

Coronectomy

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is a coronectomy?

A coronectomy is treatment for a tooth that pushes through the gum and has become sore, swollen and infected.

What are the benefits?

The aim of the procedure is to remove part of the tooth which is causing problems, leaving the root of the tooth in place. Leaving the root in place reduces the risk of damage to the nerve that gives feeling to the lower lip and chin on that side in situations where the nerve may be very close or touching the root.

Are there any alternatives?

If the tooth decay is severe or there is an infection around the root of your tooth, your surgeon may suggest that the whole tooth is removed, including the root.

What will happen if I decide not to have the procedure?

Your symptoms may get worse.

If the tooth is hard to keep clean, tooth decay may develop. This can also affect nearby teeth.

What does the procedure involve?

Most coronectomies are performed under a local anaesthetic which is injected close to the tooth to numb it. However, various anaesthetic techniques are possible, including a general anaesthetic or sedation. The procedure usually takes up to 25 minutes but can take longer if you had a general anaesthetic or sedation.

Because the tooth has not fully pushed into your mouth, your surgeon will need to make a cut around the tooth to expose more of your tooth. Your surgeon will drill a small amount of jawbone away and drill a deep groove into the tooth about a third of the way down.

Your surgeon will separate the top part of your tooth, leaving the root behind. They will trim and smooth the surface of the root so it is below the level of the surrounding jawbone.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health. Stopping smoking and keeping your mouth clean significantly reduces the risk of infection.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

What complications can happen?

The healthcare team are trained to reduce the risk of complications.

Possible complications of this procedure are shown below. Some may be serious.

Any risk rates given are taken from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. Some risks are higher if you are older, obese, have other health problems or you smoke. Health problems include diabetes, heart disease or lung disease.

General complications of any procedure

- Bleeding after the procedure.
- Allergic reaction to the equipment, materials or medication.
- Swelling and bruising of the side of the face the procedure was performed on.

Specific complications of this procedure

- Infection. If this happens shortly after your procedure and the root is sitting close to the nerve, the risk of nerve damage is the same as if the whole tooth is removed during the first procedure.
- Dry socket.
- Damage to the nerve that provides feeling to the lower lip and chin. This can sometimes be permanent.
- Damage to the nerve that gives feeling to the tongue and some sense of taste. This can sometimes be permanent.
- Stiff jaw.
- The root becoming loose during the procedure.

Late complications

- Another operation 5 to 6 years after surgery. Almost all roots move and sometimes they may push through the gum. The root may need to be removed. The risk of nerve damage can be reduced if the root has moved away from the nerve.

Consequences of this procedure

- Pain in the area where your surgeon performed the coronectomy.

What happens after the procedure?

You should be able to go home the same day.

Eat only soft foods for 1 to 2 days, gradually moving on to solid food only when you can chew comfortably. Avoid things that may irritate the area, such as food that is chewy or has sharp edges such as crisps and rice. Try to chew using the other side of your mouth.

It can take 2 to 3 weeks for your wound to close, so gently rinse your mouth after meals to keep your wound clean.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Your surgeon may arrange for you to come back to the clinic for a check-up.

Summary

A coronectomy is a procedure to remove the top of your tooth.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

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