

A fractured tuberosity following attempted extraction

S L McKernon,¹ S Reid,² K H Taylor,¹ M C Balmer²

¹School of Dentistry, University of Liverpool, Liverpool, UK
²Department of Oral Surgery, Liverpool Dental Hospital, Liverpool, UK

Correspondence to
 S L McKernon,
 s.l.mckernon@liv.ac.uk

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DESCRIPTION

A 53-year-old man presented to the A&E department at Liverpool University Dental Hospital following urgent referral from his general dental practitioner. During attempted routine extraction of the 18 (upper right wisdom tooth), his general dental practitioner had noticed the palate tearing and the tuberosity displace during the procedure and stopped. Clinical and radiographic examination demonstrated a fractured tuberosity with associated lacerated soft palatal tissue (figures 1 and 2). The tuberosity and fractured tooth were grossly mobile and required stabilisation. Ideal management for this complication is a wire and composite splint in place for 6 weeks to allow for bony union.



Figure 2 Orthopantomogram demonstrating fracture line mesial to 18.



Figure 1 Intra-oral photo demonstrating palatal tear.

Following healing, an elective surgical procedure was performed to remove the remaining tooth. This image highlights a complication many patients are warned of but that few professionals will encounter in their careers.

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