

#### International Journal of Research Publication and Reviews

Journal homepage: <a href="https://www.ijrpr.com">www.ijrpr.com</a> ISSN 2582-7421

### A Survey on Patients' Perception, Awareness and Experience of Third Molar Removal

<sup>1</sup>Dr.K. Mohamed Afradh, MDS; <sup>2</sup>S Dihitha; <sup>3</sup>Dhivya Dharshini. K; <sup>4</sup>Dr. K. Senthil Kumar., MDS; <sup>5</sup>Dr.C.S.C Satish Kumar., MDS.

#### ABSTRACT:

Third molar or wisdom tooth extraction is a surgical procedure to remove one or more wisdom teeth- the four permanent adult teeth located at the back corners of the mouth on the top and bottom. If a wisdom tooth doesn't have room to grow (impacted wisdom tooth), resulting in pain, infection or other dental problems, one will likely need to have it removed. Third molar extraction is may be done by a dentist or an oral surgeon. To prevent potential future problems, some dentists and oral surgeons recommend wisdom tooth extraction even if impacted teeth aren't currently causing problems.

KEYWORDS: Anaesthesia, Anxiety, Fear, Oral Surgery, Pain, Third Molar Extraction

#### **BACKGROUND:**

#### INTRODUCTION:

Pain is the most feared factor when it comes to wisdom tooth extraction<sup>1</sup>. The most crucial elements for third molar surgery patients are assurance and effective pain management, and this assurance should begin at the time of appointment booking rather than on the day of surgery. Issues with third molars are often painful. You can feel more anxious than usual in addition to the discomfort of having to cope up with a problematic wisdom tooth<sup>2</sup>. If one have a dental phobia, they could become anxious about visiting the dentist and the possibility of needing an extraction<sup>3</sup>. One can get the care they require and overcome their worries if they can fully comprehend the problems caused by wisdom teeth and how they are fixed. One can also take actions to lessen your anxiety and concerns about receiving treatment<sup>4,5</sup>.

#### AIM:

The aim of the current survey was to measure the level of anxiety experienced prior to and right after the surgical removal third molars and to know their experience of this clinical procedure. The purpose of this survey is to determine the patient's perception, experience and awareness regarding third molar removal. This survey is to assess patients fear and anxiety before the extraction procedure and to know their experience of third molar removal.

#### **METHODOLOGY:**

The survey was conducted in an online based questionnaire format in google forms and was sent to various groups of people who have undergone third molar Extraction. It is an online-based cross-sectional self-administered Questionnaire survey comprising of 15 relevant questions were used for assessment among 100 patients across North Chennai, India. The responses of each question among hundred patients are collected, summarized and analysed. The statistical analysis through percentage is then interpreted and a conclusion is formatted.

<sup>&</sup>lt;sup>1</sup>Reader, Department of Oral and Maxillofacial Surgery; Thai Moogambigai Dental College and Hospital

<sup>&</sup>lt;sup>2</sup>Junior Resident; Department of Oral and Maxillofacial Surgery; Thai Moogambigai Dental College and Hospital

<sup>&</sup>lt;sup>3</sup>Junior Resident; Department of Oral and Maxillofacial Surgery; Thai Moogambigai Dental College and Hospital

<sup>&</sup>lt;sup>4</sup>Professor, Department of Oral and Maxillofacial Surgery; Thai Moogambigai Dental College and Hospital

<sup>&</sup>lt;sup>5</sup>Reader, Department of Oral and Maxillofacial Surgery; Thai Moogambigai Dental College and Hospital

#### STATISTICAL ASSESSMENT:

The statistical analysis of the above survey gives us key data. The interpretation is as follows:

A total of 33% patients have undergone third molar surgery because of pain, while 27% have due to decay and food lodgement issues. 24% of patience had their third molars removed for orthodontic treatment purpose and 13% had them removed on dental practitioners' advice.

An astounding 69% of patients have experienced fear before their extraction procedure while 31% of patients are fine.

