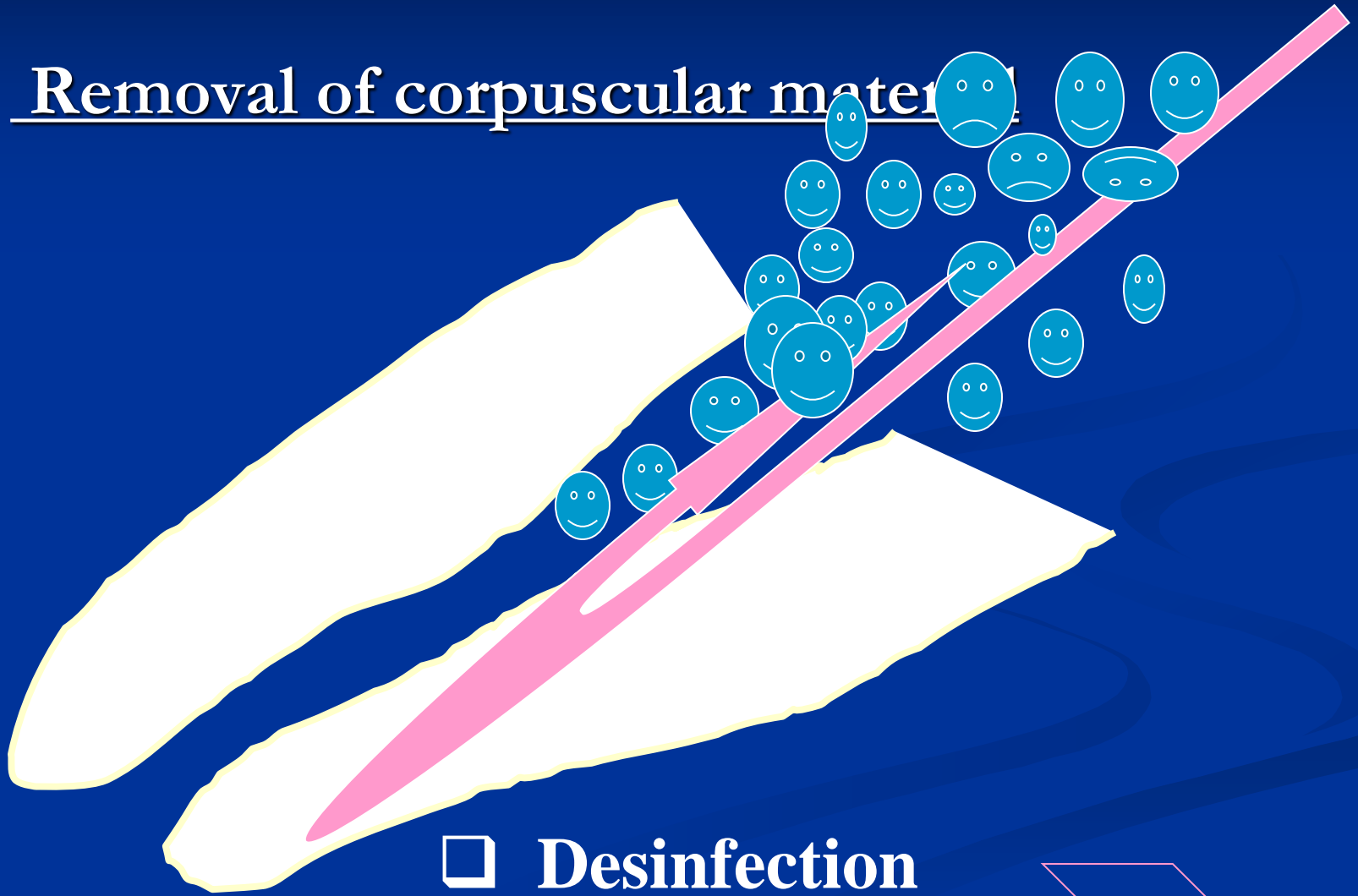


Irrigation of the root canal

□ Removal of corpuscular material



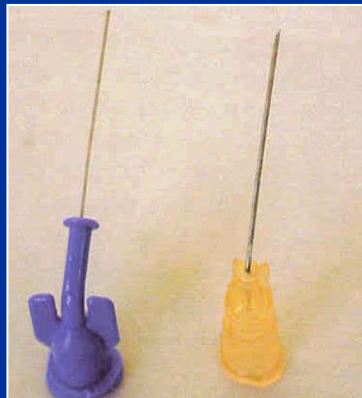
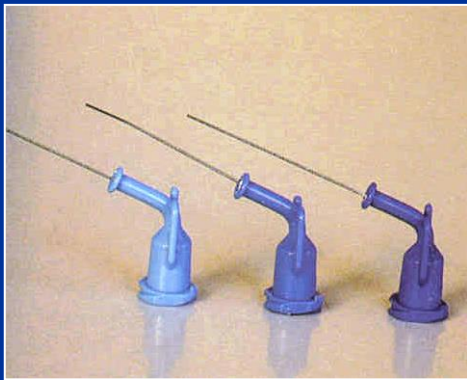
Irrigants

- ✓ Sodium hypochlorite – 0,5% – 6%
- ✓ Chlorhexidin (0,12 – 0,2%)
- ✓ EDTA 17% solution or lubrication gel
- ✓ Hydrogen peroxide 3%



■ Cannula

Opening at sides



Activation of irrigation

- Hand
- Ultrasound
- Hydrodynamic
- Laser

Desinfection

➤ Calcium hydroxide

➤ Antibiotics and corticosteroids

Irrigants

Sodium hypochlorite 1,5 – 6%

Desinfection - oxidation and chlorination

Dissolves organic material (does not dissolve smear layer)

Bad smell

Risk of hemorrhagic necrosis in soft tissues

Irrigants

- Chlorhexidin

0,12%, 0,2%, 2%

Good antibacterial spectrum

Binding to surfaces

Improves biofilm

With calcium hydroxide - parachloranilin

Does not dissolve smear layer

Precipitation with calcium hydroxide

Irrigants

- EDTA 17% - 18% solution

No significant antibacterial effect

Dissolves smear layer

Slightly decreases effect of sodium hypochlorite

Is a part of lubricants (together with carbamide peroxide and vehiculum)

Irrigants

- Citric acid 20% roztok
Dissolves smear layer.

