

UNCOVERING (EXPOSURE) OF IMPACTED UPPER CANINE TEETH

The upper canine, or “eye tooth”, normally erupts into the mouth between the ages of 11 and 13. Sometimes teeth can develop in an abnormal position and the upper canine is the most common tooth to be affected in this way. Either one or both teeth may be affected. Often they will lie across the roof of the mouth behind the front teeth.

Why is treatment required?

The upper canine has a long root making it a strong tooth. It is an important tooth for biting and in the development of a normal smile. Sometimes they may be left alone and will remain un-erupted for many years, possibly a whole lifetime. They can, however, damage the roots of other front teeth or push them out of position. They can also interfere with the orthodontic movement of other teeth. More rarely cysts can develop around them. Treatment is almost always provided as part of on-going orthodontic treatment to help the teeth to erupt normally into the mouth.

What does the treatment involve?

The treatment involves a relatively minor surgical procedure. This is most often carried out under local anaesthetic (injection in the gum). It can also be carried under intra-venous sedation or general anaesthesia depending on each individual case.

Depending on the exact position of the un-erupted tooth there are three different surgical treatment options:

- 1.** If the tooth is positioned near the outside of the arch of teeth, i.e. near the lip, the gum can be moved up to expose the crown of the tooth. The gum is then re-positioned with dissolvable stitches.
- 2.** If the tooth is in the roof of the mouth a small window of gum can be removed to expose the crown of the tooth. Usually an anti-septic pack is placed over the tooth, which is held in place by one or two stitches. This both protects the wound and helps to prevent the gum growing back over the tooth. It is usually left in the mouth for 2 weeks after which it is very simple to remove.
- 3.** If the tooth is very deeply impacted then often the gum over it will be lifted up, the tooth exposed and a gold chain and bracket will be glued onto the crown. The gum is then put back and the chain is stitched to the outside of the gum where the orthodontist can use it to pull the tooth gradually into the correct position.

What are the after effects?

Following surgery there is usually very little swelling but there will be some soreness. This is normally taken care of with simple painkillers such as paracetamol. It is not usually necessary to take antibiotics. A review appointment is usually made 2 weeks following surgery, either with the surgeon or orthodontist.