



OSSEOUS SURGERY

Osseous surgery, also called pocket reduction surgery, eliminates bacteria, recontours defects in the bone and makes the areas affected more cleansable for you. During your periodontal exam, your specialist will measure the pocket depths of your gums and review the findings with you. Ideally these measurements should not exceed 3 millimeters. When a pocket measures greater than 6 millimeters, cleaning the area becomes challenging at home and during a professional cleaning from a dental hygienist. It is at this point that you will be recommended to have scaling and root planing (SRP) completed. If after your 1 month SRP re-evaluation appointment you still have pockets greater than 6 millimeters, surgical intervention may be required.

When the deep pockets cannot be adequately cleaned, bacteria will start to destroy the gums and bone that surround your teeth. If left untreated, the pockets will continue getting deeper and the tooth will become loose and it increases the chance it will be lost. Eliminating or reducing pockets created by gum disease is the primary aim of osseous surgery.

On the day of your surgery, your periodontist will get you properly numb by using a local anesthetic. A small incision is made in your gum line by your periodontist to fold back your gums and remove the bacteria beneath. After removing the bacteria, your periodontist will smooth down areas of the bone to help make the area more cleansable for you at home. If you have severe bone damage, a periodontal regeneration technique may be recommended. Your doctor will talk more about these procedures if they are required. Your gums are put back together using sutures. Your doctor will want to see you in for follow-up visits to ensure things are healing adequately.

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What to expect:

- Prescriptions
- Spaces between teeth
- Possible exposure of crown margins
- Possible increase in mobility
- Sensitive to temperature
- Mild/moderate discomfort
- Inflammation
- Possible gum recession on adjacent teeth
- Sutures
- Post-op appointments
- If you take ASPIRIN, continue to take it
- If you take blood thinning medications, please follow your periodontist and doctor's instructions on taking it prior to surgery

Pre op instructions:

- No caffeine the day of procedure
- No alcohol the day before and day of the procedure
- No smoking at least 1 week prior to and after procedure.

Post op instructions:

- Soft food diet following surgery; no carbonation
- No straws, spitting, hard swishing
- Avoid heavy lifting/exercise
- Must maintain good oral hygiene
- Soft toothbrush use for the first week
- Ice pack for first 24 hours only
- StellaLife Rinse 3x a day until bottle is finished
- For pain control and reduction of swelling, take 600 mg Ibuprofen (this is 3 over the counter 200mg tablets), wait 3 hours then take 500mg Tylenol (1 over the counter tablet) and continue to alternate medications every 3 hours. If this does not control your pain, take the 600 mg ibuprofen and 500 mg Tylenol at the same time, every 6 hrs.
- If medications were prescribed, please follow the instructions on the bottle for their use.