



Jaw Surgery

Why are you having Jaw Surgery?

The reason for your jaw surgery is to try and improve how your upper and lower teeth meet together on biting. It may also affect the appearance of your face. These benefits can sometimes only be achieved with both surgery and orthodontics (braces), as the movement of the teeth needed to get a more balanced bite are too large to be completed with orthodontics alone.

You have been recommended for surgery because your orthodontist and surgeon think it will best help achieve your treatment aims.

If you are unsure why you're having jaw surgery, or you have any other questions, you should discuss this with your orthodontist and/or surgeon.

The aim of this leaflet is to prepare you for your up-coming jaw surgery. The surgery itself will be carried out under general anaesthetic (you will be asleep) in hospital.

You will be required to stay in hospital for one night depending on your recovery. After your operation, you will need time off work/university to recover. This time off varies from three to eight weeks and usually depends on each individual and the type of work you do. It is not unusual to feel that you are lacking in energy for several weeks after your operation.

In the weeks and months following your operation, you will need to attend a number of appointments with your orthodontist and your surgeon so they can monitor your progress.

Appointment schedule

Once you have decided to proceed with jaw surgery you will be required to attend the following appointments at the Queen Elizabeth Hospital Birmingham:

1. Planning appointment

You will need to attend an appointment four to six weeks before your operation. At this appointment you will be seen by:

- **Your surgeon:**

- To confirm the final surgical plan
- To answer any questions you may have
- To discuss with you all the symptoms which you may experience after the procedure. It is important to listen carefully and take these on board so that you are fully prepared
- To complete a consent form with you
- To have impressions taken

- **The lab technician:**

- To take measurements of your jaw

- **The radiography and photography departments:**

- To have pre-surgery X-rays and photographs taken This appointment will take several hours; please expect to be at the clinic for most of the morning.

2. Pre-assessment appointment

Several days before your operation, you will need to attend an appointment to have pre-anaesthetic checks carried out. You will be seen by a nurse at this appointment.

You may also be seen by one of the surgical team who will assess the fit of your moulds (these will be used during the operation by your surgeon).

It is very important you do not miss this appointment as this will delay your operation date. If you are unable to make this appointment, please let your surgeon's secretary know immediately.

Starving instructions

As your operation will be carried out under general anaesthetic, you cannot have anything to eat/drink for a number of hours before your operation. These instructions will be sent to you prior to your admission and it is very important to follow these instructions.

Take your regular medication as normal unless otherwise told by your surgeon or pre-admission nurse.

Day of the operation

It is very important to be well rested before you come to hospital for your operation.

You must ensure you arrive on time for your operation. Traffic on entering the Queen Elizabeth Hospital Birmingham site is busy in the mornings so please ensure you make allowances for this.

You will receive a letter from the secretaries to inform you where to come on the day.

Useful items to bring:

- Headphones
- iPad or something to entertain yourself with
- Eye masks
- Ear plugs
- A pen and paper/small whiteboard and marker – so that you can communicate

The anaesthetist will come to see you in the morning before your operation and explain the anaesthetic procedure to you. If you have any questions regarding the anaesthetic they will be happy to answer these.

Your surgeon will also see you to ensure you are happy and to confirm your consent.

You may go to theatre from your hospital bed (if your bed is ready) or directly from the admissions lounge. You may return to a different bed location after the surgery. The nurses will ensure that you know what to do with your belongings.

Please note:

It is very important to prepare for the possibility of a cancellation of your operation on the day. We try our very best to avoid this rare scenario, however as in every hospital, a life-threatening emergency must take priority.

If this is the case, we will inform you as soon as possible so you may leave and a new operation date will be arranged.

Information for Patients

This may affect your plans you have made with work or your family who may be caring for you after the operation, so it is important to inform them of this possibility.

After your operation

Immediately after your operation, you will be cared for in the recovery area in the theatre suite. The staff here will monitor you for a period of time before you are ready to be transferred to the ward.

You will be asked to lie propped up with pillows in bed whilst in hospital. This helps reduce the amount of swelling and helps with your comfort. You may also need to wear an oxygen mask for some of the time after the operation.

When you are on the ward you will be encouraged to drink fluids immediately and eat the following day. Both are important in your recovery and your progress will influence when you can go home.

