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Advice for patients having an apicectomy

Introduction

This leaflet gives you information about having an apicectomy and answers many of the commonly asked questions. If you have any further questions or would like a further explanation, please contact the Oral and Maxillofacial department using the contact information at the end of this leaflet.

What is an apicectomy?

An apicectomy is the name of the procedure for removing the apex (the tip) of a tooth, cleaning out the surrounding infection and placing a small filling to seal the end of the root of the tooth.

Why do I need an apicectomy?

When a tooth is badly decayed, has a large filling or receives a blow in an accident, the soft tissues within the tooth (the pulp or 'nerve') may die. This dead tissue must be removed to prevent infection. The procedure is called root canal treatment which will be done by your dentist.

Sometimes this treatment is unsuccessful and infection persists at the tip of the root. This may cause pain, but more often the infection will spread and cause a small spot, swelling or 'gumboil' next to the tooth.

An apicectomy is an operation designed to remove this infected part of the root tip and any surrounding infection.

This operation is the 'last chance' to save your tooth.

It is successful in most patients but sometimes, despite our best efforts, infection persists and the tooth will need to be extracted (removed).

Will the apicectomy make the tooth loose?

The tooth will often feel loose for a short time after the procedure until new bone grows around the tooth root.

The tooth will then usually firm up and should be more comfortable than before the operation because the infection has been removed.

How long will the procedure take?

About 45 to 60 minutes, but it may take slightly longer if you are having a number of teeth treated.

How will the procedure be carried out?

Usually the procedure is carried out under local anaesthetic (injection in the gum) in our outpatient clinic. You may have been offered sedation or a general anaesthetic. This will have been discussed with you and relevant information given.

What should I expect after the procedure?

Discomfort
This is to be expected **but** is easily dealt with by simple pain relief. Ibuprofen or paracetamol taken regularly are generally all that is needed.

Always read the label for directions, especially if you take other medicines or if you have been given prescription pain relief.

Swelling and bruising

Again this is to be expected at the operation site but is usually mild. The swelling will probably be at its most obvious 1 to 2 days after the operation and can last for up to 1 week.

Infection

Sometimes, an infection may develop causing pain and swelling. You may need a course of antibiotics if this happens. Keeping your mouth clean with regular but careful tooth-brushing is very important in trying to prevent this.

Stitches

These are dissolvable and will disappear in a few weeks.

Will I be given instructions afterwards?

Full details for aftercare will be given following the procedure.

What are the chances of success?

The success rate is usually around 70% to 80% but can vary depending on which tooth is being treated and what previous treatment has been carried out on the tooth.

As this is the last chance to save the tooth, there is a possibility that the procedure may not completely resolve the problem and infection may persist.

If this is the case, your dentist will arrange for the extraction of the tooth at a convenient time.

Going home

If you have had a local anaesthetic you will be able to return home straight after your appointment. If you have had a general anaesthetic or sedation it is essential that someone takes you home and that there is a responsible adult to stay with you (and any children under 18 you may have) for 24 hours. For this period of time you should not:

- Drive a car, motorbike or ride a bicycle
- Drink alcohol
- Operate machinery or do anything requiring skill or judgment, including cooking
- Make important decisions or sign any documents

When can I return to work?

This largely depends on your occupation and how you feel afterwards. It may be possible to return to work the same or next day if you had a local anaesthetic. A day or so extra is necessary if you have had sedation or a general anaesthetic.

Review appointment

We can normally discharge you back to your dentist after the procedure. We recommend that your dentist records a new X-ray of the tooth about 4 to 6 months after the surgery to check that healing is progressing.

In some circumstances we may wish to see you in our clinic for follow-up. Specific details will be given at the time of the procedure.

Who to contact if you have concerns after the surgery

Most people have very few problems and following the advice in this leaflet is usually all that is needed. Therefore, we do not always review patients following surgery.

However, if you have a problem, please contact the **Oral and Maxillofacial Outpatient Department** via the hospital switchboard between 8:00am and 8:00pm.

Gloucestershire Hospitals Switchboard
Tel: 0300 422 2222
When prompted, ask for the Operator, then ask to be put through to the 'On call Senior House Officer' for the Oral and Maxilofacial Department.

Alternatively, you can contact your registered dentist for advice.

In an emergency, please go to the nearest Emergency Department.

Other useful contact information

New and follow-up clinic booking enquiries
Tel: 0300 422 6940
Monday to Friday, 9:00am to 4:30pm

Minor surgery (local anaesthetic with/without sedation) booking enquiries
Tel: 0300 422 3197
Monday to Friday, 9:00am to 4:30pm

Inpatient and Day Surgery Unit booking enquiries
Tel: 0300 422 8191
Monday to Friday, 9:00am to 4:30pm

Website

For further information, please visit the Oral & Maxillofacial Surgery webpage:

www.gloshospitals.nhs.uk/our-services/services-we-offer/oral-maxillofacial-surgery/

Feedback

We would welcome your feedback regarding your treatment. Please visit www.nhs.uk

Scroll to the bottom of the page and select the ‘Contact us’ link. On the next page, select ‘Give feedback or make a complaint’ then select the link below the heading ‘Give feedback about an NHS service.

Feedback can also be left on the Gloucestershire Hospitals twitter account: @gloshospitals

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Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.

Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation.

***Ask 3 Questions** is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial.

Patient Education and Counselling, 2011;84: 379-85

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https://aqua.nhs.uk/resources/shared-decision-making-case-studies/

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