontist to help assist in obtaining an optimal result for you.



