Abstract: Intraoral soft tissue infections (OSTI) are a common problem in dentistry and oral surgery. These abscesses are mostly exacerbated dental infections (OIDC), and some emerge as postoperative infections (POI) after tooth extraction (OITR) or apicoectomy (OIRR). The main aim of this study was to compare OIDC with POI, especially looking at the bacteria involved. An additional question was, therefore, if different antibiotic treatments should be used with OSTI of differing aetiologies. The impact of third molars on OSTI was evaluated and also the rates of POI after removal of third molars were specified. Patient data was collected from the patients’ medical records and the results were statistically evaluated with SPSS (SPSS version 21.0; SPSS, IBM; Chicago, IL, USA). The inclusion criterion was the outpatient treatment of a patient with an exacerbated oral infection; the exclusion criteria were an early stage of infiltration without abscess formation; and a need for inpatient treatment. Periapical exacerbated infections, especially in the molar region were the commonest cause of OIDC. In the OITR group, mandibular tooth removal was the commonest factor (p=0.016). Remarkably, retained lower wisdom teeth led to significant number of cases in the OITR group (p=0.022). In our study we could not define differences between the causal bacteria found in patients with OIDC and POI. Due to resistance rates we
conclude that amoxicillin combined with clavulanic acid seems to be the antibiotic standard for exacerbated intraoral infections independent of their aetiology.