

SASMFOS Position Statement on Third Molar (Wisdom teeth) Surgery

The South African Society of Maxillo-Facial and Oral Surgeons (SASMFOS), supports the American Association of Oral and Maxillofacial Surgeons (AAOMS) in a **policy statement that “firmly supports the surgical management of erupted and impacted third molar teeth (wisdom teeth), even if the teeth are asymptomatic, if there is presence or reasonable potential that pathology may occur, caused by or related to the third molar teeth (wisdom teeth)”**.

There is nationally and internationally a generalised agreement in the dental and medical professions that the removal of third molar teeth (wisdom teeth) is always appropriate when there is evidence of pathological changes such as non-restorable carious lesions, periodontal disease, infections, cysts, tumours and damage to adjacent teeth. It is important to state that there is also generalised agreement that wisdom teeth that are completely erupted and functional, painless, free of caries, in hygienic position with a healthy periodontium, without other associated pathologic conditions, are regarded as disease-free teeth that may not require extraction, but do require meticulous hygiene maintenance and regular clinical and radiographic surveillance by a registered dental professional (dentist/dental specialists) if retained.

The necessity for the removal of wisdom teeth has recently been challenged by some political action groups internationally and in South Africa, especially by the third party funders/medical aids/advisors. In response the South African Society of Maxillo-Facial and Oral Surgeons, who is an advocate for the practice of evidence based dentistry and medicine, strongly recommends that the treating surgeon/dentist should apply pertinent available scientific data to each of their patients, critically assess treatment options and choose through a process of informed consent or refusal, an appropriate course of action that best fits the needs of their patient.

The SASMFOS would strongly advise patients and health care professionals to consult evidence based scientific data on the matter of which examples are:

- ✚ American Association of Oral and Maxillofacial Surgeons’ (AAOMS) White Paper on Third Molar Data. (Databases included Ovid Medline, Pubmed, Google Scholar and the Cochrane Database.) www.aaoms.org/docs/third_molar_white_paper.pdf
- ✚ Extractions of Impacted Mandibular Third Molars: Postoperative Complications and Their Risk Factors. F. Blondeau & N.G. Daniel. *Journal of the Canadian Dental Association* 2007:73, no 4: www.cda-adc.ca/jcda/vol-73/issue-4/325.html.
- ✚ The effects of NICE guidelines on the management of third molar teeth. L. W. McArdle & T. Renton. *British Dental Journal* 213, E8 (2012) Published online: 7 September 2012 |oi:10.1038/sj.bdj.2012.780 Abstracts available:
 - www.nature.com/bdj/journal/v213/n5/abs/sj.bdj.2012.780.html
 - www.ncbi.nlm.nih.gov/pubmed/22955790

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