0096 Pain after 3rd Molar Surgery and Lifestyle/Oral Function Recovery

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Objectives: Recovery for lifestyle and oral function after 3rd molar surgery precedes recovery for pain. We assessed the impact of taking pain medications as an indicator of perceived pain on the extent of interference with lifestyle and oral function during recovery.

Methods: Data after removal of four 3rd molars were available for patients enrolled in an IRB-approved, prospective, multicenter trial. A self-administered Health Related Quality of Life instrument designed to assess a patient's perception of recovery for pain, lifestyle, and oral function, was completed each post surgical day (PSD) for 14 days. Taking pain medications was a proxy for a patient's perceived level of pain adding a behavioral component to the report of pain.

Each PSD day, the patients who felt that their pain was sufficient to require taking medications (an opioid, NSAID or the combination) were compared to patients not taking pain medications. The extent of interference in lifestyle (daily activity, social life, recreation, sleep) and oral function (eating, chewing, mouth opening) as self reported on a scale of 1 (no trouble) to 5 (lots of trouble) was compared using CMH row mean statistics (p< 0.05).

Results: The 445 patients were mostly female (63%) and Caucasian (86%). Median age was 20 years (IQ18, 24y). 92% patients took pain medications on PSD 1. By PSD 7, 48% were taking pain medication decreasing to 20% by PSD 11. If patients had pain sufficient for them to take an analgesic, the average extent of interference reported was significantly higher for all outcome measures from PSD 2 through 14, P<0.01. Recovery for females taking pain medications was significantly delayed vs. males, P<0.05.

Conclusion: Patients requiring pain medications reported more problems with recovery for lifestyle and oral function. Pain medication use appears to be a good behavioral indicator of pain.