Irrigation protocols

- Sodium hypochlorite

Into access cavity and root canal

(combination with lubrication gel on the root canal instrument – not necessary)

Irrigation protocols

Sodium hypochlorite

2% - 6%

(Activation with ultrasound 3x 20s v průběhu ošetření)

- EDTA 17% irrigation in final phase

Irrigation protocols

- NaOCl
- EDTA gel
- EDTA solution 18% 30s – 1min

Irrigation protocols

- NaOCl
- EDTA gel
- EDTA solution 18% 30s – 1min

- NaOCl 1min
- Sterile water
- Chlorhexidin 5 min

Activation of irrigation

- Sonic (Endo Activator)
- Ultrasound
- Laser (erbium laser, photodynamic activation – chromofofor in the root canal)
- Hydrodynamic activation
- Endovac

SONIC SYSTEM

ENDOACTIVATOR™ SYSTEM

On/Off

ENDO ACTIVATOR™

3 speed sonic motor, 2'000,
6'000 and 10'000 cpm



SMALL
(15/02)

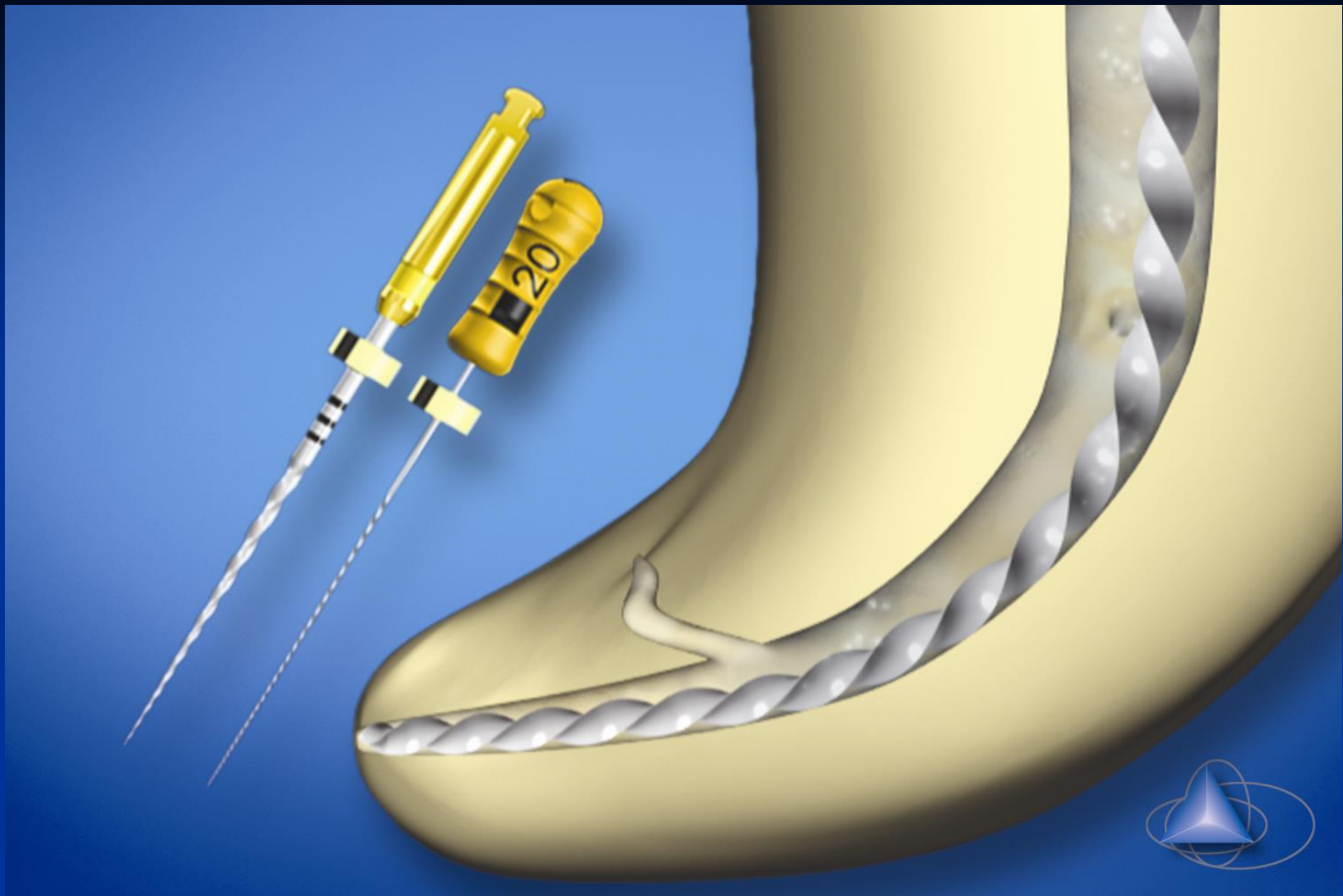


MEDIUM
(25/04)



LARGE
(35/04)





Well-shaped root canal.

CLINICAL APPLICATIONS



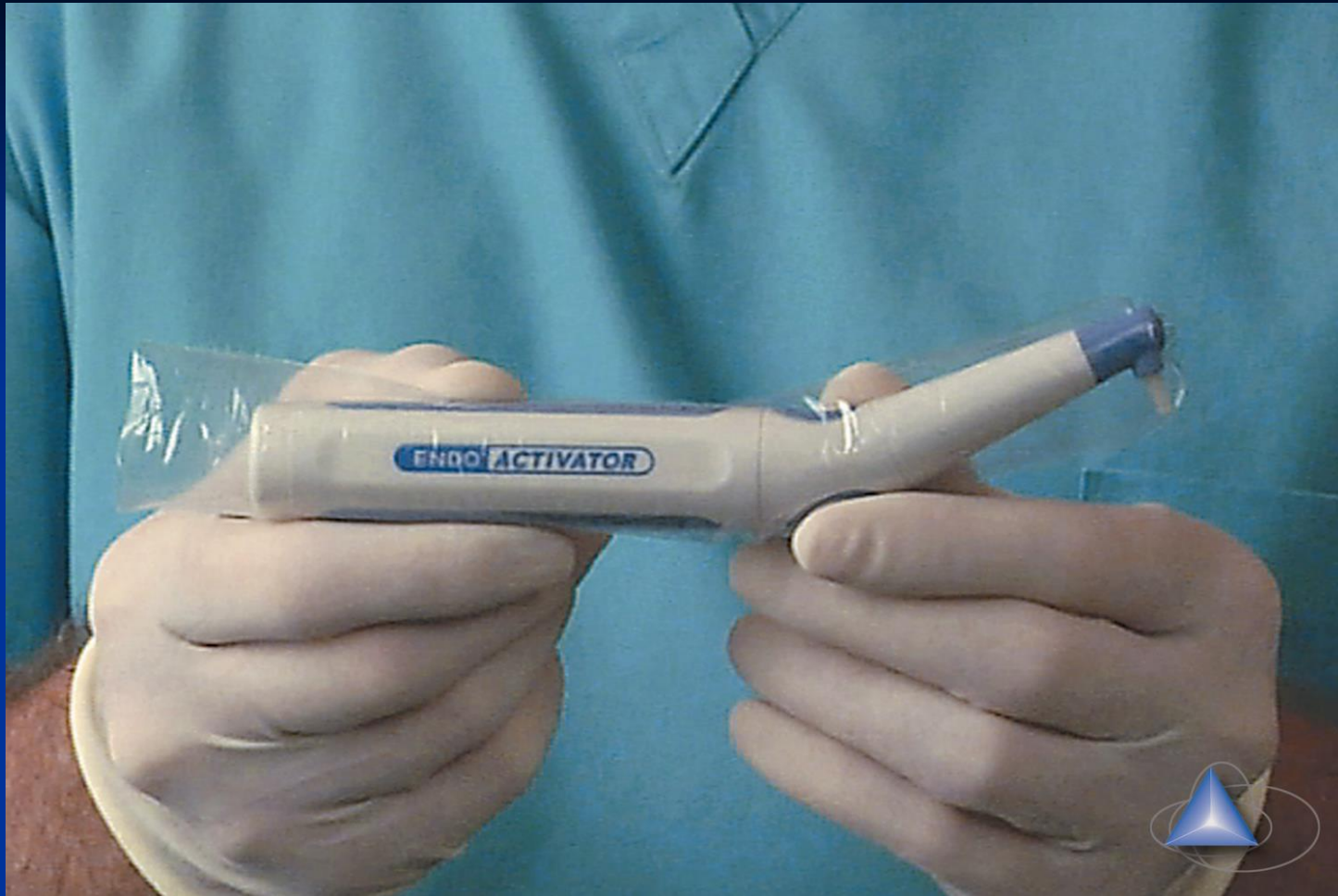
- 1. Debridement • Smear Layer • Biofilm**
- 2. Adapt and Remove Calcium Hydroxide**
- 3. Adapt Mineral Trioxide Aggregate**
- 4. Remove Residual Obturation Materials**



