Post-operative use of 0.2% chlorhexidine after surgical removal of lower third molars

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON27406

Source
Nationaal Trial Register

Brief title
RITOR

Health condition

Alveolitis

Sponsors and support

Primary sponsor: none
Source(s) of monetary or material Support: none

Intervention

Outcome measures

Primary outcome

NRS

Secondary outcome

• Does rinsing postoperative with chlorhexidine lower the postoperative complications, after surgical removal of impacted lower third molars?
• Does rinsing postoperative with chlorhexidine lower the need for analgesics postoperative?
• Does rinsing postoperative with chlorhexidine reduces the number of out-patient contacts?
• Does rinsing postoperative with chlorhexidine reduces / affect the number of days of leave from work or study?

Study description

Background summary

Background of the study:
One of the most common postoperative complications after the removal of a third molar is a condition known as dry socket. This term has been in use since 1896. Since then several other terms have been used, including alveolar osteitis, postoperative alveolitis, alveolitis, sicca dolorosa and fibriniolytic alveolitis. Bim labelled the complication fibrinolytic alveolitis which is the most accurate of the terms, but also the least used. The condition has generally been characterised by delayed healing associated with degradadtion of clot, and is usually accompanied by persistent, radiating, pain postoperativively in and around the extraction site that is not easily relieved by analgesics6.
Because of the pain, swelling and trismus, patients also tend to have a greater need for painkillers. If it is possible to reduce the amount and severity of postoperative pain felt by patients the postoperative period would be more endurable, the quality of life will be less affected, and in addition to this it is possible that the amount of analgesics taken by patients after surgery could be lowered7. It can be a burden for both patients an surgeons and my result in a loss of productivity because at least 45% of patients require multiple visits to the surgeon.

Objective of the study:
Many authors have advocated different methods of treating alveolar osteitis. One of these is the use of 0,12% chlorhexidine before and after the removal of the third molar. Despite many years of research, however, little progress has been made and so a study with large enough sample and standard outcome measures is warranted.Goal of this study is assess the effect of postoperative use of chlorhexidine on postoperative complaints after surgical removal of a lower third molar.

Study objective

Rinsing will reduces NRS score

Study design

Primary outcome: during the recall visit one week after the surgery the diary with the NRS score is collected. The highest NRS score and the mean NRS score is noted. Data is noted in

online in the Research Manager database.

Secondary outcomes: at the day of the surgery the oral hygiene, smoking, infection of the operculum en pockets are noted as parameters in the Research Manager database. At the recall visit 7-days after surgery Bleeding, Dehiscense, Foodimpaction, Alveolitis, Fever, Painkiller use, Days from work and unplanned visits are noted. Data is noted in online in the Research Manager database.

Intervention

Chlorhexidine

Contacts

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Eligibility criteria

Inclusion criteria

In order to be eligible to participate in this study, a subject must meet all of the following criteria: patients over 18 years of age (non smoking) referred for removal of a wisdom tooth in the mandible. Patient has ASA I.

Exclusion criteria

- Patient is younger than 18 years
- Patient has an ASA of II,III en IV
- Patient has only one maxillary third molar that needs to be extracted/removed
- Patient has an active pericoronitis
- In case of planned coronectomy

- Patient has trismus
- Patient has chronic pain
- Patient is pregnant
- Patient has a known allergy for ibuprofen of other NSAID’s
- Patient has a known allergy for articaine of epinefrine
- Intra-operative compilations for example excessive bleeding

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	05-07-2021
Enrollment:	150
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion

Date:	20-09-2021
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 54943
Bron: ToetsingOnline
Titel:

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL9761
CCMO	NL71727.075.20
OMON	NL-OMON54943

Study results