

Alveotomy of the Wisdom Tooth: Indications and Contraindications in Theory and Practice

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Summary

In 1979 the National Institute of Health reached agreement on indications and contraindications for extraction of the wisdom tooth. In situations where there are indications special attention should be paid to the general health of the patient and local factors.

The following are considered strict indications. Frequent pericoronitis, abscesses, pulpal and periapical pathology, caries, periodontal diseases, cystic and tumorous lesions and external resorption of the second molar, caused by the wisdom tooth.

Other indications are: autogeneic transplantation on the site of the first molar, fracture lines on the

site of the wisdom tooth, specific medical situations such as cardiac valvular disease or radiotherapy, when there is a risk of infection etc.

Contraindications for extraction of the wisdom tooth are: normal eruption and justified function in dentition, deep impaction without local and systemic disturbance, potential disruption of the integrity of neighbouring structures by alveolectomy, unacceptable risk for the health of the patient, and the age of the patient.

Correct diagnosis must be preceded by case history, clinical extraoral and intraoral examination, and radiographic treatment, i.e. orthopantomographic recording.

The correct decision depends on a large number of factors, and if the anatomic structures allow, eruption should be awaited and special attention paid to the age of the patient.

The aim of this investigation was to present the reasons for which alveolectomy of wisdom teeth can be performed in the dental surgery.