CLINICAL PROTOCOL

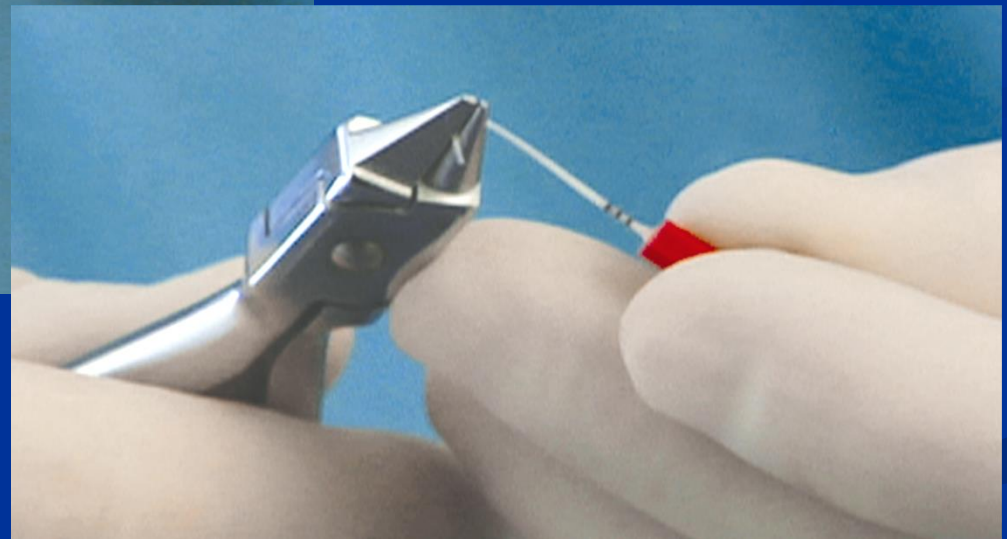
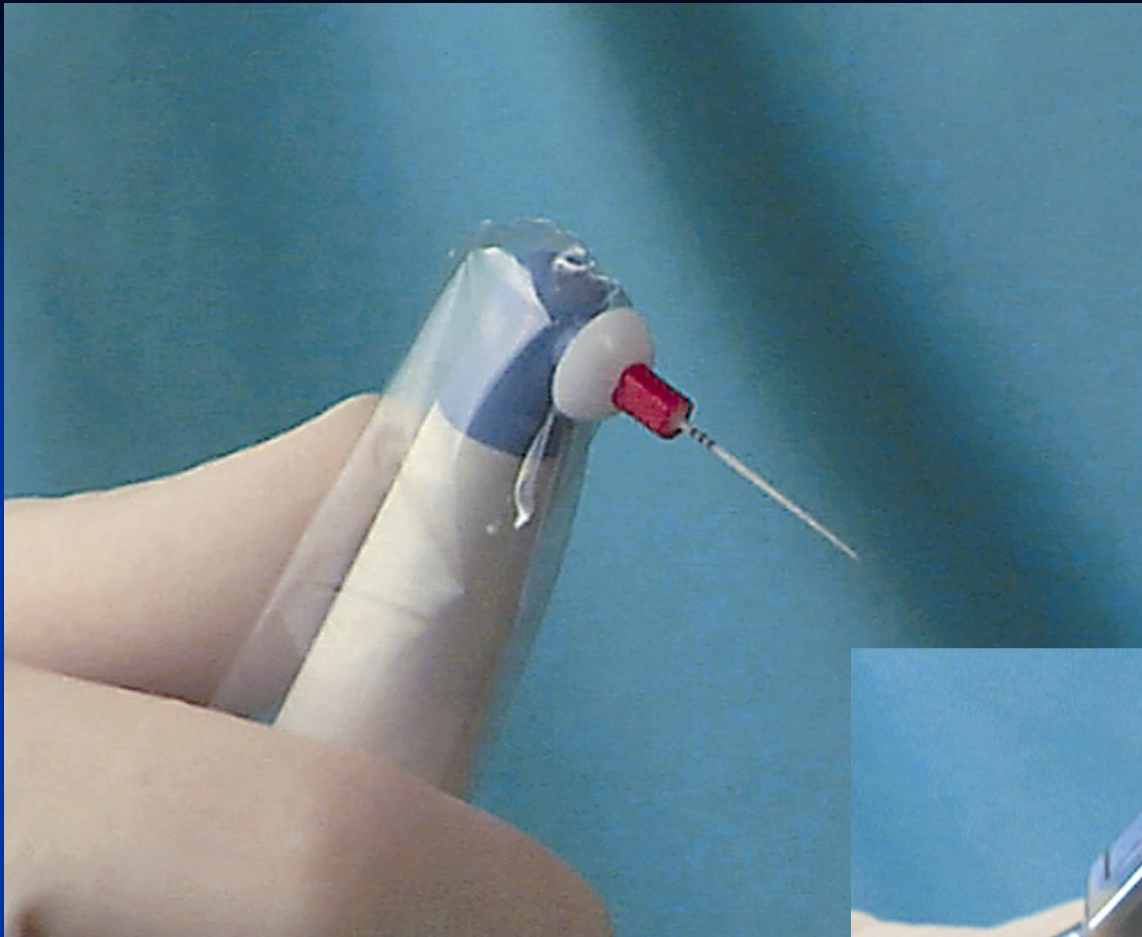
- **EndoActivator Tip Selection**
- **Activate 17% EDTA for 1 Minute**
- **Activate 6% NaOCl for 30 Seconds**



