

Re: Extraction and Filling

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On Thu, 20 Oct 2005 18:48:42 GMT, Mark & Steven Bornfeld
<bornfeldmung@xxxxxxxxxxxxxxxxxxx> wrote:

>kylecline@xxxxxxxxxxx wrote:

>

>> I've got a question and I'm hoping to get a bit of advice, maybe from a
>> dentist here or someone with experience. I'm 31 and just got my first
>> cavity because my wisdom tooth on the lower left has oblique angle and
>> is pressing against the tooth in front of it. Where it is touching,
>> there is a cavity. So, my dentist says I should have an oral surgeon
>> extract the wisdom teeth on the left side, then come back in after it
>> is healed to get the cavity filled. I went for a second opinion. The
>> second dentist gives the same prognosis. But he recommended a
>> particular oral surgeon and said that if I coordinate, he will come to
>> the oral surgeon's after the extraction and do the filling while I am
>> under general anesthesia.

>>

>> So, I have a couple of questions:

- >> 1. Is this something that is normal? It seems strange to me that a
>> doctor would work in a different doctor's office.
- >> 2. Why would the first dentist recommend the two-step procedure
>> instead of a one-step procedure?
- >> 3. Is it possible to fill a cavity on a tooth that is adjacent to a
>> messy and swollen gum site of extraction?

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>> I'll check for responses here and in my email.

>>

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> It is a bit unusual. I think it's a great arrangement for you, given
>that general anesthesia is anticipated. This is a significant sacrifice
>by the restorative dentist.

> As far as placing the filling, if it is a resin filling I can see some
>potential problems, esp. regarding knocking out any clot, or perhaps
>some oozing interfering with any bonding procedure. If the socket is
>tightly sutured, it probably wouldn't be a problem for the extraction.
>But the dentist who sees you will be in a much better position to tell
>if there are any real risks.

>

>Steve

Re: Extraction and Filling

Not to mention using an air-driven high-speed handpiece adjacent to an open wound which will not be water tight regardless of suturing. It isnt the cleanest of surgical environments to begin with. I have dealt with enough post-op infections that arose a few days after cleanings that were preceeded by wizzie removal by only a few weeks. I would recommend waiting until the mucosa is healed alot better, say 4-6 weeks.

dave