Managing Toothache at Home

Tips to help manage dental problems until you can see a dentist

Painkillers

Arei-inflammatories (like ibuproferi) can fielp reduce sensitivity from teeth. Combining paracetamol and ibuprofer has also been shown to be effective.

There is currently no strong evidence that though like ibug/crien can make COVID-19 worse.

If you have no coronavirus symptoms carry on taking buprofin as normal.

So until we have more information, take paracetamol to treat symptoms of coronavirus unless your doctor has told you paracetamol is not suitable for you (Updated: 20 March 2020)

Painkillers should always be taken in accordance with instructions on the packet. Taking too many tablets, or taking medications incorrectly will not improve your symptoms, and can cause serious stomach and liver injury which can be life threatening.





Accessing care.

- Following recent guidance from NHS England and the Department of Health, dental practices have been advised to STOP AEROSOL SPRAYS and PRIORITISE URGENT TREATMENT where possible.
- As well as reducing risk to staff and patients, this will also prevent unnecessary travel
 in an attempt to reduce virus transmission. This information aims to advise people in
 pain who still need to access care and also support people in
 managing minor symptoms at home.

If you need to access emergency care:

- Have you or anyone in your house been self isolating?
- Do you have any symptoms?
- High temperature or continuous cough?

If YES to any of the above, CALL 111. They will direct you to an emergency facility with appropriate protective equipment which will allow staff to treat you safely.

Toothache

if the tooth is extremely sensitive to hot or cold, antibiotics will not help. The decay must be removed and filled.

These home measures may help make symptoms manageable until care can be accessed.

Good cleaning with fluoride toothpaste and reducing sugar intake will help stop decay from getting any worse.

If there is a hole in the booth, or a tooth has cracked and is now sensitive/sharp, a temporary filling can be packed sets the space.

These are widely evaluable from supermarkets and phermacies.

Desensitising/sensitive toothpaste (like sensodyne repair and protect) can help. Rub toothpaste directly on the affected area and do not rinse afterwards. Anaesthetic gel such as Orajel can help.







What counts as a dental emergency?

Urgent dental treatment:

- Facial swelling extending to eye or neck.
- Bleeding following an extraction that does not stop after 20 mins solid pressure with a gauze/clean hankle. A small amount of oozing is normal, just like if you had grazed your knee.
- · Bleeding due to trauma.
- Tooth broken and causing pain, or tooth fallen out.
- Significant toothache preventing sleep, eating, associated with significant swelling, or fever that cannot be managed with painkillers.

Straight to A&E:

 Facial swelling affecting vision or breathing, preventing mouth opening more than 2 fingers width.

KEEP

CALM

STAY

AT HOME

 Trauma causing loss of consciousness, double vision or vomiting.

Non-Urgent (may need to wait):

- Loose or lost crowns, bridges or veneers.
- Broken, rubbing or loose dentures.
- Bleeding gums.
- Broken, loose or lost fillings.
- Chipped teeth with no pain.
- Loose orthodontic wires.

Wisdom Teeth

Window teach pain is usually due to inflammation of the gum over the erupting tooth, which can be worsered by trauma from biting.

Most flare ups can be managed with good home care and should settle in a few days to a week

Excellent cleaning (even if it is painful to brush, the area must be kept clean to encourage healing)

Corsodyl mouthwash (avoid use for >1week as may cause staining)



Soft diet (soft food will reduce trauma from biting) Painkillers (ibuprofen or paracetamol following packet instructions)

Warm salty mouthwash

If you have difficulty swallowing, swelling in your face or cheek or difficulty opening your mouth, call your dentist. You may need antibiotics if the infection is spreading.

Painkillers

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Ulcers

Atthough painful, most ulcers will heal within 7-10 days. Non-healing ulcers/oral lesions present for more than 3 weeks should be assessed by a director director.

Warm salty mouthwash Excellent cleaning (even Soft diet (soft food will reduce trauma from biting) Rubbing Dentures (Denture adhesives like foodent may help secure a loose denture. Any