

## DRY SOCKET EXPLANATION & INSTRUCTIONS FOR PAIN RELIEF

Below you will find some information, explanations and instructions regarding dry sockets & their management.

### Dry Socket Explanation

A dry socket is a common complication that occurs after a tooth extraction. ***It is not an infection.***

Dry sockets occur when the blood is clot prematurely lost from a healing tooth extraction wound, creating a painful exposed area of bone.

The pain associated with a dry socket can range from mild to ***very painful.*** Dry sockets can take 1-3 weeks to completely resolve.

The typical presentation of a dry socket is increasing pain 2-3 days after the extraction that radiates throughout the jaw and face. The pain is often so severe that it disturbs sleep.

Increased or increasing swelling ***is not*** a sign of a dry socket. If you experiencing increased or increasing swelling after an extracting ***seek prompt advice from your treating dentist.*** As this is more likely to be a sign of a post operative infection, rather than a dry socket.

### Treatment of a dry socket

Dry sockets will heal all by themselves, and the pain will resolve as the wound heals. However effective pain relief is important during the painful healing period.

If you think you are developing a dry socket seek assessment and advice from your treating dentist.

Typical treatment for a dry socket is:

- 1) Irrigation of the wound
- 2) Dressing the wound with alveogyl (a special dressing that helps alleviate the pain)
- 3) Pain relief with paracetamol, ibuprofen and tapentadol (or oxycodone)
- 4) Nausea and constipation mitigation with ondansetron and laxatives

The most important aspect of dry socket management is effective pain control during the painful healing period.

It is not uncommon for patients to be on a 'cocktail' of medications such as a combination of paracetamol, ibuprofen, tapentadol (or oxycodone), ondansetron, Coloxyl & Senna, and Movicol.

### Example paracetamol and ibuprofen regime

7am: 2 X 500mg paracetamol tablets	500mg paracetamol tablets: - Maximum of 8 tablets in 24 hours.
10am: 2 X 200mg ibuprofen tablets	
1pm: 2 X 500mg paracetamol tablets	200mg ibuprofen tablets: - Maximum of 6 tablets in 24 hours. - Take with some food to help avoid stomach upset
4pm: 2 X 200mg ibuprofen tablets	
7pm: 2 X 500mg paracetamol tablets	
10pm: 2 X 200mg ibuprofen tablets	<b>Avoid any or both of these medications if any of your doctors have told you to do so.</b>
1am: 2 X 500mg paracetamol tablets	

### WARNINGS

#### KEEP MEDICATIONS OUT OF REACH OF CHILDREN

These instructions and guidelines are not intended for use in children under 16 years of age. Seek other medical advice for oral surgery pain relief in children under 16 years of age.

#### IBUPROFEN WARNINGS

##### Do not use ibuprofen:

- If you have a stomach ulcer, impaired kidney function or heart failure.
- If you are allergic to aspirin, ibuprofen or other anti-inflammatory medicines.
- If you get an allergic reaction, stop taking and consult your doctor immediately
- During the first 6 months of pregnancy, except on doctor's advice.  
Do not use at all during the last 3 months of pregnancy.

#### PARACETOMOL WARNINGS

##### Do not:

- take with other products containing paracetamol unless advised to do so by a doctor or pharmacist.
- give to children under 7 years, except on medical advice
- give for longer than 48 hours at a time for children and adolescents, aged 7-17 unless advised by a doctor.
- take for more than a few days at a time in adults except on medical advice

If an overdose is taken or suspected, ring the Poisons Information Centre, Australia 131126, or go to a hospital straight away, even if you feel well because of the risk of delayed, serious liver damage.

Do not take tablets if the foil seal over tablet is not intact.

Do not exceed the recommended dose.

These medications may contain potassium sorbate.

Store medications below 25°C.

## DRY SOCKETS - ADDITIONAL PAIN RELIEF

If you are still in pain after **regular and maximum** paracetamol & ibuprofen then we recommend you take additional pain relief medication such as Tapentadol **or** Oxycodone when required.

Tapentadol and Oxycodone are a strong pain relief medications. They are often required for adequate pain control for patients with a dry socket.

Tapentadol & Oxycodone are only available with a script.

**Do not combine Tapentadol and Oxycodone.** Take either one or the other for additional pain relief, but do not take both.

### Tapentadol IR (Immediate Release) 50mg

If you are still in pain after **regular and maximum** paracetamol and ibuprofen you can take 50 - 100mg of tapentadol every 4 - 6 hours as required, only if you are still in pain after taking paracetamol and ibuprofen. **Do not take Tapentadol if you are not in pain.** If pain is less severe, start with a lower dose and/or take less frequently. Note one tablet is typically 50mg.

### Tapentadol safety checklist

Do you have any liver issues?

Do you have any kidney or renal issues?

Do you have paralytic ileus (intestinal blockage)?

Are you taking any type of antidepressant, antipsychotic, anti-anxiety or sedative medications, or sleeping tablets?

