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Combination of dent alveolar traumatic injury: A case report (seven- year follow-up)

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Traumatic dental injuries present difficult challenges for patients and dentists. as with most types of dental treatment, the primary goal when treating a case is to save teeth at risk of being lost and restore them to full function and normal appearance. In many cases, the difference between saving and losing a tooth depends on taking the proper action in the immediate aftermath of an injury. A case of multiple concomitant dental traumas is reported. In 2010, a Saudi male patient, 15 years old, visited the dental office an hour after dental trauma caused by accidentally hit a door of glass. He complained of discomfort and bleeding around mobile upper anterior teeth; in the clinical assessment, tooth 11 had uncomplicated crown fracture and both 11 and 21 showed partial displacement from their sockets with grade three mobility; in the radiographic analysis, they showed an increase in periodontal ligament spaces, a diagnosis of extrusive luxation. The adjacent teeth 12 and 22 presented subgingival bleeding with grade one mobility and were diagnosed with subluxation. After treatment planning, the clinical approach consisted of manual reduction of 11 and 21 and flexible splint of the affected teeth. After 15 days, the splint was removed and teeth 12, 11, 21 and 22 showed negative pulpal sensibility, maintaining the same results for four months. In the fourth month, all affected teeth were diagnosed with pulp necrosis, thus requiring endodontic treatment. After seven years, the teeth and the surrounding tissue were clinically and radiographically asymptomatic and in function. In conclusion, it is impossible to completely prevent accidents that might result in dental injuries, but their associated complications can be avoided by ready and adequate treatment follow up.

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