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The incidence of dry socket after extraction and its causative factors experience at BPKIHS

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Background: Dry socket is one of the most common complications of tooth extraction and its prevalence may reach up to >35%. Several contributing factors have been reported to be associated with an increased risk of dry socket.

Objectives: To evaluate the incidence of dry socket in BPKIHS after extraction and assessment of factor associated with the dry socket.

Material and Method: Data related to this study were collected from all patients visiting oral and maxillofacial surgery department for routine extraction. The target sample of this study comprised of 1636 patients during 6 months of the period for extraction. The data included age, sex, traumatic extraction, smoking, site of extraction, medically compromised patients, use of local anesthetics, and operators were also collected.

Results: The total number of the patients who underwent dental extraction in 2016 at BPKIHS was 1636. The number of teeth extracted was 2151. Only 68 patients returned with dry sockets giving an incidence of 4% of cases and 3.2% of the teeth extracted. Dry socket had been found to be affected significantly by female 66% and male 34%. There were 13(19%) cases of the dry socket with a medical history and 55(81%) cases of the dry socket with single extraction.

Conclusion: It is recommended to identify high-risk groups when performing extraction to consider measures in order to reduce postoperative complications.

Biography

Pradeep Acharya is an acting member within the team of oral and maxillofacial surgeons at BP Koirala Institute of Health Sciences, Dharan, Nepal serving the underprivileged population of Nepal from a public sector institution. His vision to improve the healthcare of these people has motivated him to enroll in various research activities and training the next generation of healthcare professionals. Further presently working as an associated professor in the department he has also contributed to world scientific literature.

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