Do you have epilepsy?

If you answered yes to any of the above questions, Tapentadol may not be suitable for you. And in that case oxycodone may be more suitable for you. Seek advice from your treating dentist and/or pharmacist.

### Oxycodone 5mg

If you are still in pain after **regular and maximum** paracetamol and ibuprofen you can take Oxycodone as indicated by your age bracket below. Note one tablet is typically 5mg.

Age	Oral Oxycodone Dose (mg)	Age	Oral Oxycodone Dose (mg)
15-39	5 - 20	70 - 85	2.5 - 5
40 - 59	5 - 15	> 85	2.5
60 - 69	5 - 10	If pain is less severe, start with a lower dose and/or take less frequently.	

The above doses can be taken up to every 3 hours, only if still in pain. **Do not take Oxycodone if you are not in pain.**

### Warnings

Tapentadol & Oxycodone can make you sleepy, dizzy, or lightheaded. Do not drive or operate heavy machinery until you know how Tapentadol or Oxycodone affects you. Do not drive or operate heavy machinery if these medications make you feel sleepy, dizzy, lightheaded or otherwise impaired.

Tapentadol & Oxycodone can also cause tolerance, dependence and respiratory suppression. They can even cause respiratory arrest and death in an overdose situation. However, they are very common pain relief medications and they are safe to take if still in pain and if taken according to these guidelines.

**Do not combine Tapentadol and Oxycodone.** Take either one or the other for additional pain relief, but do not take both.

### Side effects

Tapentadol & Oxycodone have side effects. The most common unwanted side effects are **nausea, constipation & lethargy**. See the "OPIOID SIDE EFFECT MANAGEMENT" information on the net page.

## OPIOID SIDE EFFECT MANAGEMENT

Below you will find some explanations and instructions about how to manage the side effects of Tapentadol & Oxycodone.

### Opioid side effect

Tapentadol and Oxycodone are opioids. They are strong and effective pain relief medications that are often required after surgical tooth extractions. Opioid medications often have unwanted side effects. The most common unwanted side effects are **nausea, constipation & lethargy**. We recommend taking anti-nausea medication (ondansetron) and simple laxatives (ie. Coloxyl & Senna and/or Movical) to counteract these side effects.

### Nausea

Nausea and/or vomiting is not a common issue after having teeth removed. However, opioid medications such as Tapentadol & Oxycodone can cause severe nausea and vomiting in some individuals. If you are experiencing nausea and/or vomiting please contact your treating dentist for a script for an anti-nausea medication (such as ondansetron) to your closest pharmacy.

Ondansetron is an anti-nausea medication, take 4 - 8mg, up to twice a day if the oxycodone or tapentadol medication makes you feel nauseous.

Ondansetron is only available with a script.

Tapentadol generally causes less nausea than Oxycodone in most people.

### Constipation

Opioid medications such as Tapentadol or Oxycodone very often make patients constipated. To counteract this we recommend you consider taking laxatives such as Coloxyl & Senna and/or Movicol whilst taking these medications.

Coloxyl & Senna are tablets, which are simple over the counter laxatives. Take up to 2 tablets twice a day.

Movicol is a sachet of powder you dissolve in water and is also available over the counter. Take up to 2 sachets twice a day.

You will need to balance the amount of laxatives with the amount of opioid medication you are taking. For example, if you are needing a lot of Tapentadol or Oxycodone, we recommend you take 2 Coloxyl and Senna tablets **and** 2 Movicol sachets twice a day. However, if you are only needing a small amount of Tapentadol or Oxycodone, then you may only require 1 Coloxyl and Senna twice a day.

Coloxyl & Senna, and Movicol are both 'over the counter medications', they do not require a script. They are readily available from most pharmacies.

Tapentadol generally causes less constipation than oxycodone in most people.

### Lethargy

Tapentadol & Oxycodone can make you sleepy, dizzy, or lightheaded. Do not drive or operate heavy machinery until you know how Tapentadol or Oxycodone affects you. Do not drive or operate heavy machinery if these medications make you feel sleepy, dizzy, lightheaded or otherwise impaired.

## DISCLAIMER

These guidelines were developed by Dr Andrew Chan (MD FRACDS BDS) at Adelaide Tooth Removals & Dental Implants. They are provided as a general guide for use by dentists performing oral surgery. The advice provided here is general in nature. Your treating dentist may need to modify and/or customise some of the advice here depending on your circumstances and medical history. And it is your treating dentist's responsibility to do so if required. Dr Andrew Chan & Adelaide Tooth Removals & Dental Implants take no responsibility for the advice or care provided by other dentists who may wish to use these guidelines. Any dentist using these guidelines agrees to take all responsibility for your care and any advice provided.

Any dentist using these guidelines should not be prescribing medications that they are not familiar with. If you are a dentist using these guidelines and you are not familiar with the safe prescription and use of tapentadol, oxycodone or ondansetron you should not be prescribing them.