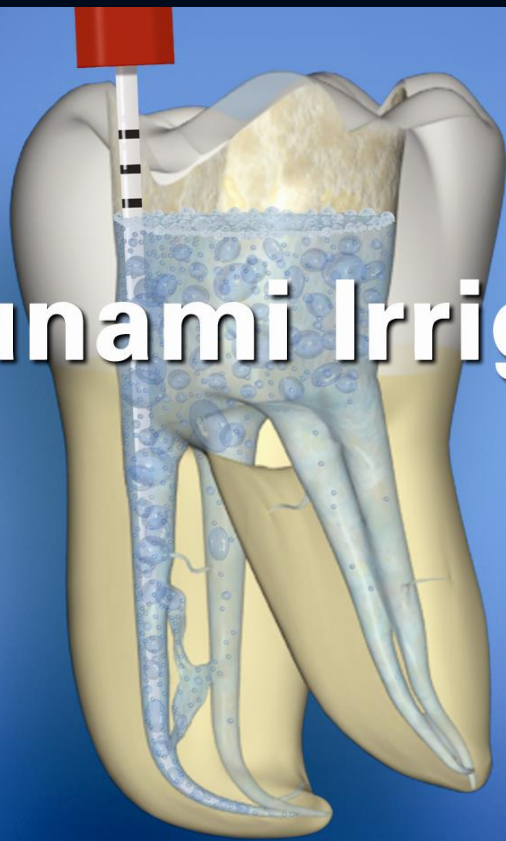


**Custom protective barrier sleeves
designed to slide over the handpiece**

Fix the tip

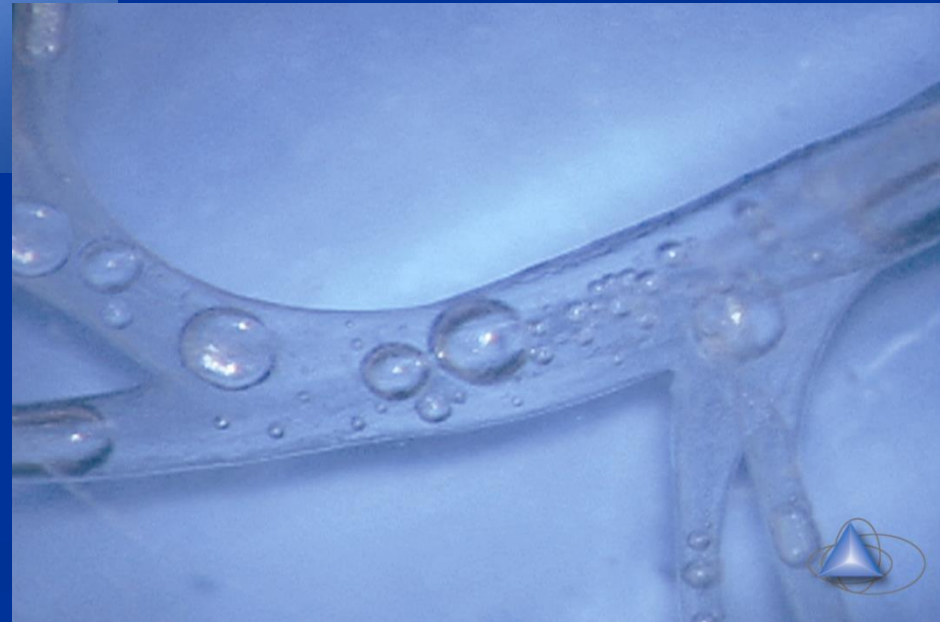


Tip could be bent, if necessary



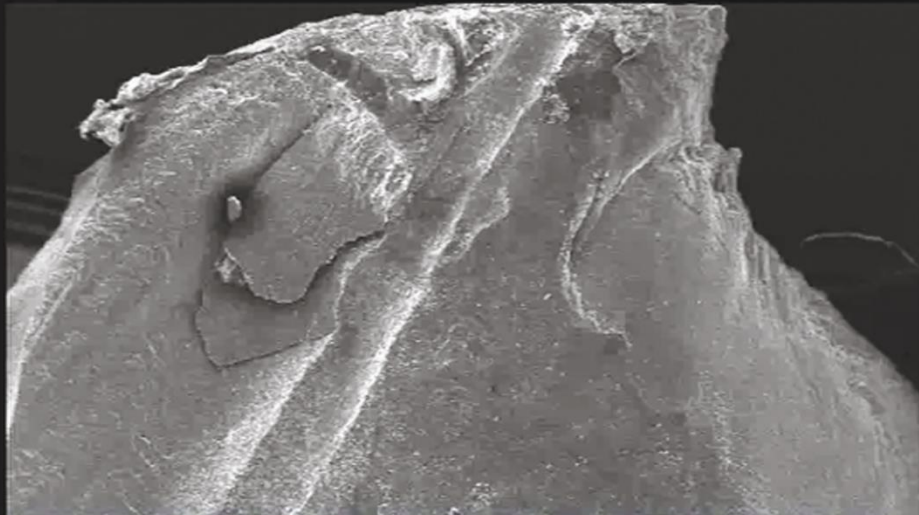
Tsunami Irrigation

Hydrodynamic activation serves to improve

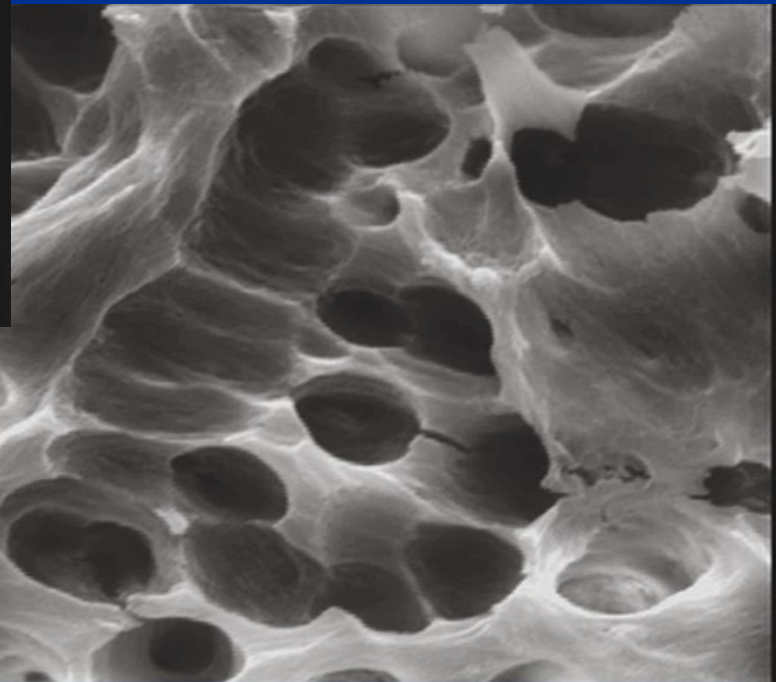


the penetration, circulation and flow of irrigant





Caron G: Cleaning efficiency of the apical millimeters of curved canals using three different modalities of irrigant activation: a SEM study, Master Thesis, Paris 7 University, 2006.



Caron G: Cleaning efficiency of the apical millimeters of curved canals using three different modalities of irrigant activation: a SEM study, Master Thesis, Paris 7 University, 2006.



