

Patient information

Periodontal (Gum) Surgery and Aftercare

Liverpool University Dental Hospital

The overall treatment of your gum condition may involve the use of surgical techniques.

What are the benefits of periodontal surgery?

- Periodontal (gum) surgery helps to control gum disease (Periodontitis) and keep your teeth for as long as possible by allowing access for removal of deposits from the root surface along with reshaping of the gums for easier daily cleaning.
- It may also help with regeneration of lost tissue, treatment of receding gums or removal of excess gum tissue.

What are the risks of periodontal surgery?

You may experience the following:

- Immediately after surgery - pain, swelling, bleeding, appearance / irritation of stitches and a dressing. Sometimes increased loosening of the tooth.
- In the long-term: shrinkage of gums and tooth sensitivity.

What will happen if I don't have any surgical treatment?

Continued progression of periodontal disease, although this can be slowed down by regular treatment by the hygienist or dentist, whilst you maintain good oral hygiene.

What anaesthetic will I be given?

A drug in solution form will be injected into the area to be treated so it goes numb, like you would have for a dental filling.

Like all medicines, these locally applied anaesthetics may sometimes cause side effects. You may experience dizziness, blurred vision, drowsiness and occasionally loss of consciousness.

Serious side effects are rare, and include fits, low blood pressure, slowed breathing and changes in heartbeat, which may be life-threatening. If you have any concerns about any of these effects please discuss them with the Consultant planning your surgery or a member of their team.

What happens during surgery?

During surgery the gum is peeled back from the roots of the teeth to allow access to the affected area. Some surgical procedures aim to alter the level of gum slightly to allow you to clean roots that were previously covered by diseased gum. Sutures (stitches) are used to hold the gum in place and a protective dressing may be moulded over the area.

After the procedure you will be able to go home unaccompanied but many patients prefer to bring a friend or relative on the first occasion.

What should I expect after surgery?

When front teeth are treated the dressing is likely to be visible when talking and smiling.

Some discomfort, lasting for two to three days, is not unusual. This may be accompanied by slight swelling, often more noticeable the day after surgery and lasting for two to three days before gradually subsiding. There may be a small amount of bleeding from the surgical site for the first day and occasionally some facial bruising.

Initially, after surgery, exposed root surfaces may be sensitive to hot or cold food and drinks and tooth brushing. This effect is generally short-lived but, if persistent, it can be treated by the application of desensitising agents and the use of desensitising toothpastes. When surgery is necessary around upper front teeth, some gum recession is unavoidable and hence the teeth may look longer.

Looseness of teeth, which may have been present before surgery as a result of lost bone support from periodontal disease, may increase somewhat immediately after surgery. With complete healing over several weeks, however, looseness generally decreases and teeth often become firmer than before treatment started.

The long-term success of surgery is dependent on your ability to reduce the amount of dental plaque in your mouth. For this reason, surgery will only be recommended if you have already shown that you are able to clean your teeth to a very high standard. It is important to understand that you must keep up this level of cleaning after surgery to prevent /delay recurrence of gum disease as your underlying susceptibility to gum disease remains unaltered.

General Advice after Surgery

- Do not eat or drink until the local anaesthetic has completely worn off, particularly if your lip and tongue were numb during the procedure.
- Do not mouth rinse, spit out or brush your teeth for first 24 hours.
- Eat a soft diet on the side opposite to the surgical site to avoid dislodging the dressing. Avoid licking or any other disturbance to the area of surgery.
- To relieve discomfort, you may be given two 500mg paracetamol tablets after the procedure. Take further tablets as necessary but do not exceed eight tablets in 24 hours (adult dose is two tablets every four to six hours).
- If antibiotics have been prescribed, take them as directed on the label of the container until the course has been completed.
- Avoid strenuous physical exercise and alcohol for 24-48 hours after surgery, as bleeding may start again.

Starting the day after surgery

- Continue the usual routine of tooth cleaning in the non-affected areas of your mouth, but avoid the area of the surgical dressing.
- Use the chlorhexidine mouthwash provided as instructed on the bottle.
- Use warm salt-water mouth baths (one teaspoonful of table salt in half a glass of water) for five days.

You should seek help if:

- Excessive bleeding occurs from under the dressing, which cannot be controlled after 30 minutes by applying local pressure with the gauze pack provided.
- You experience a lot of pain or swelling or you are worried that healing is not progressing normally.
- The dressing falls off within two days of surgery.

Mondays to Fridays, 9:00 am to 5.00 pm: please contact the Department of Restorative Dentistry at the Dental Hospital

Tel: 0151-706 2000, extension 5052.

Text phone number: 18001 0151 706 2000, extension 5052.

If you experience any urgent postoperative difficulty on a Saturday, Sunday or after 5.00 pm on a week day, please contact the NHS helpline by telephoning 111.

Depending on your situation, the NHS 111 team can connect you to a nurse, emergency dentist or even a GP and can arrange face-to-face appointments if they think you need one.

Further Appointments

A week or two after surgery the dressing and stitches will be removed to check healing. Occasionally another dressing for a further week may be needed.

You will be given instruction for homecare: Gentle but thorough tooth brushing, supplemented by soft bristle brushes to clean between the teeth for the first week and followed by your individual home care program thereafter.

Continued use of chlorhexidine mouthwash may also be advised to further reduce the build-up of dental plaque at this important stage of healing.

Other visits will be necessary to check the progress of healing, your plaque levels and to provide further periodontal care. At these visits your gum condition will be carefully monitored and further treatment advised as necessary.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

Department of Restorative Dentistry, Liverpool University Dental Hospital

Tel: 0151 706 2000, extension 5052.

Text phone number: 18001 0151 706 2000, extension 5052.

NHS 111 Service

Tel: 111

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