Dry Socket (Alveolar Osteitis)

What is a dry socket?
Dry Socket is a common complication following tooth removal. Normally, a blood clot forms in the socket, this protects the socket as it heals and forms the foundation for new bone and soft tissue growth. A dry socket occurs when a blood clot fails to develop in the tooth socket, or if the blood clot becomes dislodged or disappears. This usually happens 3 to 5 days after the extraction procedure.

What are the symptoms?
- Ache/throbbing pain – can resemble a toothache
- Halitosis (bad breath)
- Bad taste
- Tooth socket looks empty (you may see bone instead of a blood clot)

Who is at risk?
- If you do not follow post-operative instructions
- Smokers
- If you’ve had the condition before
- You’re over 25 years old
- If the extraction was complicated
- Following wisdom tooth removal, especially lower
- Female sex, especially if on the oral contraceptive pill

How is it managed?
The therapeutic goal is relief of symptoms; however, treatment does not hasten healing.

This is usually managed by irrigation of the socket to remove any debris. Sometimes, a soothing dressing is placed. If the pain persists, this may have to be repeated every other day until the pain subsides.

Self-care at home to keep the socket and area clean is paramount:
- Regular gentle warm salt water mouth rinses at least 4 times a day
- Maintain good oral hygiene
- Take regular pain relief as required
- Avoid smoking and use of tobacco products
- Drink plenty of clear fluids

Do I need antibiotics?
Delayed healing is not an infection.

Your doctor will assess the need for antibiotics based on the clinical presentation as well as your general health.
Who should I contact if I need some more help?

**Conquest Hospital:**
Maxillofacial Unit - Tel: 0300 131 4500 Ext: 773208

**Eastbourne District General Hospital**
Maxillofacial and Orthodontic Unit - Tel: 0300 131 4500 Ext: 771757

**Out of hours:**
In an emergency, go to your nearest Emergency Department (A&E)

**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 – Tel: 0300 131 4731 (direct dial) or by email at: esh-tr.patientexperience@nhs.net

**Hand hygiene**
The Trust is 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 the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: 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.

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

**Reference**
The following clinicians have been consulted and agreed this patient information:
Mr A B Moody - Maxillofacial Consultant, Mr M D Williams - Maxillofacial Consultant,
Mr C J Surwald - Maxillofacial Consultant.
The directorate group that have agreed this patient information leaflet:
Outpatients

Next review date: February 2024
Author: Shu Ker, DCT Oral and Maxillofacial Surgery
Helen Hemsley, Senior Dental Nurse

© East Sussex Healthcare NHS Trust - www.esht.nhs.uk