Ultrasound





EndoVac

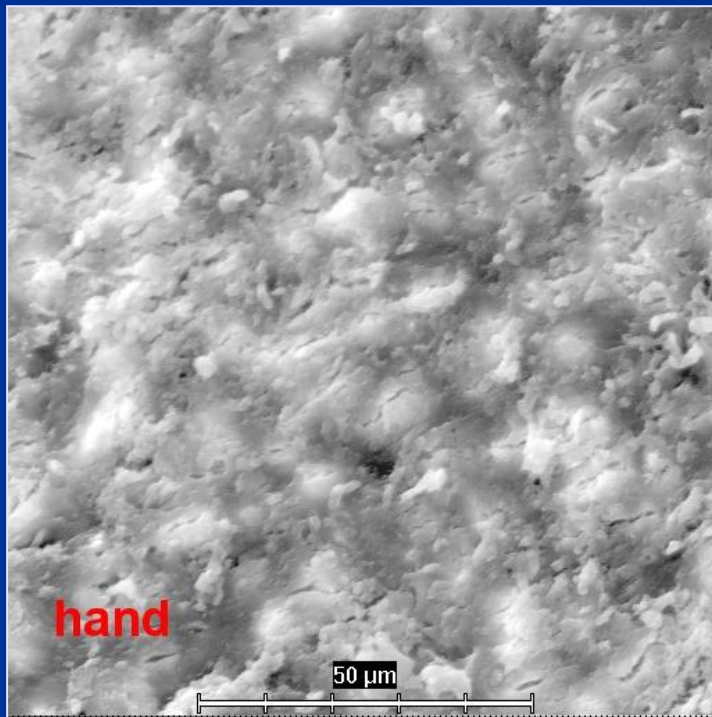
Active suction of the irrigant





Smear layer

SEM

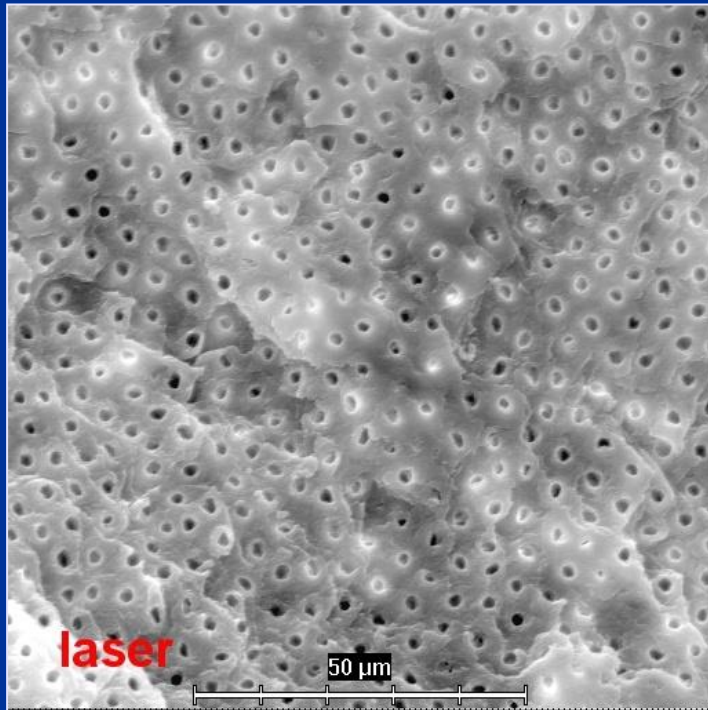


ESEM

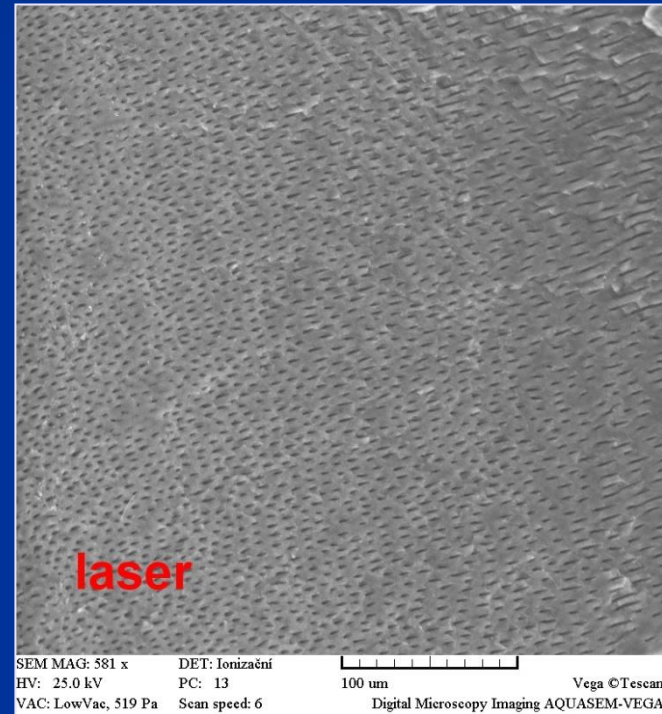


Clean root canal wall

SEM



ESEM



Calcium hydroxide

- Alkaline
- Antibacterial
- Stimulation of hard tissue formation
- Haemostatic and antiphlogistic

Calcium hydroxide

Temporary root canal filling

Subbase

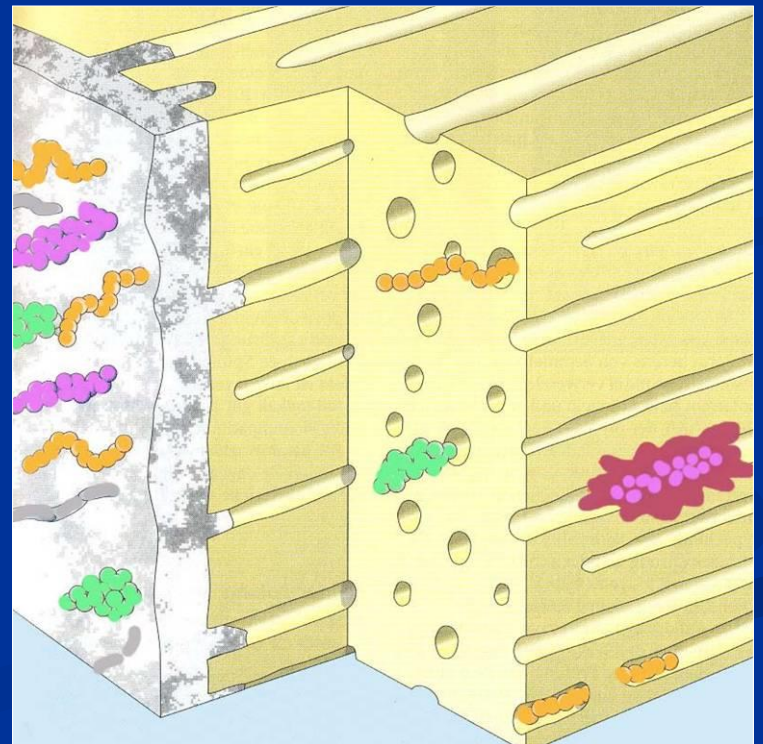
Component of sealers

Mode of action

- Release of hydroxyl ions
- Long term alkalization
- Stimulation of hard tissues formation



