CLINICAL RECORD

MISPLACED WISDOM TOOTH EXTRACTED DURING TONSILLECTOMY

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THE following case is unique in my experience and appears to be worthy of special record as I cannot find in the literature any report of an exactly similar experience. C. Bowdler Henry, however, in the *Journal of Laryngology and Otology*, May, 1936, Case No. 54, describes a somewhat similar experience, but in his case the patient coughed out the tooth on examination of his tonsil.

A Nurse, age 43, was referred to me on *September 20th*, 1941, complaining of headache for five days. The pain was extremely severe for three days and there was also pressure over the eyebrows and a purulent nasal catarrh. Her tongue was very coated.

On examination I found she was suffering from an acute frontal sinusitis with an associated ethmoidal and maxillary sinusitis of the left side. She wore dentures but had four sound front teeth. I observed that she had very septic tonsils and as she gave a history of occasional sore throats including a left sided quinsy, I had no hesitation in deciding that her tonsils were the source of her sinus infection. Therefore appropriate treatment for the sinusitis was prescribed including ten days off duty and also a strong recommendation to have her tonsils removed in three or four weeks' time.

On *October 27th*, 1941, i.e. five weeks later, I removed her tonsils. At operation I observed that the left tonsil was much larger than the right and that the lower pole expanded rather further outwards towards the jaw than usual and was very congested. I expected it to contain an abscess. As dissection was proceeding toward this lower pole, pus was seen to squirt out in worm-like fashion from the outer (lateral) part and on deeper dissection I was amazed to find a small hard black gangrenous object literally pop out of the tonsil. This proved to be a third molar tooth. (See X-ray.)

On questioning the patient afterwards she gave this history. In 1923 she was to have fourteen teeth removed under gas at a Dental Hospital, but as she came round too soon only seven were removed. She stated that she was apparently troublesome under the anæsthetic and also that "students" performed the operation. Quinsy developed in the left tonsil the same week and this was said

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to be due to sepsis following teeth extractions. The remaining seven teeth were removed with local anæsthesia some months later. She has had occasional sore throats since, but otherwise her health has been good until 1940-41, when she developed more heavy colds than usual, with slight sore throats and adenitis, nasal catarrh and severe headaches.

The most probable explanation of this unusual case is that during the first extraction under gas in 1923 the third molar was displaced lingually, and owing to the difficulty in getting good anæsthesia, it could not be properly extracted. One week later a left sided quinsy developed and this settled down. Except for occasional sore throats, there have been no symptoms until recently. Then sinus infection developed due, in my opinion, to ascending infection from an abscess in her left tonsil caused by a misplaced wisdom tooth, which revealed itself on removing the tonsil. It is indeed remarkable that this tooth has lain dormant for eighteen years and given rise to no symptoms until the present time.

I showed the specimen to my colleague, Mr. P. B. Myers, L.D.S., who makes the following observations. The mucosa posteriorly and slightly lingually to the third molar tooth in the mandible is more adherent to the crown of the tooth than to the periosteum of the bone. Thus it is possible for the tooth if displaced lingually during extraction to be pushed between the mucosa and the periosteum. Now in close proximity to the third molar on its lingual side there is a potential space opening into the cervical fascia. He also thinks that it is probable that during extraction the third molar was dislodged lingually and pushed down into this space.

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Misplaced Wisdom Tooth Extracted During Tonsillectomy.—A. Mackenzie Ross



Specimen removed from left Tonsil
on 27.10.41

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