Patient information



Upper and or Lower Jaw/Chin Surgery

This information is for patients about to undergo corrective surgery to the upper and or lower jaw/chin. Once you have been given a date for surgery from your consultant, you will receive a letter from the admissions department confirming your operation date plus a pre-assessment appointment.

You will also receive a series of appointments for the weeks leading up to your operation. These are important for the planning and preparation of your surgery.

They include:

- First appointment, with the orthodontic consultant in the orthodontic department, about four
 weeks before surgery. This will be to take impressions and add special attachments to your
 appliances. If you are having surgery to both jaws you will also have some measurements
 taken using a face-bow.
- Second appointment, a week later, with the consultant surgeon in the maxillofacial department. He will have the models of your teeth and will use them to plan and finalise the movements needed during surgery.
- Third appointment, approximately two weeks before surgery, in the maxillofacial department.
 Your surgeon will trial the thin plastic wafers that will be used during the operation to guide
 the jaws into the correct position. (Further appointments may be required). You may also be
 sent for pre-assessment if not already done.

If you are unable to attend any of these appointments or your operation date gets changed for any reason, please notify the Maxillofacial/Orthodontic Department as soon as possible. Failure to do so may result in your surgery being postponed.

What is involved in the operation?

Depending on the type of surgery you require, the operation is carried out almost entirely through incisions inside the mouth. For upper and/or lower jaw surgery, an incision is made through the gum to allow access to the jaw bone. The bone is carefully cut to allow the jaw to be moved to the correct position. The bones are then fixed in place by screws or small metal plates which are beneath the skin and generally remain in place forever.

For lower jaw surgery, it is usually necessary to make a small incision in the skin of the cheeks to allow placement of the screws that hold the jaw bone in position. This incision is only a few millimetres long, usually only requires a single stitch, and heals to a very feint blemish. All stitches used in the mouth are dissolvable and will take about two weeks to disappear.

Will I have an anaesthetic?

This operation is carried out under General Anaesthesia.

What are the alternatives?

Your orthodontic treatment will have been designed to put your teeth in the best position for surgery, so deciding not to have the proposed operation after the orthodontics may leave the teeth in an unstable position.

What are the potential risks and side effects?

There are potential risks and side effects with any operation, it is important that you are aware of them and have the opportunity to discuss them with your surgeon. They include:

- Bleeding You can expect some oozing from the cuts within your mouth on the night of the
 operation, this is normal. You will probably notice slight bleeding from your nose as well
 which may take a week or so to settle. This is quite normal and nothing to be concerned
 about. Significant bleeding is very unusual but should it occur, it can usually be stopped by
 applying pressure over the area for at least ten minutes with a rolled up handkerchief or
 swab.
- Numbness Your lips and chin will feel numb when you wake up after the operation and as
 this wears off, you may experience a tingling sensation. This is similar to the sensation you
 feel after having an injection at the dentist. If you have had lower jaw surgery the numbness
 can take several weeks or occasionally months to return to normal. In a small percentage of
 cases, approximately 5-10%, there is some permanent altered sensation in the area. This is
 sensation only, does not affect function or appearance and only you would be aware of it.
- Infection It is rare for the small plates and screws holding your jaw in position to become
 infected but if this does happen, they may need to be removed. This is not normally a
 problem until several months after surgery. It is very rare that these cause any long-lasting
 problems and they are usually left in place permanently. The metal used is titanium which
 does not set off metal detectors in airports etc.
- Adjustment of the bite It is often necessary to put elastic bands on your orthodontic braces to guide your bite into its new position. Very rarely, if the bite is not quite right, a second small operation may be required to reposition the fixing plates and screws.
- **Smoking** The risks of both infection and bleeding are considerably higher if you are a smoker. For this reason we would ask that you refrain from smoking for as long as possible before and after surgery.
- **Joint stiffness** Following surgery it is usual to experience stiffness of the jaw joints, which can take several months to improve.
- Relapse When jaws have been repositioned there is always the possibility of relapse, when
 they may move back slightly towards their original position. In most cases the movement is
 minimal and would not be noticeable. It is very rare for relapse to affect the cosmetic
 improvement achieved.

Although you will sign a consent form for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

What are the expected benefits of treatment?

The main benefits are:

- Improved facial appearance
- Improved function of teeth
- Straight teeth.

How long will I be in hospital?

This varies from person to person but most patients usually spend one or very occasionally two nights in hospital after the operation. The position of your jaw will be checked with x-rays before you are discharged home.

How much time will I need off from work/college?

It depends on the person, the type of operation and the type of job or study you do. We recommend that most people have two to three weeks off. It is also important to remember that you will not be able to drive or operate machinery for 48 hours after having a general anaesthetic.

What can I expect after the operation?

You should arrange for somebody to take you home and it is recommended that you have someone to stay with you for the first few days after surgery.

For the first day or two you will probably only want to drink fluids but you can soon progress to a soft diet. Dietary advice will be given before you leave hospital.

It is important that you do not bite into or chew hard food for six weeks after surgery.

Perhaps surprisingly it is not a particularly painful operation. However you are likely to have some discomfort and swelling, both inside and outside of your mouth. For this reason, regular painkillers will be prescribed for you. The discomfort is usually worse for the first few days, but can take a couple of weeks to disappear completely. It is important that the area heals without any infection, so you will be given antibiotics through a vein in your arm whilst you are in hospital. You will be given painkillers and a course of antibiotics to take home with you.

Immediately after the operation your face will be swollen and feel tight, your jaws will be stiff and you will not be able to open your mouth very wide. Your throat will probably be uncomfortable and swallowing can be difficult to begin with. If you have upper jaw surgery, your nose may feel blocked and you may need to breathe through your mouth. It is not unusual to feel low and slightly depressed after surgery.

Swelling and bruising varies from person to person, but is generally at its worse on the second or third day after the surgery. Swelling can be reduced by using cold compresses and sleeping propped upright for a few days. Most of the swelling will go down within a fortnight, though there is often some more subtle swelling that can take several months to disappear and only you and your family are likely to notice this.

Will I need further appointments?

A review appointment will be arranged for one week after you leave hospital to see both the surgeon and orthodontist. Any future follow-up appointments will be arranged as required.

A shopping list of things you may find helpful after surgery

- · Soft ice packs for the swelling
- Drinking straws
- Soft foods i.e. soup, microwave porridge, ice cream, yoghurt etc.
- Soft, bendy plastic spoon
- A baby's toothbrush
- Fluoride mouthwash
- Some good DVDs, as you may feel too tired to read
- Front opening shirts or blouses, as you won't want to pull clothes over your head.

Other sources of information

Dental Nurse

Conquest Hospital, Hastings - Tel: 0300 131 4500 Ext: 773207 Eastbourne District General Hospital - Tel: 0300 131 4500 Ext: 771756

Consultant secretary

Conquest Hospital, Hastings - Tel: 0300 131 4500 Ext: 148907 Eastbourne District General Hospital - Tel: 0300 131 4500 Ext: 734819

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights

Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

and ask your nurse or doctor.	st below

Reference

The following clinicians have been consulted and agreed this patient information:

Mr N Maini – Maxillofacial Consultant Mr M.Shastri - Maxillofacial Consultant, Dr F Pantanali – Orthodontic Consultant

Dr A Ahmad – Orthodontic Consultant

The directorate group that have agreed this patient information leaflet:

Diagnostic, Anaesthetic and Surgery - Outpatients

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