A syringe can be very useful to help you drink fluids after the operation. This will be provided on the ward.

There will be a nurse to assist you on the ward at all times – if you require anything do not hesitate to ask them.

What to expect after your operation:

Pain

You will receive medication to reduce any pain which you may experience. This may be given by mouth or through a vein. We aim to manage your pain, but it may be uncomfortable for the first couple of weeks after your operation. If you do have any severe pain, please inform your nurse. When you are at home, you will be given pain-killing medications to take by mouth. These can be in liquid or dissolvable form. You should take this medication regularly for the first couple of weeks after your operation.

Swelling and bruising

This will be most noticeable 24 hours after your operation. After 72 hours, it will gradually reduce in size, but it may take several weeks to completely disappear. The swelling can be reduced by using cold compressed and sleeping upright for a few days. You might not notice the changes to the appearance to your face for the first or second month after the surgery. You may also expect bruising on your neck and the top of your chest – this is normal and will disappear.

Numbness

You will experience numbness (loss of feeling of some part of your lips/chin/cheek/tongue) when you wake up. This will partly be due to the local anaesthetic used during your surgery and partly occur as a result of your surgery. The feeling may take several weeks or months before it returns to normal. In some instances, the numbness can be permanent. You may also experience tingling or itching before it fully returns. This won't affect the movement of your lips, your appearance or your speech.

Blocked nose

A blocked nose and blood-stained fluid from your nose and mouth for the first one to two weeks after your operation is normal.

Information for Patients

Sickness

This can be a side effect of the general anaesthetic. If it does occur, we have medication that can help with this. Please inform your nurse if you do feel sick. Occasionally, the painkilling medicines taken at home may cause some nausea/sickness particularly if you are not able to eat.

Discomfort in throat

This is a common complaint in the first two to three days after the operation. It may be from the anaesthetic tube or secretions at the back of your throat. Fluids will help relieve this so make sure you drink enough fluids. Feeling down This is often a normal response to having an operation. Don't worry; this feeling will pass as you recover from your operation.

Medication

Below is a list of the usual medication we will prescribe you after your operation. This may vary depending on the operation and your medical history:

- Pain relief – Paracetamol, Ibuprofen, Codeine phosphate
- Antibiotics – usually two doses given in hospital
- Steroids (to reduce inflammation and swelling) – usually two doses given in hospital
- Mouthwash

All medication will be given in liquid form to take by mouth or through a vein in your hand.

It is important to take all the medication you are prescribed to prevent post operative complications.

Before you leave hospital

We are aware that most patients prefer to recover in the comfort of their own home. Therefore, once you are drinking enough fluids, eating and able to move around we will be happy for you to go home.

Before you leave hospital you will be seen by:

1. A member of the surgical team – to assess that you are fit for discharge and to discuss your follow up.
2. Dietician – to ensure you are eating and drinking satisfactorily and discuss foods that you can eat at home.
3. Dental nurse – to give your oral hygiene instruction.

You may also have X-rays taken after your jaw surgery before you leave the hospital.

You will be sent home with a post-op pack containing:

- Your medication
- Your follow-up details
- A copy of this leaflet
- A syringe to aid feeding, if necessary
- Build-up drinks if necessary

It is important you have someone to care for you at home as you will need help for at least one week after your operation.

Most patients feel reassured when someone is at home to help for activities such as eating, showering etc.

Diet

Healthy nutrition is an essential part of your recovery process. You must ensure you drink plenty of water to keep hydrated. For four to six weeks after your operation you will be eating soft foods only.

A syringe can be used when eating and can be provided by your nurse - some patients find looking in a mirror when using the syringe helpful.

It is important to avoid a high sugar diet after your operation as this will increase your risk of dental decay and will not provide you with the nutrients you need.

Examples of soft/purée food:

- Eggs, porridge, soup, mashed potato, avocado, purée carrot/parsnip, mashed banana
 - Smoothies, fresh fruit and vegetable juices, Greek yoghurt, jelly (sugar free), milk, water
- Weight loss is common and sometimes unavoidable after this operation therefore it is important to ensure you eat well.

You should avoid alcohol for the duration of your recovery.

Your surgeon will let you know at your follow-up appointments when you may begin with solid foods.

Oral hygiene

Oral hygiene is very important to ensure complete healing after your operation and to avoid complications.