A majority of 70% patients were able to communicate their fears with their dental practitioner while 30% could not express their concerns and doubts to their doctor.

A total 60% of patience were aware of this surgical procedure before the treatment while the 40% have no knowledge about the treatment methodology.

77% of the patients were aware of both risk and benefits of the third molar extraction while 23% of the patients were lacking this awareness.

A majority of 62% patients have felt anxious while waiting in the lobby of the hospital before the procedure while the other 38% of patients have experienced little to no anxiety.

A total of 52% patients had felt severe pain during the third molar surgical removal procedure while 48% of the patients have little to no pain and discomfort.

51% of patients have experienced mild pain during surgical removal of 3<sup>rd</sup> molar while 22% of patients had moderate pain whereas 27% of patients have felt severe pain.

A total of 54% patients have felt only minimal pain 3-4 days post procedure whereas 27% had moderate pain and 19% of patients have experienced greater pain even 3-4 days after the procedure.

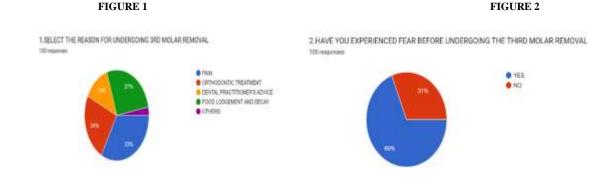
A total of 50% the patients had experienced complications or other uncomfortable conditions after the third molar removal surgery and other 50% were normal.

Out of all the complications or the discomfort faced by the patients a majority of 31% have faced difficulty in mouth opening whereas 25% experienced ulcer and swelling. Numbness and prickling sensation seen in 12%, 11% have faced other complications.

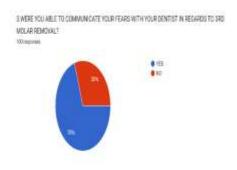
51% of patients have faced complications out of which 38% have visited the dentist to treat the complications whereas the other 13% did not face any complications.

52.5% of patients thinks fear of post extraction complication as a reason to neglect third molar extraction while the other 25.2% think treatment cost as n cause of neglect. The other 22.2% think extraction of third molar will affect the aesthetics.

50% of patients had the knowledge on this treatment anaesthesia options while the other 50% were not aware. Majority of 77.8% of patients were willing for surgical removal under general anaesthesia while the 22.2% of the patients were not fine with general anaesthesia procedure.

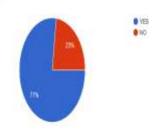


#### FIGURE 3



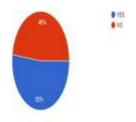
#### FIGURE 5

# S. WERE YOU AWARE OF BOTH MISKS AND BENEFITS OF 3RD MOLAR REMOVAL AFTER. UNDERGOING THE PROCEDURE? 100 regardens.

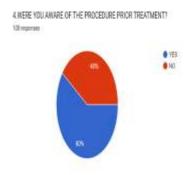


#### FIGURE 7



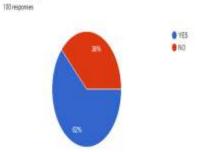


#### FIGURE 4



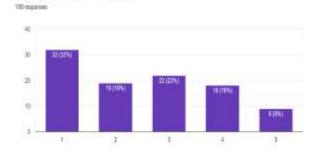
#### FIGURE 6

## 6.HAVE YOU FELT ANXIOUS AND UNEASY WHILE WAITING IN THE LOBBY BEFORE EXTRACTION PROCEDURE?



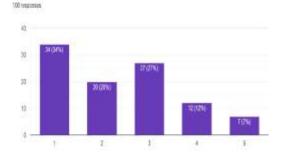
#### FIGURE 8

## BILEVEL OF PAIN AND DISCOMFORT EXPERIENCED ON THEDAY OF 3RD MOLAR REMOVAL OR IMMEDIATELY AFTER THE PROCEDURE



#### FIGURE 9

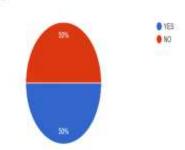
9.RATE THE LEVEL OF PAIN AND DISCONFORT EXPERIENCED AFTER 34 DAYS AFTER EXTRACTION



