Surgical therapy for gum disease
Department of Periodontology
What is periodontal surgery?
Periodontal surgery is a minor surgical procedure carried out under local anaesthesia. It may be offered to you if non-surgical treatment is not sufficient to secure your gum health. The need for surgery on your gums will be discussed with you at the end of the first stage of treatment when you’re re-assessed monthly.

Does everyone need surgery?
Most patients respond well to non-surgical treatment, which focuses on helping you to clean plaque and bacteria from your teeth and gums, as well as also carrying out deep cleaning of your gum pockets. Surgery is not always necessary to prevent gum disease or tooth loss.

In some patients, gum problems may be deep seated and hard to reach just with deep scaling. For these patients surgery is beneficial as it helps us to gain access to the sites and see the root surfaces and bone defects. It also makes cleaning of these sites easier and helps you to achieve healthy gums. Surgery is also necessary for patients who have defects that can benefit from rebuilding the lost gum tissues.

What types of surgery are there?
Three main types of surgical procedures are commonly undertaken:

Access Flap Surgery
The gum is lifted back from the roots of your teeth and bone. The exposed roots are then cleaned to remove all the tartar and infected tissue. Your gum is then replaced and held in place with stitches. As the gums heal, they will recede a little to a higher level.

Osseous Surgery
This is considered if ‘access flap surgery’ alone will not result in shallower pockets. In addition to rolling your gum back, the bone around your teeth is reshaped using either hand instruments or burs. Your gum is usually replaced to a level slightly higher than the original position thus making your teeth look slightly longer.

Regenerative Surgery
This type of surgery is suitable only for certain types of bone defects. Details of this can be found in another information leaflet.

How is the surgery carried out?
The type of surgery that is to be carried out, and the reasons for it, will have been discussed with you prior to the appointment for the surgery. Your clinician will make sure you are involved in any discussions or decisions about your treatment. You will be given a clear explanation of your condition and your treatment choices – including any risks and benefits there may be. By law we must ask for your consent and will ask you to sign a consent form prior to any surgery. This confirms that you agree to have the procedure and understand what it involves. Please ask if there is anything you are not sure about.

It will be carried out under local anaesthesia in much the same way as the deep cleaning was carried out. Stitches are routinely used and you will usually be seen approximately one week later to have them removed. Removing your stitches is a simple procedure that does not require local anaesthetic. Very occasionally it can cause mild discomfort.

It is important that you have something to eat and drink before you come for the surgical appointment.
Clinical Photography

Clinical photographs are useful to document dental conditions and treatment for notes and/or teaching purposes. Photography will only be undertaken with your consent.

What happens after the surgery?

- You will normally be given painkillers either before or immediately after the surgery to help with the pain. You should continue to take these for a couple of days.

- You will be asked to apply a frozen ice pack on the outside of your face to help with the swelling. The pack should be applied periodically over at least three to four hours. It is important that this is done immediately after the surgery to help reduce the amount of swelling you get.

- You will be given written post operative instructions to help you in the immediate post surgical healing period.

- You may find it difficult to open your mouth for the first few days but this will gradually improve.

- You must avoid brushing the area for at least one week.

- You will be advised to use Corsodyl mouth rinse to help with the healing. You should follow the instructions on the bottle carefully and ensure that you rinse for one minute at least twice daily.

- You may have a pack attached to the outside of the teeth to protect the surgical site. Sometimes the pack may fall off. If this happens, it is important that you keep the area clean with Corsodyl mouth rinse.

- You may find eating difficult after the surgery. The surgical site should be avoided, and for the first few days you should have soft foods and chew on the other side of your mouth.

- Most people are able to return to work the day after the surgery.

What should I feel afterwards?

Immediately after surgery, you will not feel very much due to the local anaesthesia. After this has worn off, you may experience some pain and discomfort. The degree of pain varies with the type of surgery and is worse when the bone has been reshaped.

- The pain usually improves after a couple of days. This is alleviated using painkillers for a couple of days after the surgery.

- Your mouth or face may swell up after the surgery. This is usually worse for the first 48 hours but will improve.

- You might also find it difficult to open your mouth wide.

- The swelling can be minimised using an ice-pack.

- Most patients will be able to return to work by the next day, however you should avoid strenuous exercise and alcohol as these can cause the site to bleed.
How long does the surgery take?
It can take between one and two hours, but varies with the type of procedure undertaken and the number of teeth involved. If the procedure is undertaken by one of our trainee specialists it may take longer.

