

## Patient information

# Uncovering (Exposure) of Impacted (Buried) Upper Canine Teeth

### Liverpool University Dental Hospital

This leaflet contains information about your operation and provides some answers to questions you may have about the treatment options available.

#### **What is the problem?**

The canine or eye tooth normally erupts into the mouth between the ages of 11 and 13. Sometimes, one or both canines develop in the wrong position. Often, they lie across the roof of the mouth behind the front teeth.

#### **Why is treatment required?**

One or both of your canine teeth is in the wrong position, so it is necessary to help move the tooth into the right position. If left, these teeth can cause problems to the other front teeth and interfere with orthodontic treatment of your teeth.

#### **Can I have the treatment under local or general anaesthetic?**

Sometimes it is more comfortable to have the procedure completed under general anaesthetic (asleep), especially if you have never had dental treatment before.

If your tooth is just beneath your gum, it might be possible to have the treatment with local anaesthetic injections into your gum.

You can discuss this in more detail with your dental surgeon.

#### **What does the treatment involve?**

Firstly, you will have some X-rays taken to locate the tooth. This will allow your orthodontist to plan what treatment is required and help the oral surgeons plan their procedure.

Helping move the tooth into the correct position involves a minor surgical procedure. This may be carried out under local anaesthetic (injection in the gum) sometimes with sedation, or a general anaesthetic (put to sleep). Neither require a stay in hospital.

## **Generally one of the following is completed:**

- 1) If the buried tooth is sitting near the lip, the gum can be moved up and re-positioned, being stitched higher up to leave part of the tooth uncovered. Sometimes thin bone is sitting over the tooth, and this will be removed at the same time. The stitches are dissolvable and take around two weeks to disappear.
- 2) If the tooth is in the roof of the mouth, then a window is cut in the gum. Bone sitting over the tooth may also need to be removed. Sometimes a small pack is placed in this window to stop the gum from growing over again. This is held in place with either stitches or a plastic cover which clips to the teeth.
- 3) If the tooth is deeper then it may need a chain attached once it has been exposed by a method above. A small gold chain is glued onto the buried tooth with white filling material. The gum is then placed back, and the chain is stitched to the outside gum. Your orthodontist can use the chain to gradually encourage the tooth into the correct position.

## **Are there any alternative treatments available?**

Your orthodontist will discuss with you the possible options for an un-erupted tooth in more detail and advise what is best for you.

## **What are the risks?**

### **Surgery:**

Your buried tooth can sit very close to other teeth and there is a small risk of damaging these teeth during surgery.

The gold chain that is sometimes glued to the tooth can detach. If this happens it is important you contact your orthodontist as soon as possible to arrange for a new chain to be glued on. If this is left too long, it could lead to increased orthodontic treatment time.

If you have a pack placed over the tooth in the roof of your mouth, this can dislodge and fall out. If this happens it is important to contact your orthodontist soon to prevent the gum growing over the tooth again.

### **Anaesthetic:**

Treatment with local anaesthetic injections into the gum is extremely safe and it is rare for people to suffer complications with this. However, like all medicines, local anaesthetics may sometimes cause side effects, as well as the effects that are needed.

Sedation is usually administered through a vein in the hand or arm. This reduces your awareness of the procedure, but you are still awake. It is quite likely you may have very little recall of the procedure. Complications with sedation are rare but may include prolonged dizziness, low blood pressure and slowed breathing. Sedation has to be used in combination with local anaesthetic.

General anaesthetics have some common complications these include sickness, sore throat, shivering, confusion and bruising. More serious complications are rare but do include allergic reaction, waking up during your operation and death.

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

The teeth can remain buried under the gum for many years or even a lifetime. They can, however, damage the roots of the other front teeth or push them out of position.

Occasionally cysts can form around these buried teeth. Your dentist may from time to time X-ray the buried tooth to check it is not causing any problems and decide that no other treatment is needed.

### **What can I expect after the surgery?**

Following surgery, there is usually very little swelling but there will be some discomfort. This is normally relieved by over the counter painkillers such as Paracetamol. It is not usually necessary to take antibiotics.

Before you leave hospital, the team will check you have stopped bleeding. It is normal for a small ooze to continue for 24-48 hours and mixed with saliva this can appear to be a lot.

The team will discuss looking after the area in more detail when you are in hospital.

You can eat and drink when the local anaesthetic wears off and feeling returns to the area. This normally takes around two hours. We suggest soft foods for the first day to avoid any trauma to the area. The area around the gum may bruise and this is normal. Infection is rare but this can be effectively treated with antibiotics.

### **When can I return to school/work?**

This depends on your occupation and how you are feeling after your treatment. Usually, it is necessary to take time off work. This varies from one to five days depending on the difficulty of the operation and the nature of your employment.

If your treatment is completed under general anaesthetic, then it is essential you take the following day off after the operation.

### **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**

**Please contact Liverpool University Dental**

**Hospital Tel: 0151 706 5253/5254**

**Text phone number: 18001 0151 706 5253/5254**

**<http://www.baos.org.uk/Resources.cfm>**

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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