

Fact sheet: Wisdom teeth removal



Some people believe that removing wisdom teeth is a waste of time if they are healthy. Others claim that wisdom teeth cause nothing but trouble and have no real function anyway. One reason why this is such a debated topic is because there are still so many questions that need to be answered.

Just why we call them wisdom teeth is not clear. It could be because these teeth usually start to break through the gum when people are between 17 and 24 years old, so it might have been seen as a sign that the person was becoming wiser. The wisdom teeth are the furthest back on each side of the upper and lower jaw. They are the third and last molars to break through.

What happens if a wisdom tooth does not break through?

Wisdom teeth often do not break through at all, or they only partly come through. This is more common in the lower jaw and is called an impacted or retained wisdom tooth. It could happen if there is not enough room in the jaw, other teeth are in the way, or the tooth is growing at an odd angle. Up to 80% of young people in Europe have at least one wisdom tooth that has not broken through.

Impacted wisdom teeth do not cause problems for most people. Sometimes they can lead to pain, swelling or ulcers in the gums though. The medical term for this is a "symptomatic impacted wisdom tooth". Impacted wisdom teeth can sometimes push on other teeth or cause damage to the jaw bone.

People whose incisors (front biting teeth) are not straight or whose jaw is small are sometimes afraid that their teeth will push on each other even more when their wisdom teeth grow out of the gum. But there is no proof that this is true. You can read more about that here ([URL: http://www.informedhealthonline.org/index.213.en.html](http://www.informedhealthonline.org/index.213.en.html)).

What are the advantages and disadvantages of having symptom-free impacted wisdom teeth removed?

The removal of wisdom teeth that have not grown out of the gum is one of the most common dental operations. They are removed to prevent possible future problems like damage to other teeth or the jaw bone. But the operation is not completely harmless: nerves and blood vessels can get damaged during this procedure. This can cause bleeding and temporary or permanent nerve problems that can lead to numbness or even paralysis around the tooth, including the tongue or even that part of the face.

The operation is done under a local or sometimes general anaesthetic. General anaesthetic itself can cause a variety of complications. The overall risk of the procedure probably increases with age, and this is often an argument made for removing them when people are young.

For most people, the area where the teeth were removed will be swollen after the operation and it will be hard to open the mouth fully. Pain is common straight afterwards, but usually soon goes away. In some people the pain returns after four to five days. It is then worse, and is associated with swelling or bad breath. These symptoms are a sign of a so-called "dry socket", which can arise if the blood clot sealing the wound is dislodged too early, leaving the wound exposed.

How can you relieve pain after the operation?

A lot of people take painkillers after their wisdom teeth have been removed, and they may be given pain-relieving medication before the operation too. It is not clear which of the available painkillers is most effective. Researchers from the Cochrane Collaboration looked for studies on paracetamol, and found 21 trials involving more than 2,000 participants. They analysed the data and found that paracetamol was most effective at a dose of 1,000 mg, taken every four to six hours.

People are often given various tips about how to speed up the healing process. These include cooling the affected side of your face with an ice pack and rinsing your mouth with chlorhexidine (an antibacterial solution) or salt water. Sometimes steroids are used to reduce swelling after the operation too. But there is no scientific proof about how well these strategies work.

If wisdom teeth cause infections, tooth decay, problems affecting the nearby tissue, or they interfere with orthodontic treatment, dentists usually recommend that they should be removed.

Author: German Institute for Quality and Efficiency in Health Care (IQWiG)

Glossary

Cochrane Collaboration

The Cochrane Collaboration is an international network of thousands of researchers and others. They work together in teams called Cochrane Review Groups to answer questions about health care by doing systematic reviews of evidence. To achieve this, the members of the Collaboration have developed systems and methods for systematically finding and analysing the results of trials of health care interventions. The goal of the Cochrane Collaboration is to help patients, health care practitioners and others make more informed decisions about health care. You can read more about the Cochrane Collaboration at their website.

wisdom teeth

The last and furthest back tooth at each end of each row of teeth is called a wisdom tooth. They are the third of the molars, and they usually start breaking through between the ages of 17 and 24. It is common, however, for a wisdom tooth not to come through at all, or to break through only partially. This can happen if there is not enough room in the jaw or other teeth are standing in the way. A wisdom tooth that has not broken through properly is called an impacted wisdom tooth.

Sources

Esposito M. Impacted wisdom teeth. *Clinical Evidence* 2006; 15: 1-2.

Mettes TG, Nienhuijs MEL, van der Sanden WJM, Verdonschot EH, Plasschaert AJM. Interventions for treating asymptomatic impacted wisdom teeth in adolescents and adults. *Cochrane Database of Systematic Reviews* 2005, Issue 2. [Cochrane summary (URL: <http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD003879/frame.html>)] [Informed Health Online summary (URL: <http://www.informedhealthonline.org/index.213.en.html>)]

National Institute for Health and Clinical Excellence (NICE). Wisdom teeth - removal. April 2000 (revised advice 2003). [Full text (URL: <http://www.nice.org.uk/page.aspx?o=ta001>)]

Weil K, Hooper L, Afzal Z, Esposito M, Worthington HV, van Wijk AJ, Coulthard P. Paracetamol for pain relief after surgical removal of lower wisdom teeth. *Cochrane Database of Systematic Reviews* 2007, Issue 3. [Cochrane summary (URL: <http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD004487/frame.html>)]

The German Institute for Quality and Efficiency in Health Care (IQWiG)

The German Institute for Quality and Efficiency in Health Care (IQWiG) was established by legislation to provide evaluations of the effectiveness, quality and efficiency of healthcare services. This includes the assessment of medicines as well as the publication of health information for consumers and patients.

Evidence basis of our health information

Our information is based primarily on systematic reviews of the effects of health care. Systematic reviews are necessary to gain an objective picture of health care. In order to do this, a clear question is formulated. Researchers then find all the relevant studies that could answer this question. They then evaluate those studies.

You can find a list of the evidence and other scientific literature on which this information is based at **www.informedhealthonline.org**

Disclaimer

This information was prepared and published by the German Institute for Quality and Efficiency in Health Care (IQWiG). It is based on the evidence and other scientific literature available at the time of publication. The information is intended for the use of patients in Germany. It is not intended to for use to diagnose illnesses and the information is not intended to substitute for medical advice.