Dressing



Calcium hydroxide

- Short term action

1 – 2 weeks

Desinfection, haemostasis

Calcium hydroxide

- Middle term action

2 – 3 months

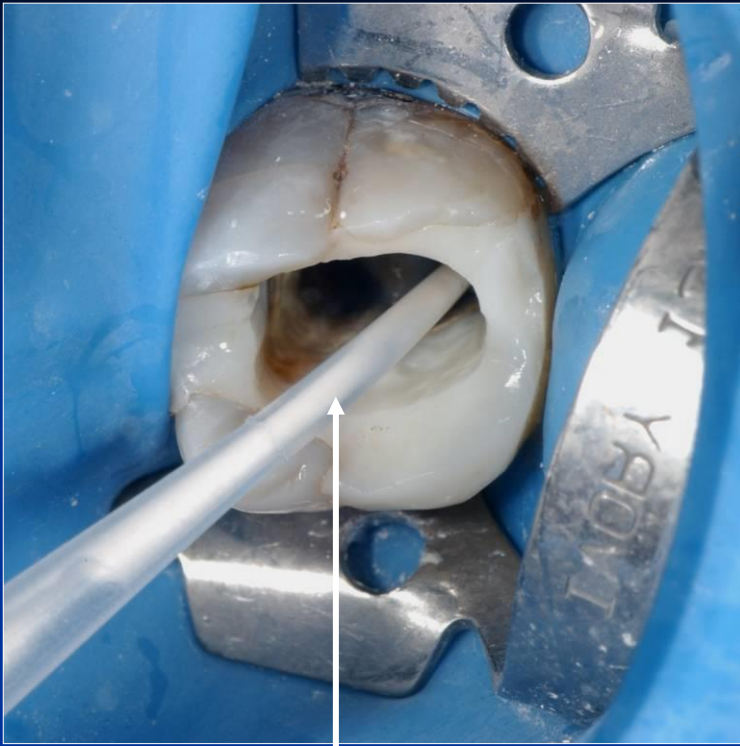
Apexification

Chronic form of apical periodontitis

Calcium hydroxide

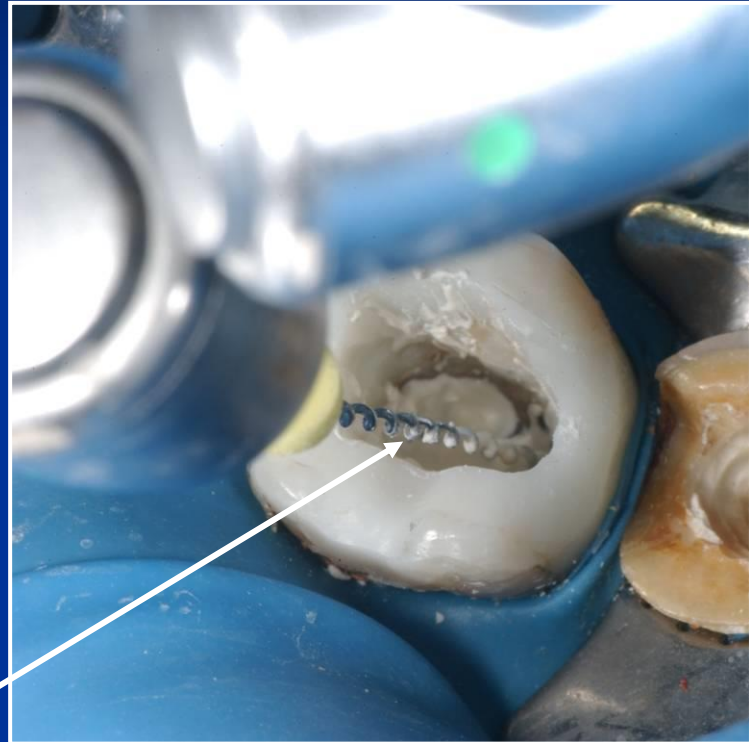
- Long term action
3 months and more

Prevention of resorption



Magistraliter

The powder is mixed with distilled water



Lentule 2 mm less than WL !!!!!

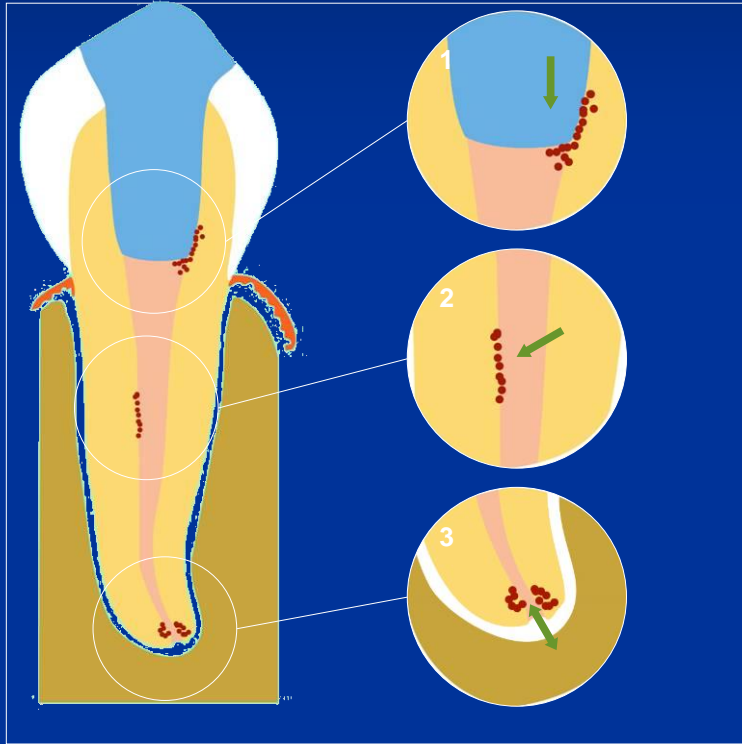


Apexit® Plus

ApexCal®

Root canal filling

Root canal filling



Good coronal,
Middle
Apical seal.

Quality guidelines for endodontic treatment,
European Society of Endodontology (ESE), 1994

Ideal root canal filling (Grossman 1988)

1. Easy mixing
2. Sufficient working time
3. Good seal
4. X- ray contrast
5. Easy removal
6. No shrinkage
7. Long term volume stability
8. No bacterial growing
9. No permeability for fluids
10. Biocompatibility
11. No staining

Classification of root canal fillings

- Solid
- Semisolid
- Pastes

Guttapercha

Dried juice of the Taban tree (*Isonandra percha*)
(gutta)

1,4 - polyisoprene

Crystallin structure (60%)

Brittle

Guttapercha

■ Beta phase

■ Alpha phase 42 – 49 °C

- plastic

- **Gamma phase** 56 – 62° (amorfní)

Cooling process

very slowly (less than 0,5°C) – alpha phase

normal cooling– beta phase

Composition of guttapercha materials in endodontic

Guttapercha 19% – 22%

Zinc oxide 59 - 79%

Heavy metal salts 1% - 7%

Wax or resin 1% - 4%

Resilon

(Pentron)

- Thermoplastic synthetic polymer
- Points or material for injection

Composition:

Polyester polymers

Bioactive glass

Radioopaque fillers (bismuthum oxichlorid a and baryum sulphate)

Silver or titanium cones

- No good seal
- Silver cones - corrosion

Sealers

Chemically curing materials

(their consistency is paste, cements)

Good adhesion to root canal walls as well as solid cones

X- ray contrast

Biocompatibility

Sealers

Importance

Filling of the spaces between the solid cones



Seal of the root canal filling

Sealers

Zinc Oxide-Eugenol

Chloropercha

Calciumhydroxide

Resins

Glasionomer

Silicone

Zinc - Oxid Eugenol

Powder:

Zinc oxide

Liquid:

Eugenol

Acidic resins

Good adhesivity, antimicrobial effect, cytotoxicity?

Resorbable, no compatible with adhesive materials)

Zink Oxid Eugenol sealers

Pulp Canal Sealer (Kerr, USA))

Tubuli- Seal (Kerr, USA)

Caryosan (Spofa Dental, ČR)

Chloropercha

Powder

Canadian balsam

Resins

Guttapercha

Zinc oxide

Liquid:

Chloroform

Resins

Chloropercha

Vlastnosti:

Good adhesivity

Shrinkage

Toxicity

Calciumhydroxide sealers

Base (powder)

Calcium hydroxide

Zinc oxide

Other components and vehicula

Calcium hydroxide sealers

Catalyst (paste)

Zinc stearat

Titanium dioxide

Baryum sulphate

or

Eugenol, Eukalypt

Other components...

