This leaflet has been designed to explain supernumerary teeth and it contains answers to many frequently asked questions. If you have any other questions that the leaflet does not answer, or if you would like further information, please ask us.

**What is a supernumerary tooth?**
A supernumerary tooth is an extra tooth. They are most often found in the front of the upper jaw. Some of them have the same shape as the teeth nearby, but others look very different.

**How do supernumerary teeth cause problems?**
Often these teeth are in an awkward position and they cannot break through the gum. If they do come through into the mouth they may have an undesirable appearance. If these buried teeth are left alone under the gum they can stop other teeth from appearing in the mouth (erupting). Also, there is a possibility that they may push other teeth out of position, cause damage to the roots of nearby teeth or develop cysts.

**How are supernumerary teeth removed?**
This depends on where they are. If they are visible in your mouth then removing them is just like having a normal tooth out and is usually very simple. If they are buried then the tooth is covered by gum, and in some cases a thin layer of bone as well. The gum needs to be lifted back and the layer of bone taken away before the tooth can be removed. After the tooth has been removed the gum is stitched back into place using dissolvable stitches. The bone will heal where the tooth has been removed.

**What are the risks?**
There are some risks with this procedure.

- If the supernumerary tooth is very close to the roots of nearby teeth then removing it may cause damage to these roots. If roots are damaged then those teeth may require further treatment later on, such as root canal treatment. This does not necessarily mean that you will lose any teeth.
- If there are other buried teeth nearby then they may be damaged and fail to appear in your mouth later on.
- Infection can happen but is not common. It is treated with antibiotics.
- After surgery around the upper front teeth you may notice that the gum has shrunk back a little from the teeth as it heals.

Your surgeon will tell you how likely any of these risks are in your particular case.
What sort of appointment will I need?
There are usually three options – depending on how difficult the tooth will be to remove.
These appointment options are:

1. **Local Anaesthetic** – an injection into your gum to make the area completely numb - just as you would have for a filling with your own dentist. This is the most common method for teeth that are visible in your mouth but may not be suitable for very young patients.

2. **Local Anaesthetic with Sedation** – an injection into your arm or a gas to breathe to help you feel more relaxed during treatment.

3. **General Anaesthetic** – you are put to sleep completely in a hospital theatre. This is used for very young patients and for teeth that will be difficult to remove.

What should I expect afterwards?
Some slight bleeding is normal for a day or so - this is usually easily controlled with pressure over the area.

Some pain is normal - your dentist will advise you about painkillers to use and give you a prescription if necessary.

Some swelling and bruising is normal but the amount varies a lot from one patient to another. Swelling will be at its maximum on the second day and most swelling should have disappeared within a week, perhaps two. With swelling you may also have some difficulty opening your mouth wide but this also generally returns to normal within a week or two.

Any stitches you have will fall out by themselves in about 10-14 days.

You may need to take time off from school or work – your dentist will advise you about this.

You will be able to eat, drink and talk afterwards.

This leaflet is available online at http://www.ucc.ie/en/dentalschool/patients