Extraction technique of the mandibular teeth

Before discussing the technique of extraction for each tooth, we have to know what is the role of the other hand of the operator (the left hand in the right handed people):

- When removing lower molar teeth, (Figure 7-62).
  - one finger of the left hand is in the buccal vestibule,
  - the second finger is in the lingual vestibule, reflecting the lip, cheek, and tongue
  - The thumb of the left hand is placed below the chin so that the mandible is held between the fingers and the thumb, which support the mandible and minimize TMJ pressures.
- This technique provides less tactile information, but during extraction of mandibular teeth, the need to support the mandible supersedes the need to support the alveolar process.
- A useful alternative is to place a bite block between the teeth on the contralateral side.
  - bite block allows the patient to help provide stabilizing forces to limit the pressure on the TMJs.
  - The surgeon’s hand should continue to provide additional support to the jaw.

Figure 7-62 Extraction of mandibular left posterior teeth. The surgeon’s left index finger is positioned in the buccal vestibule, retracting the cheek, and the second finger is positioned in the lingual vestibule, retracting the tongue. The thumb is positioned under the chin. The mandible is grasped between the fingers and the thumb to provide support during extraction.
Mandibular anterior teeth

- Anatomy review
  - Mandibular incisors and canines are similar in shape, with the incisors being shorter and slightly thinner, and the canine roots being longer and heavier.
  - The incisor roots are more likely to be fractured because they are thin, and therefore, they should be removed only after adequate pre-extraction luxation.
  - Alveolar bone that overlies incisors and canines is thin on the labial and lingual sides.
  - Bone over the canine may be thicker, especially on the lingual aspect.
- The technique (Figure 7-64).
  - The forceps beaks are positioned on teeth and seated apically with strong force.
  - The extraction movements are generally in the labial and lingual directions, with equal pressures both ways.
  - Once the tooth has become luxated and mobile, rotational movement may be used to expand alveolar bone further.
  - The tooth is removed from the socket with tractional forces in a labial–incisal direction.

Figure 7-64. A, When extracting mandibular anterior teeth, the No. 151 forceps are used. The assistant retracts the patient’s cheek and provides suction. B, The forceps are seated apically as far as possible. C, Moderate labial pressure is used to initiate the luxation process. D, Lingual force is used to continue the expansion of bone. E, The tooth is delivered in the labial–incisal direction.