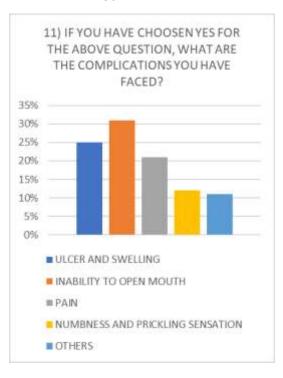
#### FIGURE 10

10.DID YOU FACE ANY COMPLICATIONS/CONDITIONS WITHIN 14 DAYS AFTER REMOVAL OF 3RD MOLAR PROCEDURE?

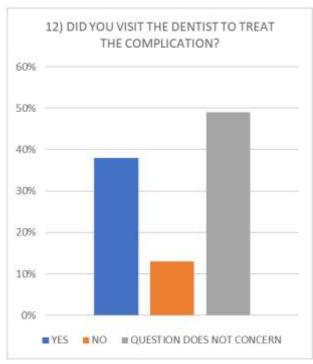
100 responses

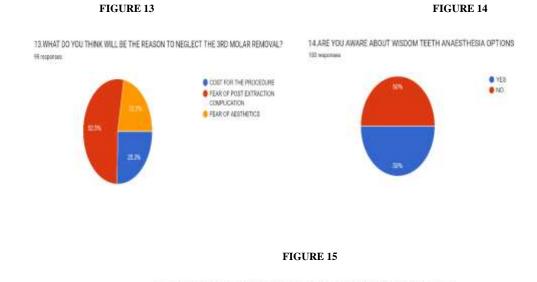


#### FIGURE 11



#### FIGURE 12





# 77.4%

#### **DISCUSSION:**

Surgical removal of third molars is a commonly performed procedure in dentistry. It has relatively low post operative life-threatening complications and faster recovery time. A lot of patients are frightened or anxious about undergoing third molar removal surgery<sup>6</sup>. Awareness among the patients regarding third molar extraction procedure including their perception and experience is analysed and discussed. The results from the pre treatment questionnaire in the study suggested that majority of the patients had experienced fear and anxiety before the treatment.

15.IF YOUR DENTIST RECOMMENDS GENERAL ANAESTHESIA OPTION WOULD YOU AGREE?

O YES

For many patients, their fear of this surgical procedure is really the fear of the unknown. Patients may be imagining a more intense, painful scenario than what they are actually going to experience<sup>7,8</sup>. To prevent oneself from doing this, It is important to become aware about the procedure before it begins. Ask your doctor questions about what you can expect. They will be happy to give you a briefing of what your appointment is going to look like<sup>9,10</sup>. This way, there won't be any unnecessary surprises for you to be anxious about 11,12.

Postoperative complications are a potential risk of any surgical procedure. Common postoperative complications of wisdom tooth surgery include pain, bleeding, trismus, swelling, infection, alveolar osteitis, delayed healing and sensory disturbances in the distribution of the inferior alveolar and lingual nerves, and occasionally the mylohyoid nerve<sup>13</sup>.

According to this study 50% of the patience have experienced post operative complications and difficulties. Conditions that may contribute to the incidence and severity of postoperative complications include the length of operation, surgical techniques implemented, including flap design, irrigation and management of soft tissues, as well as the use of dressings, mouthwashes and prophylactic antibiotics<sup>14</sup>. However, with careful assessment and treatment planning, they may be minimised. This involves appropriate patient preparation, an aseptic technique, meticulous management of the hard and soft tissues, the use of controlled force when applying surgical instruments, haemostasis and adequate adherence to postoperative instructions.