Are there any complications of the surgery?
- **Swelling:** This is the most common complication. It is best controlled by placing an ice-pack on the outside of your face next to the affected area. The ice-pack can be a pack of frozen peas or crushed ice wrapped in a damp tea towel. It should be applied for at least 30 minutes on and off as soon as possible after the surgery before any swelling starts. This should be repeated for a couple of hours.
- **Bleeding:** This may occur in the days immediately after surgery. You should avoid drinking alcohol, hot drinks and vigorous exercise on the day of surgery, as this increases the risk of bleeding. Should bleeding occur, then apply firm pressure with a clean damp handkerchief for at least half an hour and remain sitting upright in a chair.
- **Pain and discomfort:** This is common after the surgery but will dissipate. You should take ordinary painkillers to help with the discomfort for at least 2 days after the surgery.
- **Gum Shrinkage:** This occurs with successful treatment and becomes more noticeable immediately after the surgery. This can sometimes cause aesthetic and speech problems, especially when in the front of the mouth.
- **Sensitivity:** This is noticed following surgery and may persist for a few months. If it persists fluoride mouth rinses and special toothpastes for sensitive teeth may help.

How successful is the surgery?
Studies have shown that surgery is a good treatment option for patients with deep pockets in their gums and where there are deep bone defects and anatomical variation of the roots of the teeth.

The outcome is dependent on your ability to keep your mouth clean. Success rates vary and are dependent on which factors have contributed to your gum disease. The predictability of your treatment will be discussed with you by the clinician undertaking the treatment prior to the procedure.

Studies have shown that patients who undergo surgery, but do not continue the regular maintenance care or cannot keep their cleaning to an excellent standard have a higher risk of the disease recurring.

How do I know if the treatment has worked?
Following the completion of surgical treatment, you will be seen regularly to ensure that you are able to maintain your cleaning. Twelve weeks after the completion of surgery, your pockets will be measured and your overall gum health assessed. Your clinician will inform you of the results of the treatment.
What happens after the treatment?
Successful results of your gum treatment will only be sustained with regular professional supportive therapy and maintenance. This should be carried out on a regular basis depending on your needs, but we would recommend no longer than three month intervals. Your clinician will inform your dentist of the type of treatment we have carried out and provide you with a regime of supportive therapy. Your own dentist or dental hygienist normally undertakes this therapy. The hospital may continue to recall you to see how well you are maintaining your gum health.

Do I still need to see my own dentist?
Yes, your general dental practitioner will continue to see you for your regular check-ups and all restorative work such as fillings and crowns.

Your dentist will be kept informed of your progress with the gum treatment. If you have any questions about the surgery planned for you please do not hesitate to contact the consultant in charge of your care.

Asking for your consent
We want to involve you in all the decisions about your care and treatment. If you decide to go ahead with treatment, by law we must ask for your consent and will ask you to sign a consent form. This confirms that you agree to have the procedure and understand what it involves. Staff will explain the risks, benefits and alternatives before they ask you to sign a consent form. If you are unsure about any aspect of your proposed treatment, please do not hesitate to speak with a senior member of staff again.

PALS - If you have any concerns
PALS is a patient-friendly, easy to access service designed to provide a personal contact point to assist patients, relatives and carers. If you have a problem that you have not been able to sort out we can help you to resolve it.

The PALS office is located in the main atrium of University College Hospital, 235 Euston Road, London, NW1 2BU.

PALS are open: Monday to Friday: 10:00 till 16:00
Telephone: 020 3447 3042
Email: uclh.pals@nhs.net
If you need a large print, audio, braille, easy read, age-friendly or translated copy of the document, please contact us on:
Telephone: 020 3456 5076.
We will try our best to meet your needs.

Contact
Department of Periodontology
Royal National ENT and Eastman Dental Hospitals
Telephone: 020 3456 1030 / 1082 / 1078
Switchboard: 020 3456 7890
Opening hours: Monday to Friday: 08:30 to 17:30
Website: www.uclh.nhs.uk

How to find us
Royal National ENT and Eastman Dental Hospital
47-49 Huntley Street,
London
WC1E 6DG.
Huntley Street is close to Euston, Warren Street and Goodge Street underground Stations and there are bus stops nearby.

How to find us