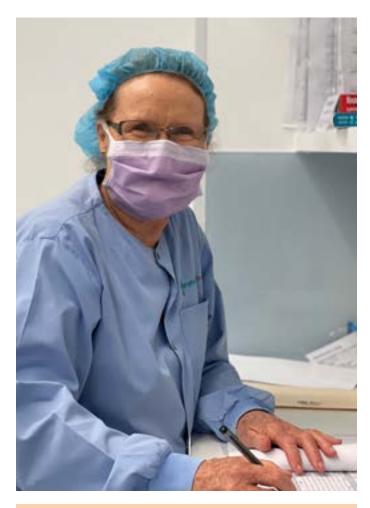
Anaesthesia for Oral Surgery



This brochure will give you information about anaesthesia for oral surgery. If you have any questions, you should ask your specialist or relevant health professional.

If you need to undergo oral surgery, preparation will help to ensure that the experience is a positive one.

The aims of this pamphlet are to:

- Provide you with necessary information about anaesthesia for oral surgery
- Encourage you to ask questions of your anaesthetist
- · Help you approach the planned procedure positively

Types of surgery

Oral surgery involves operations within the mouth. Some of the surgeries include:

- Removal of teeth, for either orthodontic work, due to crowding or due to repeated infections.
- · Exposure of teeth which have not erupted
- Titanium Implant surgery to replace missing teeth.
 A dental implant is a titanium fixture surgically placed

- into the jawbone that acts as a root like support for permanent artificial teeth
- Major jaw surgery that can involve the upper jaw, the lower jaw or both
- Tongue tie
- Tongue or mouth biopsies and cancer surgery

You are in good hands

Australia is one of the safest places in the world to have an anaesthetic. Specialist anaesthetists in Australia are highly trained medical specialists. They have gone to medical school, completed an internship and spent at least five years undergoing specialist anaesthetic training. Training includes anaesthesia, pain management, resuscitation and the management of medical emergencies.

Before the surgery

Your anaesthetist will want to know about your medical history. This may include seeing them in their rooms or a telehealth consultation before the date of your surgery. You might need further tests or consultations with other medical and health specialists before your surgery. Although these tests and investigations may delay your surgery, having you in the best condition prior to surgery is crucial to a successful outcome and to your long-term health. Sometimes there may be a delay between your consultation and the date of your surgery. You must notify your anaesthetist if you develop any new medical conditions during this time.

Your medications

Most medications can continue up until surgery. Blood thinners and diabetic medication require special consideration and you will be given specific instructions on what to do with these medications. If you are unsure, please ask your surgeon or your anaesthetist.

Preparation

Before your surgery, you will need to fast and not consume food or clear liquids. Generally, this is no food six hours prior to surgery and no clear liquids for two hours, however your anaesthetist will discuss this with you before the procedure.

What to expect

Oral surgery can be performed with a numbing local anaesthetic, intravenous sedation or general anaesthesia. The type of anaesthesia is heavily dependent on the type of surgery, but also the preference of the anaesthetist or the patient.

Local Anaesthesia: Local anaesthetic medicine is injected at the site of the surgery to make you numb. You will be awake but feel no pain.

Sedation: This is sometimes called 'twilight anaesthesia' and is medication given intravenously to make you relaxed and drowsy. This is not the same as general anaesthesia and sometimes people remember parts of the operation, particularly conversations. Sedation can be given in combination with local anaesthesia.

General Anaesthesia: General anaesthesia is what people describe as 'going to sleep'. The anaesthetist will insert a cannula into your vein and attach fluids (a drip). Before going under a general anaesthetic, you will usually be asked to breathe oxygen through a mask. Anaesthetic medications are usually given through the cannula to start the anaesthetic. Once you are fully 'asleep' a breathing tube will be placed in your windpipe to help with your breathing during surgery.

Your anaesthetist will keep you 'asleep' and monitor you during the entire operation. It is normal to feel drowsy as you wake up.

For young children having oral surgery, one parent may be able to stay with their child until they are 'asleep'. The parent can often come to the recovery room as the child wakes up.

Post-Surgery

Oral surgery does not usually require strong pain-relieving medications, but they will be available if you need them. Your pain relief will be discussed when you meet your anaesthetist.

If you have had sedation or a general anaesthetic, it is normal to feel drowsy as you wake up. You may also experience some discomfort, pain or nausea. There will often be medications to treat these given to you on a regular basis. If they are not improving your pain or nausea, please ask your nurse for extra medication. You may also notice a dry or sore throat or have a headache. However, this usually passes in 1-2 days. Generally, you can expect to go home on the same day as your surgery. Please confirm this with your surgeon and/or anaesthetist before you have surgery. Some oral surgeries however, such as major jaw surgery will often require one or two nights in hospital.

If you have had sedation or a general anaesthetic and are returning home on the day of the surgery, you must have an adult with you for 24 hours after the procedure. For safety reasons it is important that you refrain from the following for up to 24 hours after receiving the anaesthetic: drinking alcohol, driving a car, operating machinery.

Risks to be aware of

Major complications with anaesthesia for oral surgery are uncommon when anaesthesia is administered by a specialist anaesthetist.

Sedation or general anaesthesia can make you feel drowsy afterwards. Nausea and vomiting are not uncommon and anti-nausea drugs will be available. Other short term side effects can include bruising, fatigue, headache, sore throat or sleep disturbance. You may experience other complications such as damage to the teeth, breathing problems or muscle pains.

While extremely rare, serious side effects such as severe allergic reaction, heart attack, stroke, seizure, lung damage, pneumonia, eye injury, damage to the vocal cords or infection exist. Remember that the risks of these more serious complications, including death, are very rare.

You are encouraged to ask your anaesthetist any questions you may have. They will be more than happy to answer them and discuss the best and safest plan for you and your surgery.

The brochure provides general information about anaesthesia for oral surgery. It is not a substitute for advice provided by your specialist about your personal treatment plan.

Every effort is made to ensure that the information is accurate and up to date. However, we do not guarantee or warrant the accuracy or completeness of the information provided.

This information may change with time due to advancements in clinical research and knowledge. Use this brochure only in consultation with your specialist.

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