Guide to wisdom teeth

What are wisdom teeth?
Wisdom teeth, or third molars, are the last teeth to appear, typically between the ages of 17 and 25 years. They are located at the two far ends of the upper and lower sets of teeth, making a total of four; one or more wisdom teeth are commonly missing.

Wisdom teeth sometimes do not emerge normally and instead grow slanted or horizontally (top photo), and they may only partially erupt or even remain buried, especially when there is not enough space in the mouth. They are then said to be impacted (trapped) and may cause further problems.

What wisdom tooth problems are there?
The following are some problems caused by impacted wisdom teeth:
- **Gum disease**: inflammation and infection when food particles and bacteria get trapped between the partially erupted wisdom tooth and the gum
- **Caries**: decay of the wisdom tooth or adjacent tooth, because it is difficult to clean between them to remove dental plaque; this may lead to cavities
- **Crowding**: adjacent teeth are pushed out of position by the wisdom tooth
- **Root resorption**: gradual disappearance of the root of the adjacent tooth owing to pressure from the wisdom tooth and inflammation in the surrounding tissue in response to dental plaque
- **Cyst**: region of fluid or soft matter, usually lined by a cell layer, around the impacted wisdom tooth (bottom photo); this may damage the jawbone

How can wisdom tooth problems be treated?
Visit your dentist regularly, and especially if you have any of the signs in the Box above. In general, your dentist will take an X-ray picture of your mouth to assess the problem and decide treatment options. Antibiotics may be prescribed for an infection. The wisdom tooth may need to be removed (extraction), under local or general anaesthesia.

Recent studies have investigated an alternative method to extraction, known as coronectomy, in which only the top part (crown) of the wisdom tooth is removed. This method leaves the root behind and significantly reduces the risk of nerve damage, but long-term follow-up studies are needed to see what happens to the remaining root.


Written by Trevor Lane, DPhil; edited by Lim K Cheung, PhD, FHKAM. This Patient Page is for general informational use and is not a substitute for diagnosis; for specific advice, please consult a dentist.