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Treating a fracture of the lower jaw

Oral & Maxillofacial Surgery

Information for Patients

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This leaflet includes information on treating your lower jaw fracture. It also answers a few often-asked questions.

What are fractures of the lower jaw?

Your lower jaw has been broken (mandibular fracture). You may have been involved in a sporting injury, a fight, fall or road traffic accident.

- You have had X-rays.
- You have been checked to find out where your fracture(s) are and how complex it may be.
- Sometimes you may need a CT (computerized tomography) scan.

The injuries can be managed in different ways, depending on where they are and how bad the fractures are. This can range from no treatment to needing surgery.

What are the symptoms of a fractured jaw?

- Pain, swelling and bruising of your lower jaw, jaw joint and mouth.
- Bleeding from your mouth.
- Difficulty chewing.
- Unable to open your mouth fully or having difficulty closing your mouth.
- Your teeth do not meet in the same way (abnormal bite or malocclusion) as before.
- Numbness or a change in feeling in your gums, lower lip and chin.
- Torn gums.
- Loose or broken teeth/ fillings.
- Swelling of the area under your tongue (floor of the mouth).

What treatment is needed?

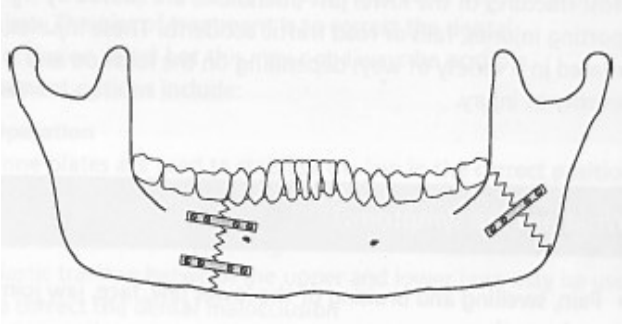
Treating lower jaw fractures can be quite tricky depending on where the fracture is and how bad it is. The aim is to get the bone to heal and correct the abnormal bite, but this is not always possible.

Operations are usually done while you are asleep (general anaesthesia). Some procedures can be done while you are awake (local anaesthesia).

The options for treatment include:

Surgery

- The surgeon makes a small cut to expose the fracture and places the teeth and bones back as close as possible to the correct position.
- The fracture is then held in place with small titanium plates and screws, until it heals.
- The gums are then stitched together with dissolving stiches.
- In some cases, you may need a small cut on your skin over the fractured area to insert a screw. This will be stitched closed after.
  These stitches will need to be taken out at your GP practice in 7 to 10 days. It will heal leaving a small scar.
- The titanium plates do not usually need to be removed unless they are causing problems such as infection or sensitivity when cold. The plates will not be an issue at airport security.



Elastic traction and splinting

Depending on where the fracture is and how bad it is, we may need to use orthodontic elastic bands to support or hold your jaw in place, whilst the fracture heals.

1. A metal bar is put over your teeth, which is held in place with metal wires wrapped around them.
2. Orthodontic elastic bands are put on the top and bottom bars to help guide your bite into the right place. The elastic bands may be taken off, to allow you to brush and floss as normal.
3. We will give you extra elastic bands to take home and show you how to use them.
4. You will need to use elastic traction for up to 6 weeks, during which time we will check your progress. The metal bar and wires around your teeth are usually removed after 6 weeks. Please see your dentist after this for oral hygiene care as it can affect your gums.

Wiring the jaws

This treatment option was used more regularly in the past and is like elastic traction. It is now only ever used as an option for complicated fractures.

- The teeth and jaws are wired together using a metal bar and wires. This stops you opening or moving your jaw. It is usually for a 6 week healing period.
- You will need to have a liquid diet during this time. You may be limited with brushing and flossing. After removal, please see your dentist for oral hygiene care as it can affect your gums.

Allowing fracture to heal on its own (conservative management)

In some cases, surgery may not be needed. You can just rest the jaw and have a soft diet for 6 weeks. You must avoid further injury or trauma for 2 to 3 months after the injury, as the fracture can become displaced and need surgery.

What to expect after surgery

- You are likely to be discharged the day after the operation.
- You will have swelling, bruising and discomfort.
- You will have X-rays to check the position of the jaw.
- You may have numbness or a change in feeling to your lower lip and chin. This usually improves over a few months, but sometimes it can be permanent.
- Stiffness and/ or clicking of the jaw joint.
- You will not be able to open your mouth fully. This is usually short-term (temporary).
- We will prescribe painkillers and antibiotics.
- You will need to follow a strict liquid diet at first. You can move on to a soft diet over the following 6 weeks. You can return to a normal diet after the 6 week healing time.
- We strongly advise against smoking whilst you are healing. It can cause an infection.
- Avoid further injury or trauma for 2 to 3 months.

What are the possible risks of surgery?

- Oozing of blood from your wounds.
- You may have damage to the teeth next to the fracture or sometimes the tooth nerve may be injured. The tooth may then need treatment to have the nerve removed and the space filled with special dental materials (root canal treatment).
- Sometimes, the tooth/teeth near the fracture may need to be removed (extracted) by the dentist.
- Numbness or a change in feeling to your lower lip, chin, tongue or gums. The nerve that provides feeling to these areas runs through the centre of the jaw and may have been injured in the trauma or during the surgery to fix the fracture.
- If you are feeling some numbness after your injury. This can be made worse by surgery, but usually this improves. Permanent numbness is possible.
- The way your teeth meet (your bite) may not be the same as before the injury, mostly with complicated fractures. This can sometimes be improved by your dentist grinding the teeth. Sometimes you may need a second operation.
- Infection of the wound or plates. Sometimes, the plates, screws or teeth at the fracture site may need to be taken out either while you are asleep (under general anaesthetic) or awake (under local anaesthetic).
- If a cut is needed in the neck or skin near the jaw to get better access to the fracture, the nerve which controls movement of the lower lip/ face may be bruised or damaged. This can cause weakness. This is usually temporary and rarely permanent (less than 5 in 100 patients).

What happens next?

- Depending on your job, you may need to take around 2 weeks off work.
- Avoid heavy exercise.
- Do not drive or operate machinery for 48 hours (2 days) after surgery.
- You will be given follow-up appointments in the department to check your recovery and discuss any problems you may be having.
- Avoid further injury or trauma.
- See your dentist for a check-up and clean after the metal wires have been removed.

Contact details

Please contact us if you have any further queries or problems: **8:30am to 5pm**

Reception: **0116 258 5301**

Nurses station: **0116 258 5671**

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Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
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If you would like this information in another language or format such as EasyRead
or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

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