

Dear Patient,

RE: Dr. Scott Waghorn Post-Extraction Advice

Congratulations on a successful extraction procedure completed without immediate complications. This comprehensive guide outlines what to expect from the immediate post-operative period through to long-term healing, and includes additional sections on socket preservation and oral sedation where applicable.

Physiological Overview of Healing

Immediately following tooth extraction, your body launches a highly coordinated series of events aimed at repairing the affected tissue. Initially, a blood clot forms at the extraction site, acting as a natural barrier against bacterial invasion and providing the matrix upon which new tissue will grow. In many cases, the area is sutured to further stabilise this clot and support early healing. During the first 24–48 hours, the inflammatory phase sets in—characterised by redness, slight swelling, and mild discomfort as immune cells work to clean the wound. Over the following days, the proliferative phase begins, with granulation tissue forming that may appear pale, yellowish, or white as it sloughs away. This tissue is gradually replaced by new, vascularised gum tissue that takes on a natural pink hue. Finally, the remodelling phase, which can extend from one month to several months, strengthens and matures the newly formed tissue. This detailed understanding is vital, as each post-operative instruction is designed to support these natural processes.

Immediately After Extraction

Bite on Gauze:

Immediately post-extraction, bite firmly on the provided gauze with medium pressure for **30 minutes**.

This step is critical for stabilising the blood clot and minimising bleeding, laying the foundation for tissue regeneration.

Pharmacy Visit:

If medications have been prescribed, please proceed to the pharmacy straight away to collect your prescription. You may also wish to purchase extra gauze for additional dressing changes. Some patients find benefit when taking Arnica and Probiotics at this time (see page 7 for more information)

Timely access to medications and extra supplies is essential for effective pain management and infection prevention.

Once You Get Home

Gauze Removal:

After 30 minutes, gently remove the gauze and inspect the extraction site for any signs of excessive bleeding or instability.

Warm Salt Water Rinse:

Prepare your rinse by dissolving ½ teaspoon of salt in 1 cup (approximately 240 mL) of warm water. Gently swish the solution around your mouth—take care to avoid vigorous swishing that might disturb the blood clot or create undue pressure at the extraction site.

This gentle rinse helps cleanse the area, reduce bacteria, and promote a clean healing environment.

Managing Slight Oozing:

If you observe any slight oozing, take a fresh piece of gauze, roll it into a "sausage" shape, fold it in half, and bite down on it for an additional **30 minutes**. *Maintaining pressure is essential for re-establishing clot stability and controlling minor bleeding*.

Nutritional Guidelines:

To Consume:

- Cool or room temperature liquids such as water, diluted fruit juices, and herbal teas.
- Soft foods like yoghurt, mashed potatoes, puddings, smoothies (using a spoon rather than a straw), lukewarm soups, scrambled eggs, and applesauce.

To Avoid:

- Hot foods and beverages, which may exacerbate bleeding.
- Crunchy, hard, or chewy foods (e.g. chips, nuts, raw vegetables, tough meats) that could disturb the clot.
- Spicy or acidic foods that might irritate the healing tissue.
 A soft, non-irritating diet ensures you receive proper nutrition while protecting the delicate healing site.

• Rest and Relaxation:

Sit or lie down with your feet elevated.

Elevation helps lower your heart rate, reducing the risk of renewed bleeding and promoting optimal blood flow to the area.

• Medication and Comfort Measures:

Take all prescribed medications as directed. In the absence of specific analgesics, you may consider using Panadol and Nurofen (or Maxigesic) according to the label instructions. As the local anaesthetic wears off, apply a cold compress externally near the extraction site, keep your head elevated, and rest.

These measures work together to control swelling and alleviate discomfort.

Handling Re-Bleeding:

Should bleeding resume, apply a fresh piece of gauze and bite down for another **30 minutes**

This additional pressure is crucial for re-establishing clot stability and managing any bleeding.

Before Bed

Nighttime Medication:

Take your prescribed pain relievers and any antibiotics as directed.

Oral Hygiene:

Gently brush your teeth using a soft-bristled toothbrush, taking care to avoid the extraction site.

Gentle Salt Water Rinse:

Rinse lightly with your previously prepared warm salt water solution.

• Prepare for Sleep:

Settle into a comfortable position with your head elevated by extra pillows to help reduce overnight swelling. Aim for an early night—quality sleep is crucial for lowering your heart rate, improving blood circulation, and supporting the overall healing process.

Morning Routine

Observation and Cleaning:

Upon waking, it is normal to notice a small amount of blood in your mouth. Rinse gently with warm salt water.

Medication:

Continue with your morning medications as prescribed.

• Light Oral Hygiene:

Rinse your mouth and, if comfortable, lightly brush away any debris using a soft manual toothbrush.

