

## Re: More Wisdom Tooth Advice Needed

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  - *Date:* 29 Jun 2006 22:40:27 -0700
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It could also be a small bone fragment.  
Have it looked at.

Steven Bornfeld wrote:

Unimobiles.com wrote:

Hi,

I posted here on 7/6/06, to which helpful replies were written regarding a broken wisdom tooth. I am now 3 weeks post part-removal of tooth.

After about 5 days of agonising pain I realised I needed to take 3 Ibuprofen's a day and took Ibuprofen's up till 17/6 where the suffering seemed to stop. In all it was about 10 days of hell.

The gum has completely regrown over the broken tooth so I don't have to eat on the corner of one side anymore, HOWEVER...

when I brush my teeth I have to avoid brushing in the gum area where the broken tooth is still located underneath. If I push my toothbrush through normal brushing over the gum area where the broken tooth is located underneath, then it's mildly painful. Same if any food gets stuck in there and I'm munching.

I'm concerned the broken tooth is going to break through what feels like a fragile piece of gum and push me back into agony.

I'm also concerned I'm learning to avoid brushing this area which means the tooth next to it won't get brushed properly and will also decay. At the moment I'm very carefully trying brush the tooth next to gum area covering the broken tooth. But I don't think it's adequate.

Do I need to go back to the Dentist and tell him to refer me to the hospital to remove the broken tooth under anesthetic? It certainly would not be convenient to do now, I can't afford another week off work for a few months at least.

## Re: More Wisdom Tooth Advice Needed

Can I put off removing this broken tooth or should I get it sorted out now so I can brush properly? If I asked for a referral now, it would be some time (probably 2 months) , given that the NHS always has a waiting list.

Tough call. Of course the entire tooth should have been removed the first time. You may just be having some residual soreness still from the extraction attempt. It is also possible that the retained part of the root is just under the gum and the pain in fact is from squeezing the overlying gum against the hard (and possibly sharp) residual tooth surface.

It is impossible to say without looking at an x-ray what is going on there. I'm inclined to say to have the remaining tooth removed—but that's easy for me to say. I'd feel more comfortable about recommending its removal if I could see an x-ray. Then it would be easier to be sure that the cure won't be worse than the disease (that is, retaining the tooth).

Steve