Kalciumhydroxide sealers

- Increase of the healing potential of periapical tissues
- Antibacterial effect
- Easy manipulation

But!

Resorbable if not homogeneous

Not suitable for the single cone technique

Resins

- Rezorcin formaldehyd (toxic, obsolete)
- Epoxide
- Polyketone
- Metacrylate

Epoxide resin

➤ Base (powder, paste)

Bismuth oxid

Titanium dioxide

Hexametylentetramine

(Silver)

➤ Catalyst (liquide, paste)

Bisphenoldiglycidylether

Epoxid resin (*advantages*)

- Long working time
- Hydrophilic (good penetration)
- Good adhesion to the root canal walls
- Volume stability
- No dissolution
- Antibacterial

Epoxid resins

(disadvantages)

- Difficult removal
- Staining
- Initiatory toxicity

AH 26, AH Plus, 2 Seal



Polyketone

- Base

Zinc oxide

Bismuth phosphate

Hexametylentetramine

- Liquid

Bisphenolglycidylether and other components

Polyketon resins

Advantages

Good adhesion

No contraction

No dissolution

Disadvantages

High stickness

Not removable

Products: Diaket, Diaket A (3M ESPE)

Methacrylate resins

Endo ReZ (Ultradent) – UDMA

For injection – single cone technique

Epiphany (Pentron)

Bis- GMA, etoxy bif- GMA, hydrophilic bifunctional methacrylates

Calcium hydroxide, baryum sulphate, baryum glass silica.

Sealer in combination with Resilon



Glasionomer sealers

➤ Base (powder)

Aluminium silicate glass

➤ Liquid

Polyacrylic acid, polymaleic acid, tartaric acid

Glasionomer sealers

(Advantages and disadvantages)

Advantages:

Curing under wet conditions, chemical bonding to hard dental tissues, no staining

Disadvantages

Short working time, difficult removal,
porous

Products

Ketac Endo (3M ESPE), Endion (VOCO)

Silicon based sealers

Polyvinylsiloxane (ev. in mixture with powdered guttapercha)

Biocompatibility

Hydrophilic

Calcium hydroxide

- Alkaline
- Antibacterial
- Stimulation of hard tissue formation
- Haemostatic and antiphlogistic

Calcium hydroxide

- Alkaline
- Antibacterial
- Stimulation of hard tissue formation
- Haemostatic and antiphlogistic

Calcium hydroxide

Temporary root canal filling

Subbase

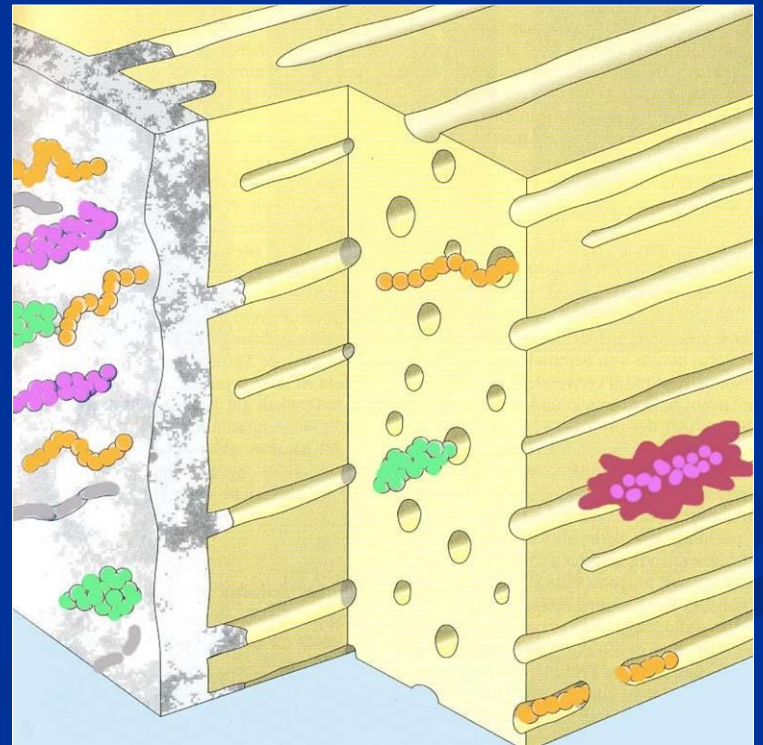
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Dressing



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- Short term action

1 – 2 weeks

Desinfection, haemostasis

Calcium hydroxide

- Middle term action

2 – 3 months

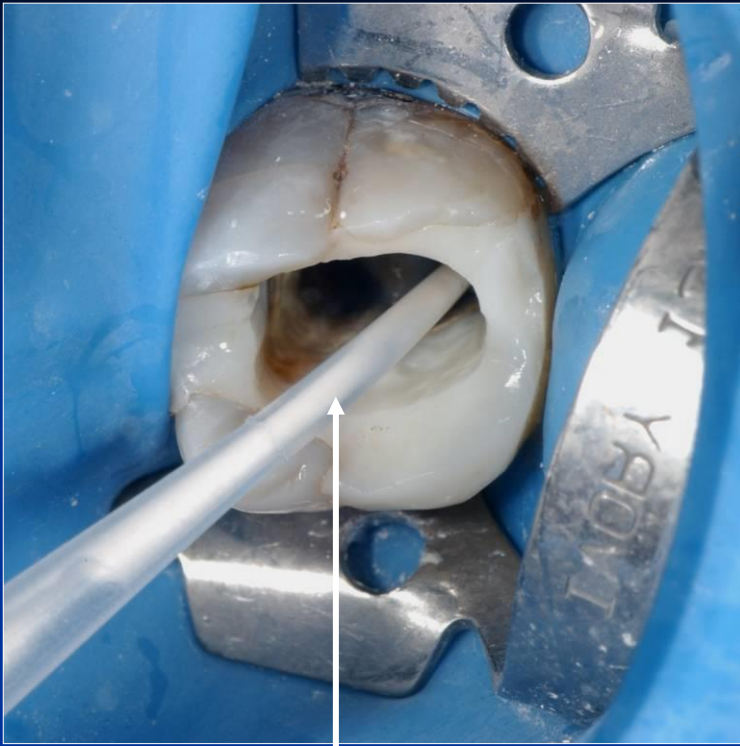
Apexification

Chronic form of apical periodontitis

Calcium hydroxide

- Long term action
3 months and more

Prevention of resorption



Magistraliter

The powder is mixed with distilled water

Lentule 2 mm less than WL !!!!!



