

How do I manage a patient with intrusion of a permanent incisor?

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Traumatic intrusion is a luxation injury where the tooth is axially displaced into the alveolus. Although, this type of injury is more common in primary teeth, it is considered one of the most severe luxation injuries affecting permanent teeth. Intrusion injuries are often associated with severe damage to the tooth, periodontium and pulpal tissue.

Factors determining treatment choice are stages of root development and intrusion level. The following three methods are only partly evidence based.

- Spontaneous eruption

This is the treatment of choice for permanent teeth with incomplete root formation with minor or moderate intrusion. In teeth with mature root development it is only recommended for teeth with minor intrusion. This treatment seems to lead to fewer healing complications than orthodontic and surgical repositioning. If no movement within a few weeks, initiate orthodontic or surgical repositioning before ankylosis can develop.

- Orthodontic repositioning

This treatment may be preferred for patients coming in for delayed treatment. This treatment method enables repair of marginal bone in the socket along with the slow repositioning of the tooth.

- Surgical repositioning

This treatment technique is preferable in the acute phase. Intrusion with major dislocation of the tooth (more than 7 mm) may be an indication for surgical repositioning. Endodontic treatment can prevent the necrotic pulp from initiating infection-related root resorption. This treatment should be considered in all cases with completed root formation where the chance of pulp revascularization is unlikely. Endodontic therapy should preferably be initiated within 3-4 weeks post-trauma. A temporary filling with calcium hydroxide is recommended. Through a clinical cases, we will discuss the factors involved in the prognosis of refitting intruders teeth and propose a model treatment plan for this type of dental dislocation.

Biography

Kallel Ines obtained her Doctors Degree in Dentistry in 2007 and Degree of Specialist in Conservative Dentistry and Endodontics in 2012 from University of Monastir, Tunisia. She started practicing as University Hospital Assistant from 2013 in the Hospital Sahloul Sousse.

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