

## Apicectomy under Local Anaesthetic

This Leaflet has been designed to improve your understanding of your forthcoming treatment. It contains answers to many of the most commonly asked questions. If you have any other questions or would like a further explanation, please ask a member of the team in the department.

### What is Apicectomy?

Apicectomy is a surgical procedure when a possible infection or cyst is removed from the root of your tooth/teeth.

### Why is it performed?

If left untreated the infection is likely to develop into an abscess or a cyst. As well as causing pain, this could lead to loss of bone surrounding the root of the tooth.

### What does treatment involve?

Your dental surgeon will have tried to treat the problem by removing the nerve of the tooth/teeth and performing root canal treatment.

One option for treatment is to carry out an apicectomy. This involves making a small cut in the gum, lifting the gum to expose the infected area, cleaning out the infection from the bone, removing a tiny portion of the tip of the tooth root and then sealing the root with a small filling.

The gum is then stitched back into place with dissolvable stitches. The whole procedure takes about 30 minutes from start to finish.

### What are the alternatives?

Apicectomy is often the last resort to save an infected tooth/teeth. Other options include having the tooth re-root treated if this is possible. Another would be to have the tooth extracted.

### What can I expect after the procedure?

Some swelling can occur both inside and outside the mouth following surgery. When the local or general anaesthetic wears off a few hours later, you may experience some discomfort which may last up to 2 weeks; your surgeon will advise you regarding this. In very rare circumstances you may be given a course of antibiotics.

You should plan to take a day or two off work and avoid strenuous exercise.

### What are the potential problems?

It is unusual for the area to bleed following surgery. If this does happen, it can be stopped by applying pressure over the area with a swab. The swab will be provided after surgery. Lifting the gum to uncover the tooth can occasionally lead to a numb feeling in the gum, however this is usually temporary.

The gum can occasionally shrink back a few months after surgery as scar tissue forms. Even if all the infection is removed it can sometimes return months or even years later. If this happens, it may be necessary to repeat the procedure or consider removal of the tooth.

## What are the expected benefits of treatment?

To prevent further episodes of infection, swelling and pain. To preserve the life of the tooth as long as possible

## Will I have an anaesthetic?

You will have a local anaesthetic injection into the gum. Very occasionally this procedure is performed under general anaesthetic.

## What should I do before I come into hospital?

Please refrain from smoking for 72 hours prior to the surgery to reduce the risk of infection. It is important to eat and drink normally prior to surgery if the procedure is being carried out under local anaesthetic. If the procedure is to be carried out under *general* anaesthetic you will be advised accordingly. Your prescribed medication should be taken as normal unless the surgeon advises otherwise at your consultation visit.

## How long will I be in hospital?

Approximately 45 minutes

## What should I do when I go home?

You will be given verbal and written instructions before you go home.

## Will I have to come back to hospital?

There will be normally no need for you to return unless the surgeon requests at your appointment.

## When can I return to work?

This depends on the nature of your work and the degree of swelling and discomfort you experience. You may need 2-3 days off work.

## Consent

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

## Who do I contact if I need help

Maxillofacial Unit: Conquest Hospital Tel: 0300 131 4500 Ext: 773207  
Maxillofacial and Orthodontic Unit: Eastbourne DGH Tel: 0300 131 4500 Ext: 771756

## Out of hours help

In an emergency, go to your nearest Emergency Department (A&E).

## Sources of information

British Association of Oral Maxillofacial Surgeons - [www.baoms.org.uk](http://www.baoms.org.uk)

## Important information

The information in this leaflet 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](mailto: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](mailto:esh-tr.AccessibleInformation@nhs.net)**

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

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## Reference

The following maxillofacial consultants have been consulted and agreed this patient information.  
Mr C J Surwald, Maxillofacial Consultant.  
Mr M Shastri, Maxillofacial Consultant.

The directorate group that have agreed this patient information leaflet: Planned care – Diagnostic, Anaesthetic and Surgery - Outpatients

Next review date: June 2024  
Responsible clinician: Lesley Davies  
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