

## Department of Oral and Maxillofacial Surgery

# Maxillary (upper jaw) osteotomy

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.

### The problem

It has not been possible to correct your teeth and how they bite together with orthodontics alone. This is because the bones of your face and jaws are out of balance with one another. Surgery will change the relationship of your upper jaw to the lower jaw and will correct these problems. The surgery will take place under a general anaesthetic, which means that you are going to be put to sleep completely.

### What does the operation involve?

The operation is all carried out from the inside of your mouth so that there are no visible scars on the skin of your face.

- A cut is made through the gum above your upper teeth to gain access to the jawbone.
- The upper jaw is then cut with a small saw to allow it to be broken in a controlled manner.
- It is then moved into its new position and held in place with small metal plates and screws.
- The gum is stitched back into place with dissolvable stitches that can take a fortnight or even longer to fall out.

### What can I expect after the operation?

- Perhaps surprisingly it is not a particularly painful operation but it is still likely to be sore and regular painkillers will be arranged for you.
- The discomfort is usually worse for the first few days although it may take a couple of weeks to completely disappear.
- It is also necessary to make sure that the area heals without any infection and so you will be given antibiotics through a vein in your arm whilst you are in hospital. You will be sent home with painkillers and a course of antibiotics.

- 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. Initially your nose is often blocked and you may have to breathe through your mouth.
- Your throat may also be uncomfortable and swallowing can be difficult to begin with. In all you should expect to feel a bit miserable and sorry for yourself for the first few days.
- Swelling and bruising is variable 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 has disappeared after a fortnight but there is often some subtle swelling that can take several months to disappear although only you and your family are likely to notice this.

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

Not to begin with. For the first day or two you will only want liquids but very quickly you should be able to manage a soft diet and then gradually build up to normal food over a few weeks.

### **How do I clean my teeth after surgery?**

After surgery you will be quite sore, swollen and not be able to open your mouth as wide as normal. But it is really important to maintain good, if not perfect oral hygiene.

- Use a small soft tooth brush to clean your teeth at least two to three times a day.
- Use warm salty mouth rinses; rinse for five minutes, five times a day for five days after the surgery.
- You may also use Corsodyl mouth rinse, but be aware it can cause staining to the teeth, especially if your cleaning is not good (this can be polished off later if necessary).
- Above all, it is essential you keep your mouth and teeth as clean as possible after your jaw surgery.

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

This varies from person to person but most patients spend one or sometimes two nights in hospital after their operation. The position of your jaw will be checked with X-rays before you are allowed home.

### **Do I need to take any time off work?**

Again this varies from person to person and also depends on what kind of job you do. We recommend that most people have about three weeks off work. It is important to remember that you will not be able to drive or operate machinery for 48 hours after your general anaesthetic.

## What are the possible problems?

There are potential complications with any operation. Fortunately with this type of surgery complications are rare and may not happen to you. 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. Often you will notice slight bleeding from your nose as well which may take a week or so to settle. Again this is normal and nothing to be concerned about. Significant bleeding is very unusual but should it occur it can usually be stopped by applying pressure over the area for at least 10 minutes with a rolled up handkerchief or swab.

- **Numbness**

Your top lip will be numb and tingly after the operation, similar to the sensation after having an injection at the dentist. The numbness may take several weeks to disappear.

- **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. However, if this happens it is not normally a problem until several months after surgery. The metal that is used is titanium which does not set off metal detectors in airports etc.

- **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 a second small operation may be required to reposition the fixing plates and screws if your new bite is not quite right.

## Will I need further appointments?

A review appointment will be arranged before you leave hospital to see both the surgeon and orthodontist.

### Adapted from:

British Association of Oral and Maxillofacial Surgeons.

<http://www.baoms.org.uk/>



We are currently working towards a smoke free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169

### Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Polish

Jeżeli chciałbyś uzyskać te informacje w innym języku, w dużej czcionce lub w formacie audio, poproś pracownika oddziału o kontakt z biurem Informacji Pacjenta (Patient Information) pod numerem telefonu: 01223 216032 lub pod adresem [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Portuguese

Se precisar desta informação noutra língua, em impressão de letras grandes ou formato áudio, por favor peça ao departamento que contacte a secção de Informação aos Doentes (Patient Information) pelo telefone 01223 216032 ou através do e-mail [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Arabic

إذا كنت تود الحصول على هذه المعلومات بلغة أخرى، بالأحرف الكبيرة أو بشكل شريط صوتي، يمكنك أن تطلب من القسم الاتصال بمعلومات المريض على الرقم: 01223216032 أو عبر البريد الإلكتروني: [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Cantonese

如您需以另一語言版本、特大字體或錄音形式索取本資料，請要求部門聯絡病人諮詢服務：電話 01223 216032，電郵地址 [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Turkish

Eğer bu bilgileri başka bir dilde veya büyük baskılı veya sesli olarak isterseniz, lütfen bulunduğunuz bölümdeki görevlilere söyleyin Hasta Bilgilendirme servisini arasinlar: 01223 216032 veya [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Urdu

اگر آپ کو یہ معلومات کسی دیگر زبان میں، بڑے الفاظ میں یا آڈیو طریقہ سے درکار ہوں تو برائے مہربانی اس شعبہ سے پیشینٹ انفارمیشن سے ذیل کے ذریعہ رابطہ کرنے کی درخواست کریں: 01223 216032 یا [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

### Bengali

আপনি যদি এই তথ্য অন্য কোন ভাষায়, বড় অক্ষরে বা অডিও রেকর্ডিং পেতে চান তাহলে 'প্যাশেন্ট ইনফরমেশান' এর সঙ্গে 01223 216032 নম্বরে ফোন করে বা [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk) ঠিকানায় ই-মেইল করে যোগাযোগ করার জন্য ডিপার্টমেন্টটিতে অনুরোধ জানান।

### Document history

|                     |  |
|---------------------|--|
| Authors             | Mr David Adlam   |
| Department          | Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ <a href="http://www.cuh.org.uk">www.cuh.org.uk</a> |
| Contact number      | 01223 216635   |
| Publish/Review date | February 2010/February 2013 (minor amendment made June 2011))  |
| File name           | Maxillary_osteotomy  |
| Version number/Ref  | 3/PIN0670  |