

**Patient
Information**

Fractured lower jaw

Introduction

This leaflet gives you information about the surgery you are about to have to repair your fractured lower jaw.

If you have any further questions, please ask a member of the Oral & Maxillofacial team or contact us on the telephone number at the end of this leaflet.

The problem

Your lower jaw has been broken. The number of fractures, where they have happened and whether they need surgery (an operation) to help them heal has already been decided by the doctor who examined you. If surgery is necessary, the fractured bones will be held in the correct place while healing. This will make sure that your teeth meet together correctly and pain is kept to the minimum.

If surgery is not carried out when recommended, it is likely you will suffer significant pain and infection and the bones may not heal in the correct position. Your teeth may not meet together correctly as a result causing pain, infection and problems when eating.

What does the operation involve?

The operation involves a general anaesthetic which means you will be asleep during the procedure.

Once you are asleep the site of the fracture will be opened up. This involves making a cut on the inside of your mouth through the gum.

The broken bones are then put back together and held in place with small metal plates and screws. The gum is stitched back into place with dissolvable stitches. The stitches can take 2 weeks or longer to dissolve.

Reference No.

GHP11200_01_25

Department

**Oral &
Maxillofacial
Surgery**

Review due

January 2028

Patient Information

During the same operation, it is often necessary to place wires or metal braces around your teeth so that elastic bands can be attached to them to guide your bite into the correct position after surgery. Screws inserted into the jawbone above the teeth are sometimes used instead of these wires or metal braces. The elastic bands are not usually attached until the day after your operation so your jaws will be able to move freely when you wake up from the surgery.

Condylar fractures

If the break in your lower jaw is at the part of the jaw near the joint (a condylar fracture), depending on the position of the fracture the following surgical options will apply:

1. An operation to fix the broken bone with plates and screws.
2. An operation using metal bars/screws and elastic bands as detailed above.

If you are suitable for option 1, you must follow the aftercare instructions carefully as the bone in this area is thin and can be damaged with large jaw movements.

It is very important that you have a soft diet and avoid opening your jaw wide for at least 5 to 6 weeks. This will allow healing to take place.

This operation often involves making a cut on the side of your face, in front of your ear. If this is necessary then there is between a 6 and 20% chance of damage to the nerve that is responsible for moving the muscles in this part of your face. This is most often temporary and will improve as healing progresses. In rare cases damage to the nerve can be permanent.

Will anything else be done while I am asleep?

Occasionally it is necessary to remove damaged or decayed teeth at the site of the fracture. In very difficult fractures it is sometimes necessary to make a cut on the outside of the mouth through the skin. If this is going to take place, the site and size of the cut will be discussed with you before you sign the consent form for your operation.

**Patient
Information**

What can I expect after the operation?

You are likely to need to stay in hospital for 1 night following the surgery. The following day the position of your fractures will be checked with X-rays before you are allowed home.

You are likely to feel sore and have some discomfort after the operation. This is usually worse for the first few days and can last for up to 2 weeks. Pain relief will be arranged for you while you are in hospital.

To make sure that the fractures heal without any infection you will be given antibiotics through a vein in your arm while you are in hospital. On discharge from hospital, you will be sent home with pain relief and an antibacterial mouthwash. You may also be prescribed a course of antibiotics which should be taken as advised on the packet.

Although the plates and screws hold the fractures in place, it will still take around 6 weeks for your lower jaw to heal completely. During this time, you need to eat a relatively soft diet. This will be discussed with you by the doctors/nurses. It is also important to keep your mouth clean and that you brush your teeth carefully and thoroughly for the first few weeks after surgery. This will help to prevent any infection.

It may be difficult to clean your teeth around the stitches because it will be sore. It is best to keep the area free from bits of food by gently rinsing your mouth with the mouthwash prescribed or warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water). This should be started the day after surgery.

If any wires, metal braces or screws are used to help guide your bite into the correct position, they will be removed in the outpatient department when your doctors are happy that your fracture has healed.

Do I need to take any time off work?

Your doctor will discuss this with you before discharge. Depending on the nature of your work, it may be necessary to take 2 or more weeks off work. You must also avoid strenuous exercise during this time.

**Patient
Information**

It is important to remember that you should not drive or operate machinery for 48 hours after your general anaesthetic.

What are the possible problems?

- Infection is uncommon. You will be given antibiotics while in hospital to reduce the risk of infection.
- Bleeding from the cuts inside your mouth is unlikely to be a problem. If bleeding from the cuts start when you get home, this can usually be stopped by applying pressure over the site for at least 10 minutes with a rolled-up handkerchief, clean tea towel or gauze swab.
- There is a nerve that runs through the centre of the lower jaw that supplies feeling to your lower lip, chin and bottom teeth. This nerve may have been bruised at the time of the fracture and as a result you might already feel some tingling or numbness in your lip and/or chin. This tingling may also be caused or made worse by surgery. In the majority of people, the numbness gets better on its own, although it can take several months to do so. In some circumstances, it can be permanent.
- Occasionally teeth next to the fracture site may be damaged by the screws that are used. We carry out treatment as carefully as possible to reduce the chances of this.
- If it has been necessary to put any plates or screws in your jaw to hold it in position, these are not normally removed unless they get infected because they tend not to cause any problems. The metal that is used is titanium which does not set off metal detectors in airports etc.

Will I need further appointments?

A review appointment will be arranged before you leave hospital. It is usual to keep a close eye on you for several weeks following treatment. This is to make sure that your jaw heals correctly. Further follow-up appointments may be arranged to review your progress.

**Patient
Information****Contact information**

If you have any concerns after your surgery, please contact the Hospital Switchboard on Tel: 0300 422 2222. Ask for the 'operator' when prompted then please ask to be put through to the 'on-call doctor for Oral & Maxillofacial Surgery'.

Oral & Maxillofacial Department

New and follow-up clinic enquiries:

Tel: 0300 422 6940

Monday to Friday, 9:00am to 4:30pm

**Minor surgery (local anaesthetic with/without sedation)
booking enquiries**

Tel: 0300 422 3197

Monday to Friday, 9:00am to 4:30pm

Inpatient and Day Surgery Unit booking enquiries

Tel: 0300 422 8191

Tel: 0300 422 8192

Monday to Friday, 9:00am to 4:30pm

Further information

For further information, please visit the Oral & Maxillofacial Surgery webpage:

Website: www.gloshospitals.nhs.uk/glosmaxfax

Content reviewed: January 2025

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>