

« d. **Tighten and knot carefully**

An appropriate surgeon's knot should be used, with 3–5 mm of tail end remaining after the knot to avoid unravelling. The knot should be tightened without over-tightening the suture itself. If a suture is too loose and the knot locked tight, it may be appropriate to cut the suture out and replace it. Similarly if the suture appears to be too tight, or incorrectly positioned, it is perfectly reasonable to remove and reposition it. Bear in mind that multiple re-attempts at suturing may be challenging because the intra-oral soft tissues are delicate.

7. It is better to stop if you are getting into trouble

No matter your level of experience there are always occasions when the unexpected can happen. If things are not going to plan, stop and reassess. If the situation is moving beyond your skill set, listen to your gut feelings. Close with sutures, explain the situation to your patient, review and refer as needed. It is far better to abandon a procedure than to cause serious complication or irreparable harm.

Conclusions

The need to carry out a surgical extraction in primary care often arises at the most inopportune of moments, when the adrenaline levels of patient, clinician, and nurse often rise accordingly. The practical tips in this short paper if followed will offer you the chance of success. Raising the flap sufficiently to allow appropriate vision and access is key. Having a surgical kit on standby will prevent much anxiety, and as always further ongoing training and mentoring will help to optimise outcomes for patients and clinicians alike. ■ ✦

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CLINICAL PUZZLE

Fractured retainer

A 28-year-old patient presented for an orthodontic consultation. They had a history of previous fixed appliance-based treatment in adolescence. However, their upper fixed retainer had fractured 12 months previously and the patient had noted that their upper teeth were becoming crooked with an asymmetric open bite also developing. What is the likely cause of these changes?



Send your answers to k.quinlan@nature.com by 23 February 2023. The answer will be revealed in an upcoming issue. If you would like to send a clinical puzzle, view the details here: <https://www.nature.com/articles/s41415-022-5392-2>.