This gentle cleaning helps maintain oral hygiene without disturbing the healing tissues.

Day 1-2 of Healing

Oral Hygiene:

Begin cleaning the extraction site with a clean **manual toothbrush**. If you usually use an electric toothbrush, either disable the oscillation on the affected area or use a dedicated manual toothbrush.

• Diet:

To Consume:

 Soft, easy-to-chew foods such as yoghurt, mashed potatoes, puddings, smoothies, scrambled eggs, and soft, lukewarm soups.

To Avoid:

 Foods and beverages that are hot, spicy, acidic, or require extensive chewing.

Swelling and Pain Management:

Continue taking your prescribed medications. If you experience side effects from Paracode or Naproxen (e.g. nausea, dizziness, or stomach upset), please switch to Panadol as soon as possible.

Panadol is generally easier on your system and minimises unwanted side effects.

General Rest:

Maintain rest, avoid strenuous activities, and keep your head elevated throughout the day.

Rest and minimal activity support the healing process by reducing stress on the extraction site.

Day 3-4: Transition from Inflammation to Proliferation

During days 3–4, the initial inflammatory phase begins to subside while the proliferative phase takes over:

Expected Observations:

- o A gradual reduction in swelling and pain.
- The formation of granulation tissue, which may appear as a pale, yellowish, or white layer at the extraction site.
- o A slight recurrence of discomfort as the tissue begins to remodel.

• Guidance:

Continue with your soft diet and gentle oral hygiene routines. Monitor for any sudden or persistent increases in pain—if you notice a return of pain or an aching sensation, please text Scott with details of your symptoms, as this could indicate the early stages of a post-operative infection.

Supportive Measures:

Maintain your medication schedule and, if necessary, use a cold compress to manage any minor discomfort.

Day 7: One Week Post-Extraction

At one week, significant healing changes should be evident:

Expected Observations:

- Granulation tissue is transitioning as it sloughs away, revealing new, healthy, pink gum tissue.
- Sutures, if placed, may still be visible but are often in the process of being absorbed or may be scheduled for removal by your dentist.
- Minimal bleeding or oozing, with increased tissue stability.

Guidance:

Continue with gentle salt water rinses, adhere to a soft diet, and avoid strenuous activities. Should you experience unusual pain, persistent bleeding, or an offensive odour, please contact us immediately.

Sutures

If sutures were placed, they are "resorbable" and will dissolve on their own. The dissolving time varies depending on the type of suture used in around 3-5 weeks.

Occasionally, a suture may start to dissolve and a loose end may begin hanging by a thread which can irritate your tongue. If you feel confident, you can carefully trim the loose end. Before attempting to remove a suture, it's important to ensure your instruments are clean. You can sterilise small nail scissors and tweezers by placing them in a cup of boiling water for approximately 10 minutes. Allow them to cool completely before use.

Once your instruments are sterilised and cooled, use the small nail scissors to snip the stitch, and then if needed gently remove it with tweezers by pulling on the knot end. Avoid pulling the knot through the healing gum, as this can be quite uncomfortable.

If you prefer, we are happy to remove the sutures for you. Please call the practice and request a 5-minute appointment for suture removal. We do not routinely charge for this, provided there are no other issues to address.

Day 14 (Two Weeks Post-Extraction)

By two weeks, the extraction site should exhibit clear signs of healing:

Expected Observations:

- New epithelial tissue has formed over the extraction site, displaying a natural pink colour.
- Any residual granulation tissue should be largely replaced.
- The area may still be somewhat sensitive, but overall discomfort should be significantly reduced.

• Guidance:

You may begin to gradually reintroduce a broader range of foods while continuing to maintain meticulous, gentle oral hygiene. Report any unexpected discomfort or signs of infection.

One Month Post-Extraction

At approximately one month, most of the initial healing phases will have concluded:

Expected Observations:

- The gum tissue appears more mature and is largely restored to its natural state.
- Minor irregularities in the gum contour may be present but typically refine over time.
- Any residual sensitivity should be minimal.

Guidance:

You can start incorporating a wider variety of foods into your diet. Continue with regular oral hygiene and attend any scheduled follow-up appointments to ensure that healing is progressing as expected.

Three Months Post-Extraction

By three months, the extraction site should be well integrated:

• Expected Observations:

- Fully mature tissue with complete remodelling of both soft and hard tissues.
- Bone and gum tissues will have consolidated, providing stable support for normal oral function.
- o Any minor discomfort should have resolved entirely.

Guidance:

Regular dental care and monitoring remain important to maintain long-term oral health.

Follow-Up and Long-Term Dental Health

Chronic or Abscessed Tooth Recovery:

If your extraction was related to a chronic or abscessed tooth, you should notice an overall improvement in oral comfort, reduced pain, diminished swelling, and a gradual return to normal function. These are all positive indicators of recovery.

