

## Wisdom Teeth Removal – Who, Why, When, and Where

Summertime is a great time for many things, even taking out wisdom teeth. This summer is no exception as a number of young people have left my office, and the offices of other dentists who do this type of surgery, minus their third molars (wisdom teeth). Not every young person needs their wisdom teeth out though, so let's talk about it.

Very few people have room to get their wisdom teeth into their mouths in normal position, if at all. A tooth that is blocked from coming in all the way is "impacted" and this happens very frequently, especially on lower wisdom teeth.

Impacted wisdom teeth can cause a number of problems. The most common are gum infections around the top of the teeth that can become major at times. Other problems include damage to the teeth in front of them, cavities in the wisdom tooth or on the adjacent tooth where the wisdom tooth touches it, and cyst formation. The cysts that can form around impacted teeth can be quite damaging to the jaw bone and on rare occasions can turn cancerous.

When a dentist or oral surgeon evaluates a patient's wisdom teeth, he or she is looking at several things. Have the teeth caused problems already or are they likely to cause problems in the future? Are there any anatomic factors which would cause significant difficulty or risk surgically? Are there health concerns which would affect the surgery or anesthesia?

Incidentally, people who have had no problems with pain or swelling around wisdom teeth by their mid-twenties usually don't need to have them out. They just need them x-rayed every few years to make sure they are not doing any "silent" damage.

The best time to look at wisdom teeth is about 15 to 17 years old. At this age, it is fairly easy to assess future risk wisdom tooth problems. It's also the age at which wisdom teeth can be removed with the least chance of complications. At this age, the roots are still immature. This means they are much shorter, easier to remove, and less likely to wrapped around the nerve bundle going to the lip. If you have a child this age, be sure and ask your dentist about their wisdom teeth.

Local anesthesia ("Novacaine") is used to get the wisdom tooth areas numb, but most people having dental surgery done will also want their consciousness altered in one way or another. Most oral surgeons will use either IV deep sedation or an office general anesthesia (unconscious). Most general dentists who do this type of surgery utilize oral conscious sedation.

Oral conscious sedation entails taking some preoperative medications by mouth (pills) that significantly sedate the patient, but the patient is not sleeping. Nitrous oxide (laughing gas) is often used in conjunction with the pills to achieve the level of sedation needed. I tell patients that they won't be asleep, but they won't much care what's happening, and when done they likely won't remember it either.

So who needs to see the oral surgeon (and incidentally we have some very good ones in the Permian Basin). If the wisdom teeth will be particularly difficult or tricky to remove, if the patient is highly fearful, or if the patient has significant medical issues, they really need to see the specialist. If the patient or parent just want to see the specialist, that is a perfectly good reason also.

If you think your teenager may need their wisdom teeth out, and if you want to do it before school starts, schedule an evaluation appointment quickly because summer is passing in a hurry. They can expect to be sore and swollen for several days after the surgery.

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