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Mistakes of endodontic treatment

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In therapeutic dentistry, one of the main problems is endodontic, since about a third of dental patients need root canal treatment. The following errors were identified due to the complex anatomy of the root canal. 40% of the lower incisors have two root canal, 58% of the second premolar of the upper jaw has two root canal, 31% of the first mandibular premolar has two root canal and 20% of anterior teeth have side branches from the main root canal. According to statistics, the main reason for the inefficiency of endodontic treatment is insufficient destruction of bacteria in the root canal - 76%, incorrect determination of indications for treatment - 22%, non-radiography - one of the reasons. More than 70% of endodontic treatment of teeth requires re-treatment. The main condition is a thorough biomechanical endodontic root canal cleaning. The ability to effectively clean the tooth cavity and root canals depends on instrumentation and irrigation channel.

Objective: To identify problems with repeated endodontic treatment encountered in everyday practice and troubleshooting. In our practice, often there are cases where the indication for retreatment of root canals are endoplombirovannye channels or unfilled channels. Perelechenivanie is seen when a fistula swells, pain, sensitivity to percussion. Such problems often occur after root canal filling pastes, which not only fill the channel tightly enough, but over time resolve. The purpose of retreatment inadequately sealed channels is to eliminate the infection and prevent reinfection.

Material and methods: Endodontic retreatment was performed in 28 patients aged 18 to 50 years. Patients complained of pain on biting, the presence of a fistula, swelling of the cheeks and loss of dental fillings. According to X-ray chronic periodontitis fibrotic diagnosed in 6 cases, chronic granulating periodontitis - in 8 cases, chronic granulomatous periodontitis - in 2 patients, exacerbation of chronic granulating periodontitis - in 12 cases.

Clinical Example number 1: The patient, 35 years appealed to the clinic with complaints of pain, aggravated by biting. The survey was diagnosed with exacerbation of chronic granulating periodontitis. On the radiograph, a lower first molar with inadequate lead-sealed root canals, in the periapical region found vast area of bone loss was seen. Treatment consists of removal of dental fillings, creating access to the mouths of the root canal, unsealing the distal channel for instrumental and medical treatment of root canals. After tooling, endodontic root canal irrigation was performed with syringe with endo needle and 0.5% sodium hypochlorite solution for high-quality medical treatment of root canals. Treatment was carried out using a tooth temporary dressing's antibacterial calcium hydroxide, which is introduced into the root canals in a liquid suspension. Temporary bandage was changed every 2 weeks as it begins to dissolve. After 3 months of temporary bandage removal, the channel was sealed up with gutta-percha sealer.

Conclusion: Thus, in the course of analysis of problem of endodontic treatment indicated that a large percentage of errors associated with poor root canal filling, leads to changes in the periapical bone area.

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