• Routine Check-Up:

If you have not had a formal dental check-up with X-rays in the past 12 months, we recommend scheduling an appointment with Scott in 4 weeks. This will allow for a comprehensive assessment of your overall dental health and the progress of your healing.

• Tooth Replacement Discussion:

If tooth replacement options were discussed or if you wish to explore them further, please arrange an appointment with Scott at the 6-week mark for a comprehensive evaluation. If you are uncertain, please email Scott at **scott@northshoredental.co.nz** with your thoughts, and he will advise on the next steps.

• Preventative Dental Care:

Scott generally recommends that all patients attend a dental hygiene appointment every 6 months. If you have not had a hygiene appointment in the last 6 months, please consider booking one. For any uncertainties regarding preventative care, do not hesitate to email Scott.

Should you have any questions or notice any unusual symptoms at any stage of your recovery, please email Scott at **scott@northshoredental.co.nz**. If concerns arise over the weekend, please do not worry—Scott is happy to help and prefers to be contacted by text message at **021737537**.

Best regards,

Dr. Scott Waghorn BDS (Otago)

Additional Information: Homeopathic Remedies and Probiotics

Arnica: Some patients find Arnica helpful in managing post-extraction swelling and bruising. Arnica's effects are thought to be related to its potential to reduce inflammation.

- **Arnica 30C**: Take one pillule (small tablet) every 2 hours for the first day, then reduce to three times daily for the next 2-3 days.
- Commence Dosing: Start taking Arnica as soon as possible after the extraction.
- Continue Use: Continue until the swelling and bruising have subsided.

Chamomile: Chamomile is another option that some patients find helpful for post-extraction recovery. It is known for its anti-inflammatory and calming properties. These properties are due to compounds in chamomile that may interact with the body's inflammatory pathways. It can be used as a tea or as a cold compress.

- **Chamomile Tea**: Drink a cup of chamomile tea 2-3 times a day. Make sure the tea has cooled down.
- **Cold Compress**: Make a strong brew of chamomile tea, cool it completely, soak a clean cloth in the tea, and apply it to the outside of your cheek near the extraction site for 15-20 minutes, 2-3 times a day.

Probiotics: It is becoming increasingly well-recognised that taking probiotics can be effective if you have been prescribed antibiotics. Antibiotics can disrupt the natural balance of bacteria in your gut, which can lead to digestive issues. Probiotics may help restore this balance by introducing beneficial bacteria.

- **Timing**: Take the probiotic at a different time of day from your antibiotic dose (e.g., if you take your antibiotic in the morning and evening, take the probiotic at midday).
- **Dosage**: Follow the instructions on the probiotic supplement packaging.
- **Continue Use**: Continue taking the probiotic for at least a week after you have finished your course of antibiotics.

ADD-ON: Socket Preservation Information (If Applicable)

For patients who have undergone socket preservation procedures, the healing process involves additional considerations:

Biological Process:

Socket preservation involves placing a graft material into the extraction site to maintain bone volume and structure. Over time, this material integrates with the natural bone through osseointegration.

Early Healing:

The preserved socket may appear slightly different, with the graft material visible as a white or opaque area. Although the normal blood clot and granulation tissue formation will occur, extra care is needed due to the presence of the graft material.

Care Instructions:

- Follow the same gentle rinsing and oral hygiene protocols as outlined above, but exercise extra caution around the socket area.
- Avoid vigorous rinsing or probing that might dislodge the graft material.
- o Adhere strictly to dietary recommendations to prevent trauma to the site.

Follow-Up:

Attend all scheduled appointments so that the integration of the preservation material can be monitored, ensuring optimal bone healing and preparation for any future restorative procedures.

ADD-ON: Oral Sedation Information (Diazepam)

For patients who received oral sedation with Diazepam, additional post-operative instructions are provided:

Sedation Effects:

Oral sedation may result in prolonged drowsiness, mild dizziness, and slower reaction times. Allow extra time for the sedative effects to wear off.

• Immediate Post-Operative Period:

Plan for an extended period of rest, as the sedative may delay your alertness and coordination. Avoid driving, operating machinery, or making important decisions until you are fully alert.

Day 3–4 Monitoring:

If, after initial improvement, you notice a sudden return of pain or an aching sensation, please text Scott with a detailed update of your symptoms. This could indicate a post-operative infection.

 Scott can, if necessary, provide a phone prescription by contacting your preferred pharmacy. Please update Scott via text after 3–4 days if these symptoms occur.

Pain Management:

Continue taking pain relief as required. If you experience side effects from Paracode or Naproxen (such as nausea, dizziness, or stomach upset), please switch to Panadol, which is generally better tolerated.

 Consistent pain management is crucial during the sedation recovery phase.