It is important to avoid smoking as this can delay healing.

It will be difficult and may be tender but you must brush twice daily with a small-headed soft toothbrush. It is very unlikely that you will disturb anything in your mouth so do not avoid brushing. Use the mouthwash provided twice daily, as well as warm salt water rinses three times a day. The stitches in your mouth will dissolve and your orthodontist will arrange for your braces to be removed when appropriate.

In most cases, we will place elastic bands from your top teeth to your bottom teeth on each side after your operation to guide your teeth into their new position – if they break you must replace them - we will send you home with spares but if you have any difficulty get in contact with us. Your surgeon will decide when your elastics are to be removed.

What are the possible problems after jaw surgery?

There are risks of potential complications after any operation. Some can be predictable though uncommon or rare. They also may occur early in your recovery or may be many months after your surgery. Below are the most predictable problems you might experience. Should you have any concerns about this, it is important to discuss them with your surgeon.

Bleeding

Sometimes there is bleeding for several days after the surgery and is expected. However significant bleeding after this period is very uncommon, but if it occurs, it can be managed with application of firm pressure for at least twenty minutes with a rolled up damp swab or handkerchief

Information for Patients

in the first instance. If that doesn't work, it would be advisable to contact your surgical team or attend A&E.

Numbness

Depending on which jaw(s) are operated upon, your lips/cheek/ tongue/palate/chin will be numb after the operation. This will partly be due to the local anaesthetic used during your surgery and partly occur as a result of your surgery. The recovery of the sensation can take several months to settle and in a minority of patients this is permanent. However, it would not impact the way you look or speak.

Adjustment of the biting relationship

In the immediate period after your surgery, it is often helpful to put elastic bands on your braces to help guide the bite into its new position. Rarely a further operation is required to readjust the positions of the jaws to get a better bite. Infection Small titanium plates and screws hold the jaws in their new position whilst the bone heals. The vast majority after left in place for life. Occasionally they may become infected and require a second operation for them to be removed. This doesn't tend to happen until some time after the surgery.

Jaw joint symptoms

Changing the way the jaws meet, with surgery, to get a more balanced bite, may put strain on the lower jaw joints. This may cause symptoms of clicking and locking of your lower jaw joint. This may happen several months after the surgery. Often this doesn't require further treatment. Rarely the jaw joint may change shape over time and this may cause a change in how your teeth bite together after your braces have been removed. If you notice these symptoms, you should notify your dentist/orthodontist or surgeon.

Follow-up

You will see your surgeon at the following intervals after your operation to assess your progress (please note it may vary depending on your operation):

- One week
- Two weeks
- One month
- Three months

You should receive your first follow-up appointment date on discharge from hospital via post. If you do not receive an appointment or if you have any queries between your appointments, you may contact your surgeon's secretary on the number provided. Your GP will receive a copy of your discharge letter detailing what procedure you have had done via post.

Useful contact numbers

If you have any questions or need advice please do not hesitate to contact your surgeon's secretary on the telephone numbers below.

They are available Monday – Friday 09:00–17:00.

Mr Williams and Mr Sharp secretary:

Karen O'Reilly 0121 371 5026

Mr Green and Mr Attard secretary:

AnnMarie Gill 0121 371 5024

Mr. McMillian secretary:

Sharon Dillon 0121 371 5029

Ms Grant and Mr Breeze secretary

Julie Humphrey 0121 371 5025

Information for Patients

If you need assistance out of hours, please contact the Queen Elizabeth Hospital Birmingham and ask to speak to the maxillofacial on-call senior house officer who will be happy to advise you.

Queen Elizabeth Hospital Birmingham's

Switchboard 0121 627 2000

Bleep no. 2239

For more information

Useful websites:

Jaw Surgery: <http://www.YourJawSurgery.com>

British Orthodontic Society:

<http://www.bos.org.uk/public-patients-home/orthodonticsfor-adults/orthognathic-treatment-jaw-surgery>

British Association of Oral and Maxillofacial Surgeons:

<https://www.baoms.org.uk/patients/procedures/>

Department of Oral and Maxillofacial Surgery

Queen Elizabeth Hospital Birmingham

Mindelsohn Way, Edgbaston

Birmingham, B15 2GW

Telephone: 0121 627 2000

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email interpreting.service@uhb.nhs.uk