DRY SOCKET (ACUTE / ALVEOLAR OSTEITIS)

This is a necrosis of bone following a dental extraction. It is usually caused by the loss of the blood clot within the extraction site, so the area has to heal by secondary intention. It is not an infection and usually not associated with an infection. Treatment is designed to soothe the pain while the area heals.

TREATMENT:

1. Gently irrigate socket with saline.

2. Gently fill socket site with iodoform gauze coated with a gel of a local anesthetic and eugenol (Sultan and other brands; Alvogyl by Septodont is available in Canada, but does not have FDA approval).

3. Remove gauze after 2 days (Alvogyl dissolves on its own, and does not need to be removed).

4. Repeat application if pain persists.

NOTE: Prescribe pain medication as needed (pages 24-31).

If obvious pus/infection, then it is not a dry socket, it is an infection and you must manage as an infection and prescribe antibiotics (pages 36-38).

If problem persists, especially if pain is not severe, and patient takes bone-antiresorptive drugs, such as bisphosphonates, consider possibility of antiresorptive agent-induced osteonecrosis (pages 96-98).