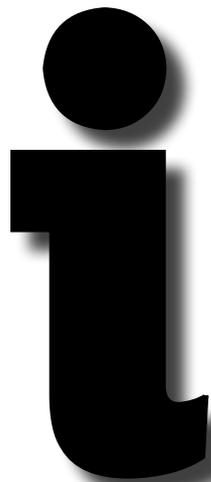


# Single Jaw Osteotomy *(page 1 of 4)*



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: [customer care@salisbury.nhs.uk](mailto:customer care@salisbury.nhs.uk)

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: [www.salisbury.nhs.uk/FriendsFamily](http://www.salisbury.nhs.uk/FriendsFamily) or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

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Osteotomy - surgery on the bones of the upper jaw (maxilla) or lower jaw (mandible).

This leaflet has been designed to improve your understanding of your forthcoming treatment and contains answers to many of the common questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask your surgeon or orthodontist.

## **Why do I need surgery?**

It has not been possible to correct your facial appearance and the bite of your teeth with orthodontics alone. This is because the bones of your face and jaws are out of balance with one another. Surgery aims to change the relationship between jaws to correct the imbalance. An osteotomy is a operation whereby a bone is cut to shorten, lengthen, or change its alignment. The surgery will take place under a general anaesthetic, i.e. you will be asleep.

## **What does the operation involve?**

The operation is normally performed from inside your mouth to minimise visible scars on the skin of your face. A cut is made through the gum behind the back teeth on the lower jaw and above the roots of the teeth in the upper jaw to gain access to the jawbone. The jaw is then cut, moved into its new position and held in place with small metal plates and screws. These are usually permanent. The gums are stitched back into place with dissolvable stitches.

The metal that is used is titanium which does not set off metal detectors in airports.

## **What can I expect after the operation?**

You may wake up to find elastic bands connected to the teeth of the upper and lower jaw. Please don't be alarmed. These help keep your jaws in the correct healing position but do restrict you ability to open your mouth.

Immediately after the operation your face will be swollen and feel tight, your jaws will be stiff and you will find that you cannot open your mouth widely. Your throat may be sore and swallowing can be difficult to begin with.

Swelling and bruising varies but is generally worst on the second or third

day after the operation. The swelling can be reduced by using cold compresses and sleeping propped upright for a few days. Most of the swelling will disappear after a fortnight but there is often some subtle swelling that can take several months to go down.

Your face and jaw may be sore but this can be controlled with regular dissolvable painkillers (analgesics). These are normally paracetamol and ibuprofen or volterol depending if you are sensitive or not to non steroidal analgesics. These need to be taken as directed on the packets, usually 4 to 6 hourly for 5 to 7 days. The discomfort is usually worse for the first few days although it may take a couple of weeks to completely disappear. If you need extra pain relief please contact your GP rather than the Emergency Department.

To reduce the risks of wound infection and to promote healing you will be given antibiotics through a vein in your arm. You will be sent home with a course of antibiotics.

## **Can I eat normally after surgery?**

To begin with, no. For the first day or two you will only want liquids. You might find drinking difficult as your lips may be numb and swollen causing dribbling. To reduce this we recommend using a child's drinks beaker which controls the liquid flow. Alternatively 20ml to 50ml syringes with a plastic quill or straw may be used to squirt liquids into the mouth. The ward or your local chemist can supply these.

During the first week you might like to try meal supplements like Complan Shake or Fortisip to maintain nutritional input and reduce the risk of weight loss. Try a few of the supplements from the chemist before surgery to find out which flavours you like or don't mind!

You should be able to manage a pureed or soft diet by the end of the first week after surgery, gradually building up to normal food over 4 to 5 weeks. This may seem a long time but its important not to place stress on the screws and plates that are holding the jaw in place. You will be given an advice sheet on the most appropriate foods and how to prepare them at your preadmission visit. Please phone the dietitian with any questions. You will find their telephone number at the end of this leaflet. On Laverstock Ward a dietitian is also available for advice.

## **How should I keep my mouth clean after surgery**

In much the same way as before. Use a small headed tooth brush to clean round any wires and elastic bands. You will need to use a chlorhexidine (Corsodyl) mouth wash 3 times a day or after meals until the gums are healed. This lowers the levels of bacteria in the mouth reducing the risk of infection. This should be bought from the chemist before your surgery. We advise you to brush your teeth before using the Corsodyl mouthwash, as this reduces the amount of staining caused. Warm salt water mouth washes are also useful at regular intervals or after supplements to remove food particles. Vaseline can be used to reduce dry, cracked lips.

## **How long will I be in hospital?**

We aim to discharge you the day after surgery but only if you are able to drink enough, your pain is controlled and you can walk to the toilet. Before you leave hospital the position of

your jaws will be checked with X-rays and fine adjustments may be needed to any elastic bands.

## When can I return to normal activities?

The time that people take of work varies from person to person and also depends on what kind of job you do. We recommend that most people have 2 to 3 weeks off work. The ward can give you a Statement of Fitness for Work (fit note) if you need one. It is important to remember that you will not be able to drive or operate machinery for 48 hours after a general anaesthetic.

Do not do any leisure or sports activities which may involve contact to the face for 3 to 6 months which is the time it takes the bones to fully heal.

## What are the possible problems?

There are potential complications with any operation. Fortunately with this type of surgery complications are rare. However it is important that you are aware of them and have the opportunity to discuss them with your surgeon.

- **Bleeding** – some oozing from the cuts inside your mouth on the night of operation is normal and to be expected. Significant bleeding is very unusual but if it happens it can usually be stopped by applying pressure with a rolled up handkerchief or swab over the area for at least 10 minutes.
- **Numbness** – your lips and gums will be numb and tingly after the operation, similar to the sensation after having an injection at the dentist. This numbness may take several months to disappear and in a minority of patients may be permanent.
- **Infection** – the small plates and screws that hold your jaw in its new position are usually left in place permanently. Occasionally they can become infected and need to be removed but if this happens it is not normally a problem until several months after surgery.
- **Adjustment of the bite** – in the weeks following surgery it is often necessary to put elastic bands on your orthodontic braces to guide your bite into its new position. Rarely if your bite is not quite right, a second small operation may be required to reposition the fixing plates and screws.

## Will I need further appointments?

A follow up appointment will be arranged before you leave hospital. You should expect to see your surgeon in the Oral Surgery Department around 7 days after your operation. All other follow up appointments will be arranged from there. Patients are usually seen 1 week, 2 weeks and 4 weeks after the operation, before returning to their routine orthodontic appointments.

If you need advice or have a medical problem after surgery please call the Oral Surgery Department 8am – 4.30pm Monday to Friday. Outside these times (evenings, nights and weekends) please call Laverstock Ward.

## Contact numbers

Oral Surgery Department 01722 336262 ext 3255 or 3256.

Laverstock Ward 01722 336262 ext 4312 or 4313.

Dietitian 01722 336262 ext 4333.