

## **Introduction to pocket reduction surgery**

We at Puget Sound Periodontics are proud to provide this treatment as the most advanced, safe and effective treatment available for periodontal disease. This treatment is both diagnostic and therapeutic being completed in a minimally invasive approach to help reduce post-operative discomfort and expedite healing.

### **Your surgery:**

Pocket reduction surgery is typically a full mouth procedure which usually takes place in two separate surgeries. Surgical appointments are scheduled 1 week apart. An occlusal or “Bite Adjustment” is completed at the end of the appointment. This is intended to reduce the heavy biting forces that may be contributing to periodontal disease, due to overloading. Patients are placed on two antibiotics for up to a 14-day period. For pain management, over the counter (OTC) pain medication (Motrin, Tylenol, Aleve, etc.) is typically sufficient after treatment. Patients can resume normal activities within 1-2 days after treatment.

### **The First Few Days**

After pocketing reduction surgery, you may experience:

- Mild to moderate aching, throbbing and soreness of the treated area(s) for the first several days.
- The tissues around the treated teeth may appear slightly discolored or have a white, gelatinous coating. The tissue will return to a normal pink healthy tone within about two weeks.
- The bite adjustment may leave your bite feeling slightly different, however, this will recover in time.
- Hot and cold sensitivity will also gradually diminish. In certain patient’s it can take several months for the sensitivity to improve.
- Brushing your teeth on the treated side is discouraged for the first 14 days and flossing should not be performed on the treated side for the first 30 days.
- You will need to be on a soft “mushy” diet for the first 7-10 days following treatment. This will give your teeth and gums an opportunity to heal without being traumatized by hard or chewy foods.
- With any surgery, smoking can inhibit healing and greatly decrease clinical results. It is advised to discontinue smoking prior to your surgical visit and post-operatively.

### **Follow-up Care**

As your gums begin to heal, they may start to look slightly different. The gums may appear lower than before or spaces between your teeth may develop. This is attributed to the reduction of inflammation around your gums and the extent of bone loss as a result of your periodontal disease. As the tissue tightens you may notice some shifting of your teeth and bite. We will complete several bite adjustments over the upcoming months to make sure the teeth are continuing to be as stable as possible. If needed, we may recommend the splinting of severely compromised teeth to provide

additional stability. You can expect to have your teeth cleaned professionally every 3 months for at least the next year. All cleaning will initially be completed with our office until your periodontal condition has stabilized.

### **Overview of the pocket reduction protocol**

The drawings below illustrate the pocket reduction protocol steps:

- A. Periodontal probe measurements indicate excessive pocketing depth. (Healthy pocket range is from 1-3 mm, 4 mm range indicates inflammation, and 5+ mm indicates bone loss and disease with the higher the number the more bone loss present.)
- B. Initial decontamination of the surround pocket and tissue is completed. Access to the diseased pocket and debridement steps kill bacteria, remove diseased, and desiccates (dry's) hard tartar (calculus) making it easier to remove.
- C. Ultrasonic scalers remove root surface tartar and flush out contents of the disease pockets.
- D. Bone modification promotes new tissue growth.
- E. Final decontamination pass stimulates growth factors (regeneration), and aids in sealing the pocket closed.
- F. Healing/reattachment of gums to clean root surfaces occurs.
- G. Bite trauma is adjusted (occlusal or bite adjustment)
- H. Tissues and bone re-grow and healing occurs.

