

Department of Oral and Maxillofacial Surgery

Frequently Asked Questions about Open Jaw Joint Surgery

This leaflet has been written to help your understanding of open jaw joint surgery. If you have any other questions that the leaflet does not answer or would like further explanation please ask your surgeon.

The problem

Your surgeon has decided that the best way to sort out the problems you are experiencing from your jaw joint is to perform 'open' surgery. Open surgery involves exposing the jaw joint fully by making a cut in front of the ear rather than using keyhole techniques.

Q. What does the operation involve?

1. In order to gain access to the joint the surgeon will make a cut immediately in front of the ear.
2. Although the cut extends from the top to the bottom of the ear, where possible it will be placed in a skin crease so that when it heals fully it will be difficult to see. Sometimes it is necessary to extend the cut from the top of the ear upwards into the hairline.
3. Once the joint has been opened and any treatment carried out, the incision is put back together again with stitches. These need to be removed around a week after your operation.
4. At the end of the operation a small tube may also be placed through the skin into the wound to drain any blood that collects. This 'drain' is usually removed the morning after your operation.

Q. How long will the operation take?

The length of the operation depends on what your surgeon will be doing to your jaw joint. If the procedure is relatively simple (for example: repositioning of a slipped cartilage) the operation may take less than an hour. If the procedure is more complicated (for example: partial or total joint replacement) then the operation will last for several hours.

Q. What can I expect after the operation?

The area in front of your ear is likely to be sore for several days after your operation. Regular painkillers will be arranged for you. It is also necessary to make sure that the area heals without any infection, so you may also be given antibiotics.

Immediately after the operation your face will be swollen and feel tight, your jaw will be stiff and you will find that you cannot open your mouth widely. Bruising varies from patient to patient but can last several days. Any swelling can be reduced by using cold compresses and sleeping propped upright for a few days. Most of the swelling will have disappeared after a week.

Q. Can I eat normally after the operation?

To begin with you will not be able to eat normally. For the first week or so after your surgery, you will only want a soft diet. You may find that your bite feels strange for a couple of weeks after your operation.

Q. How long will I be in hospital?

This varies from person to person and depends on what sort of operation has been performed. Most patients spend one or two nights in hospital after their operation.

Q. Do I need to take time off work?

Again this varies from person to person. Most people need a week or so off work. It is important to remember that you will not be able to drive or operate machinery for 48 hours after your general anaesthetic.

Q. Will I have a scar?

All cuts made through the skin leave a scar, but the majority of these fade with time and are difficult to see when they are fully healed. It may take several months for your scar to fade but eventually it should blend into the natural folds and creases in front of your ear.

Q. What are the possible problems?

There are potential problems with any operation. Fortunately, with this type of operation problems are rare. However, it is important that you are aware of them and have the opportunity to discuss them with your surgeon.

- Bleeding – some oozing from the cut in front of your ear on the night of the operation is normal and to be expected. Should you have any bleeding when you

get home it can usually be stopped by applying pressure over the area for at least 10 minutes with a clean handkerchief or swab.

- Infection is uncommon, particularly if you have been prescribed antibiotics.

Q. The surgeon tells me that damage to a nerve is possible. What does this mean?

The facial nerve runs close to the jaw joint. It is this nerve that makes the muscles of your face work. Damage to some or all of that nerve can result in weakness of the muscles on one side of your face. Most nerve damage occurs as a result of bruising because the nerve is protected during the operation. If nerve damage occurs it is usually temporary although it can take several months to recover fully.

The nerve that supplies feeling to your earlobe (great auricular nerve) can sometimes be bruised as a result of the operation. You may end up with a numb or tingling feeling in your earlobe.

Q. Is permanent nerve damage possible?

While the majority of damage to the nerves is temporary, permanent damage is possible but usually only occurs in the most difficult cases.

What are the alternatives to this treatment?

There are no surgical alternatives to this treatment.

For more information:

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Please ask if you require this information in other languages, large print or audio format:
01223 216032 or patient.information@addenbrookes.nhs.uk

Potete chiedere di ottenere queste informazioni in altre lingue, in stampato grande o in audiocassetta.

Italian

若你需要本信息的繁體中文、大字體或音訊格式的版本，請要求索取。

Cantonese

तमने आ माळिती बीछ भाषाओमां, मोटा अक्षरोमां अथवा सांभली शकाय जेवा माध्यम
(ओडीओ इमेज)मां जेठती छोय तो कृपा करीने पूछो.

Gujarati

تکایہ پرسیار بکے نہ گھر نہ وزانیاریہت دہوی بہ زمانیکی تر , بہ بیٹی گہورہ یانیش بہ شیوہی دہنگ

Kurdish

آگر آپ کو یہ معلومات دوسری زبانوں میں، بڑے الفاظ کی اشاعت میں یا آڈیو ٹیپ پر درکار ہوں تو براہ مہربانی اس کیلئے درخواست کریں۔

Urdu



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