



***SNS COLLEGE OF ALLIED HEALTH SCIENCES
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AFFILIATED TO Dr MGR UNIVERSITY, CHENNAI***

***DEPARTMENT OF OPERATION THEATRE AND
ANAESTHESIA TECHNOLOGY***

3rd YEAR

SUBJECT: Principles of Anaesthesia II

TOPIC: Trauma to teeth



Introduction:

- Dental trauma is a recognized but often underestimated complication of general anaesthesia.
- It occurs most commonly during airway management—especially during laryngoscopy, intubation, or use of supraglottic airway devices.



Incidence:

- Dental injuries are reported in 0.02% to 0.1% of all anaesthetics.
- They account for up to 30%–50% of medico-legal claims in anaesthesia.



Common Types of Dental Trauma:

- Fracture of teeth (most often upper incisors)
- Luxation (loosening)
- Avulsion (complete dislodgment)
- Crown/root fractures
- Damage to dental prostheses (crowns, bridges)



Risk Factors:

- Patient-related: Poor dentition, existing dental restorations, periodontal disease, protruding teeth.
- Anaesthetic-related: Difficult airway, multiple intubation attempts, use of rigid laryngoscope blades.
- Procedure-related: Emergency intubations, poor lighting, lack of protective devices.



Prevention:

- Preoperative dental assessment
- Use of bite blocks and protective mouthguards
- Gentle laryngoscopy with appropriate blade size
- Avoiding excessive force during airway manipulation
- Documenting any pre-existing dental issues



Management of Dental Trauma:

- Immediate inspection of oral cavity post-procedure
- Retrieve any broken fragments to prevent aspiration
- Dental consultation as soon as possible
- Proper documentation and informing the patient



THANK YOU