#### **CONCLUSION:**

Based on the results of this survey study, it can be Concluded that dental extraction still remains as one of the most feared and anxious procedure and there is significance perception of pain, discomfort or anxiousness among the patients<sup>15</sup>. Though Patients move to a comfort level after

anaesthesia and through the procedure, the post operative normalcy to routine activities is as late as ten days for many Patients<sup>15</sup>. Also, the experience of third molar removal actually increased their anxiousness when they had to seek further dental treatments. These findings infer the need to incorporate altered protocols and novel Techniques for enabling a less stressful surgical procedure While removing third molars.

#### REFERENCES

- <sup>1</sup> Lago-Méndez L, Diniz-Freitas M, Senra-Rivera C, Seoane-Pesqueira G, Gándara-Rey JM, Garcia-Garcia A. Dental anxiety before removal of a third molar and association with general trait anxiety. J Oral Maxillofac Surg 2006;64:1404-8.Vallerand WP, Vallerand AH, Heft M
- <sup>2</sup> Earl P. Patients' anxieties with third molar surgery. Br J Oral Maxillofac Surg. 1994 Oct;32(5):293-7. doi: 10.1016/0266-4356(94)90049-3. PMID: 7999736.
- <sup>3</sup> Armfield JM, Pohjola V, Joukamaa M, Mattila AK, Suominen AL, Lahti SM. Exploring the associations between somatization and dental fear and dental visiting. Eur J Oral Sci 2011;119:288-93.
- <sup>4</sup>Hägglin C, Hakeberg M, Ahlqwist M, Sullivan M, Berggren U. Factors associated with dental anxiety and attendance in middle-aged and elderly women. Community Dent Oral Epidemiol 2000;28:451-60.
- <sup>5</sup> Yusa H, Onizawa K, Hori M, Takeda S, Takeda H, Fukushima S, et al. Anxiety measurements in university students undergoing third molar extraction. Oral Surg Oral Med Oral Pathol Oral Radiol Endod 2004;98:23-7.
- <sup>6</sup>Aliabadi E, Tavanafar S, Ghorbani F, Karimpour H. Anxiety in patients undergoing surgical extraction of mandibular third molars. J Oral Res Rev 2020;12:82-6
- <sup>7</sup>Eitner S, Wichmann M, Paulsen A, Holst S. Dental anxiety-an epidemiological study on its clinical correlation and effects on oral health. J Oral Rehabil 2006;33:588-93
- <sup>8</sup>Wang, Tze-Fang RN, MSNa,\*; Wu, Ya-Ting RN, MSNa; Tseng, Chien-Fu D.D.S., MSb; Chou, Chyuan D.D.S., Dr.PH.c. Associations between dental anxiety and postoperative pain following extraction of horizontally impacted wisdom teeth: A prospective observational study. Medicine: November 2017 Volume 96 Issue 47 p e8665 doi: 10.1097/MD.000000000000008665
- <sup>9</sup> Bergdahl M, Bergdahl J. Temperament and character personality dimensions in patients with dental anxiety. Eur J Oral Sci 2003;111:93-8.
- <sup>10</sup> Abrahamsson KH, Berggren U, Hakeberg M, Carlsson SG. Phobic avoidance and regular dental care in fearful dental patients: A comparative study. Acta Odontol Scand 2001;59:273-9.
- <sup>11</sup> Eli I, Schwartz-Arad D, Baht R, Ben-Tuvim H. Effect of anxiety on the experience of pain in implant insertion. Clin Oral Implants Res 2003;14:115-8
- <sup>12</sup> McGrath C, Bedi R. The association between dental anxiety and oral health-related quality of life in Britain. Community Dent Oral Epidemiol 2004;32:67-72.
- <sup>13</sup> The effects of postoperative preparatory information on the clinical course following third molar extraction. J Oral Maxillofac Surg 1994;52:1165-70.
- <sup>14</sup> Scott LE, Clum GA, Peoples JB. Preoperative predictors of postoperative pain. Pain 1983;15:283-93.
- <sup>15</sup> López-Jornet P, Camacho-Alonso F, Sanchez-Siles M. Assessment of general pre and postoperative anxiety in patients undergoing tooth extraction: A prospective study. Br J Oral Maxillofac Surg 2014;52:18-23