

# Syncope During the Perioperative Period for Impacted Wisdom Tooth Extraction: A Case of Dental Phobia

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## **Abstract**

Patients with dental phobia have a specific and strong anxiety to dental treatment. There are no clear criteria for diagnosing this condition, and we usually use the Spielberger's state-trait anxiety inventory (STAI) to evaluate the patient's anxiety level before oral surgery. We administer intravenous sedation in patients with a level of anxiety higher than stage IV. We experienced a patient who developed syncope during the perioperative period for impacted wisdom tooth extraction.

The patient was a 27-year-old female without any specific medical history. We diagnosed her to have dental phobia because her state-anxiety level was V. The planned surgical treatment included the extraction of one lower mandibular impacted wisdom tooth under local anesthesia combined with intravenous sedation. For the induction of sedation, intravenous access was established, and a bolus dose of 3.0 mg midazolam was administered intravenously. Sedation was maintained by administering the continuous infusion of propofol.

At the time of the first surgery, the patient complained of fear during venipuncture; however, no large changes in the circulatory dynamics were observed. The first episode of syncope occurred when we explained the postsurgical protocol after the patient had adequate rest after the surgery. The second episode of syncope occurred when the patient stood up while working in the early morning the day after the surgery. The third episode of syncope occurred when we performed venipuncture for the second surgery using intravenous sedation. All three episodes of syncope occurred in association with straight pain and severe anxiety.

Clinicians must therefore carefully consider the care of perioperative pain and anxiety in patients with dental phobia.

**Key words : Dental phobia, Wisdom teeth, Syncope, Intravenous sedation**