

18th International Conference on

Oral Health & Maxillofacial Surgery

December 05-06, 2016 Madrid, Spain



Koleilat Mohamad

Private practice-limited to Oral surgery/periodontic and Implantology- JBDC-UAE

Again, Dental Impaction and Infection; what to do?

GP dentist and or Oral surgeon specialist are frequently faced with teeth eruption anomalies during the eruption phase of the adult dentition as tooth impaction and related infection. Impacted teeth are classically defined as retained in the maxillary or the mandibular jaws beyond the normal date of eruption or ectopic as beyond the normal site of eruption surrounded by the follicular bag without communication with the oral cavity (UNERUPTED TOOTH). Some other authors describe this situation as tooth retention,

A physiological or pathological classification as intra osseous (BONY IMPACTED) or sub mucosal type of impaction (PARTIALLY ERUPTED) can be used.

Which guidelines to recommend to follow for removal of unerupted and impacted Teeth?

- Scenarios where is not advisable. (asymptomatic, deeply bone seating, Risk of anatomical damage)
- Scenarios where is advisable. (orthognatic surgery indication, frequent Pericoronatis...)
- Strong indications for removal. (Pericoronatis, cellulitis, cyst, unrestorable....)

The classic distribution in order of frequency of impaction of permanent teeth will be mentioned. After proper clinical examination including dental history, medical update, diagnostic radiological aids as peri apical, panoramic view and CBCT; Histological aids as biopsy in case of related odontogenic or non odontogenic cyst: a positive DIAGNOSIS will be established and treatment plan will be decided.

Decision of surgical removal of impacted teeth, or conservative will be confirmed, Informed consent should be explained and signed. Common and serious per and post-operative complications should be explained to Patients. Other dental impaction will be considered for Surgical exposure and orthodontic Traction. . Proper Treatment plan decision will be a joint venture with an Orthodontist. Clinical cases will illustrate the different clinical scenarios with discussion of the proposed treatment plan. Dental infection and odontogenic cyst cases will be presented with the appropriate management. Take home messages and recommendations will conclude the presentation.

Objectives :

Clinical diagnosis and etiology of the uneruption or impaction of the tooth to be well established.
Need to follow guidelines for decision making in surgical removal or No of the impacted tooth.
Awareness for GP dentist which surgical impacted removal to do and when to refer to an oral surgeon specialist.
Which diagnostic radiological and histological aids to be used in different clinical cases.
Understand surgical procedures and post operatives possible complications.
Orthodontic -surgical cooperation needs for the impacted teeth to be reposition in original site.

Biography

Doctor in Dental Surgery (DDS) from St. Joseph university Beirut, Lebanon, 1984, Certificate university of paris 7 of Periodontology, C.E.S. France, 1986.

mohdkol@emirates.net.ae