ABSTRACT

Background:

One of the most common postoperative complication following the extraction of permanent teeth is dry socket. While a great deal has been published about third molar extractions, there are scarce data available related to the dry socket associated with routine erupted dental extraction in the recent literatures. Pain that persists for more than two days can be a sign of postoperative complications that can result in clinical resources, operator time that increases costs and stress in a dental practice. Therefore, understanding the development of postoperative pain could be valuable to the clinician in terms of predicting and improving the treatment of these painful episodes.

Objectives:

The present study was undertaken to evaluate the Incidence of dry socket following extraction of permanent teeth in a dental teaching institute, Kulashekharam, Kanyakumari.

Methods:

Using two questionnaires, this prospective cross-sectional study evaluated a total of 168 patients who underwent surgical & non-surgical extraction of permanent teeth included in this study. One questionnaire was completed for every patient who had one or more permanent teeth extracted in the Oral Surgery department. The other questionnaire was completed for every patient who returned for a post-operative visit and was diagnosed with dry socket during the study period.
Abstract

Results:

There were 186 dental extractions carried out in 168 patients. The overall incidence of dry socket was 2.1%. There was no statistically significant association between the development of dry socket and age, medical history, medications taken by the patient, indications for the extraction, extraction site, operator experience, or the amount of local anesthesia and administration technique used. Incidence of dry socket in females was significantly higher during menstruation period (6.9%) in this study, and a direct linear trend was observed in poor oral hygiene status of patients. All cases with Dry socket treated and were followed until resolution of Dry socket

Conclusion:

The etiology of dry socket is multifactorial and ultimately it is the host’s healing potential which determines the severity and duration of the condition. The incidence of dry socket was found as 2.1% in this study. The incidence was higher in female patients during menstruation period (6.9%) and in poor oral hygiene status of patients (5.2%)