



44 Dental Care

Surgical endodontics or “apicectomy” – answering your questions

This leaflet has been designed to help you understand your treatment and tries to answer commonly asked questions. If you have any other questions please ask the oral surgeon at your appointment.

Why have I been referred?

An infection has occurred at the tip of the root of one of your teeth. Sometimes this doesn't cause any problems but usually people are aware of discomfort and some swelling, gum boils or bad taste. You may well already have been given a course of antibiotics to try to treat the infection.

Why do I need treatment?

If left untreated the infection could develop into an abscess or cyst. As well as causing pain this can lead to the loss of bone surrounding the root. As a result the tooth will become loose.

What does treatment involve?

Your dentist will have already tried to get rid of the infection by removing the nerve of the tooth and placing a root filling. Sometimes, even if the standard root filling has been placed very well, there can be a microscopic leak which means the infection doesn't clear up. One way of dealing with this is to do a surgical procedure called an “apicectomy”. This involves cleaning out the infection from the bone, removing a small portion of the tip of the root of the tooth and then sealing the root with a small filling.

It is necessary to make a small cut in the gum over the root of the tooth and then lift the gum off the bone. The area of infection is uncovered by removing a small amount of bone with a drill. Any infected tissue is thoroughly cleaned away from the tip of the root before a small tip of the root is removed. Then the root is sealed with a small filling. The gum is then stitched back into place with dissolvable stitches that take around two weeks to disappear. The whole procedure will take around 30 minutes from start to finish.

What type of anaesthetic is used?

We will use the same local anaesthetic that you will have had for fillings at your dentist, i.e. an injection into the gum that numbs the area. However, as we need to make sure the gum and tooth is very numb, we will need to give you a little more than normal and on both sides of the tooth. This anaesthetic will prevent you feeling any pain during the procedure.

What can I expect after the operation?

The local anaesthetic will wear off 2-3 hours after surgery. At this point there will be some discomfort which can vary in severity. It is often quite unpredictable how sore it is likely to be, but your oral surgeon will advise you on pain relief. It might also be necessary to take a course of antibiotics. The discomfort is usually worse for the first few days although it may take a couple of weeks to completely disappear. You may require a day or two off work during which time you should avoid strenuous exercise.

Some swelling can occur both inside and outside the mouth after surgery. This is usually noticeable for a few days. It is important to keep the site of surgery as clean as possible for the first few weeks after surgery. If it is difficult to brush the area but it can be kept free of food by gently rinsing with a mouth wash or warm salt water (dissolve a teaspoon of kitchen salt in a cup of warm water) starting the day **after** surgery.

What are the possible problems after surgery?

It is unusual for the area to bleed afterwards but should this happen it can usually be stopped by applying pressure on the lip over the area for at least 20 minutes with a rolled up handkerchief or swab. If the bleeding does not stop please contact the practice. Lifting the gum to uncover the root of the tooth can occasionally lead to a numb feeling in the gum. This usually disappears after a few months. Because the gum is cut it can occasionally shrink back a few months after surgery as scar tissue can form. This is not normally a problem but if the tooth has been crowned the edge of the crown may become exposed.

Even if all the infection is successfully removed it can sometimes return months or even years later. If this happens it might be necessary to have the operation repeated but sometimes the tooth is better removed. Sometimes this infection can be caused by other problems, such as crack in the tooth root, which may or may not be visible in the mouth on an x-ray. Overall, research suggests that 70-80% of teeth that are apicected are free of problems after 5 years.