Apexit® Plus

ApexCal®

Calcium hydroxide

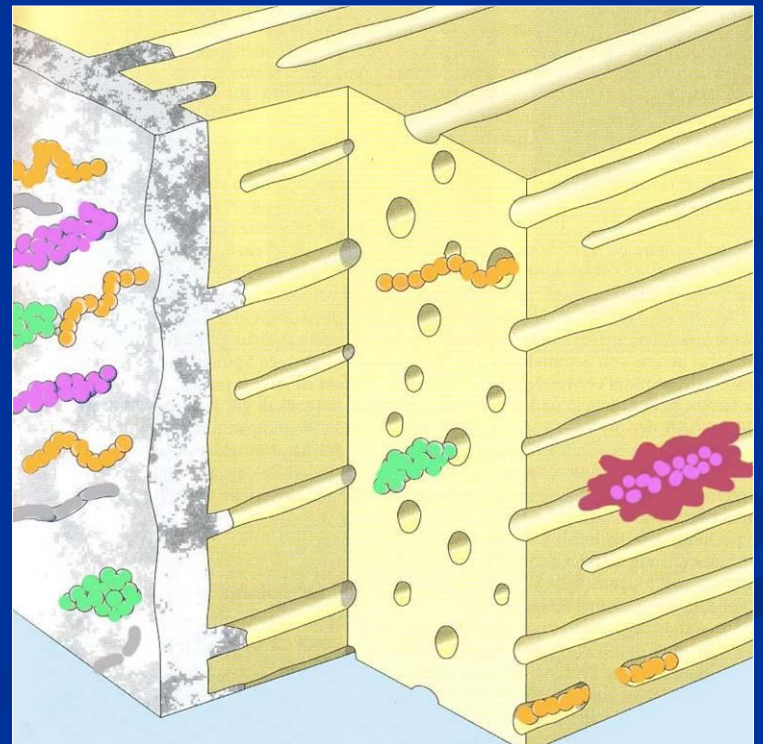
Temporary root canal filling

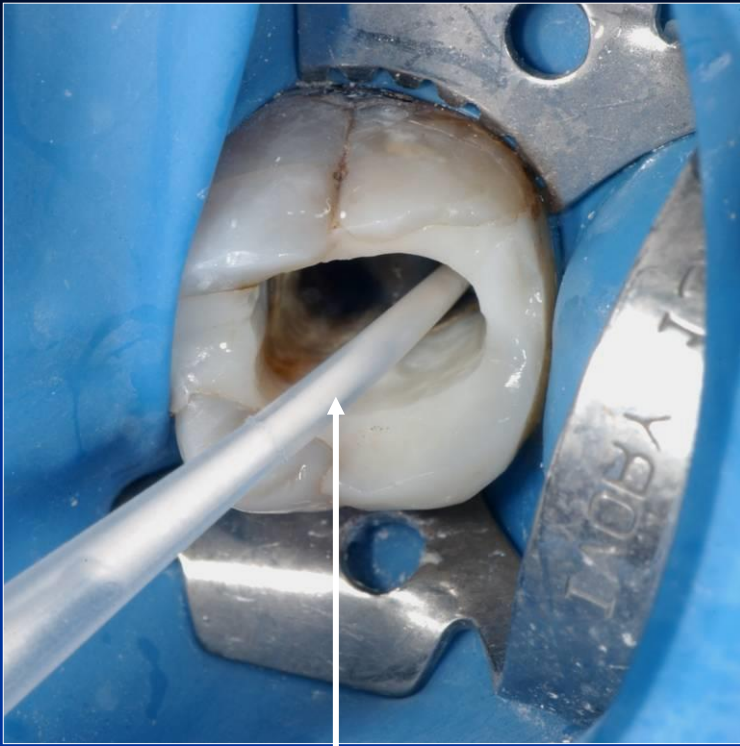
Subbase

Component of sealers



Dressing





Magistraliter

The powder is mixed with distilled water

Lentule 2 mm less than WL !!!!!

Calcium hydroxide

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Desinfection, haemostasis

Calcium hydroxide

- Middle term action

2 – 3 months

Apexification

Chronic form of apical periodontitis

Calcium hydroxide

- Long term action
3 months and more

Prevention of resorption



Apexit® Plus

ApexCal®

Instruments

- Paste carries - lentulo
- Compactors
- Compactors - carriers
- Others

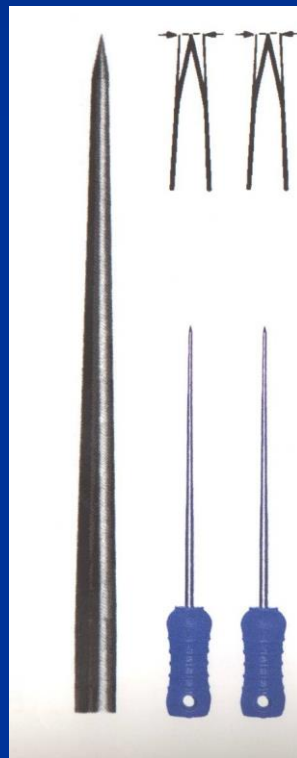
Lentulo



- delivers pastes
- 1,5 – 2 mm ahead
- for sealers

Compactors

Spreader



Pointed

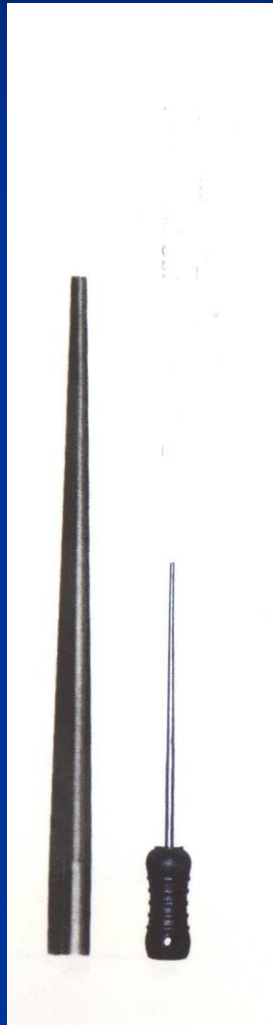
Vertical introduction

*Lateral compaction
technique*

(cold, warm)

Compactors

Plugger



Not pointed

Vertical introduction

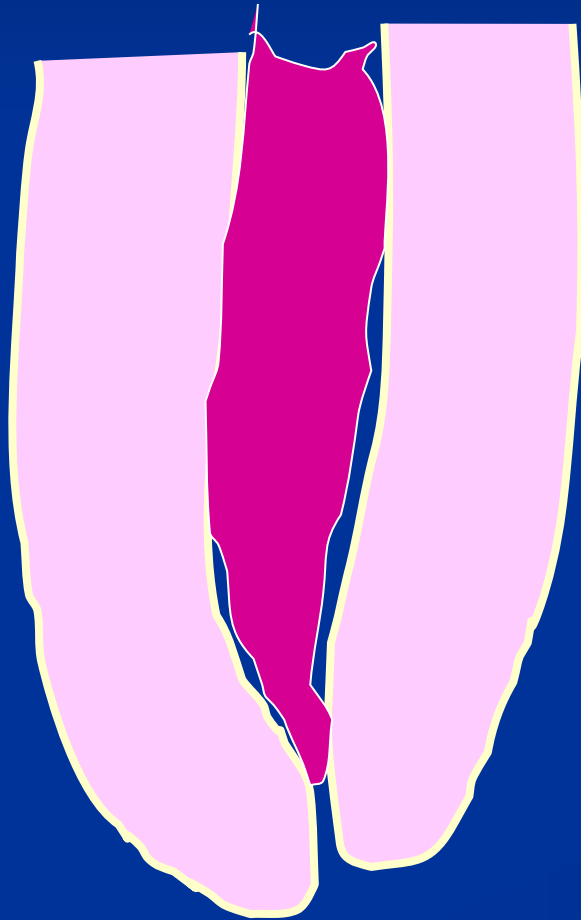
Vertical - compaction

Filling techniques

Cold

Warm

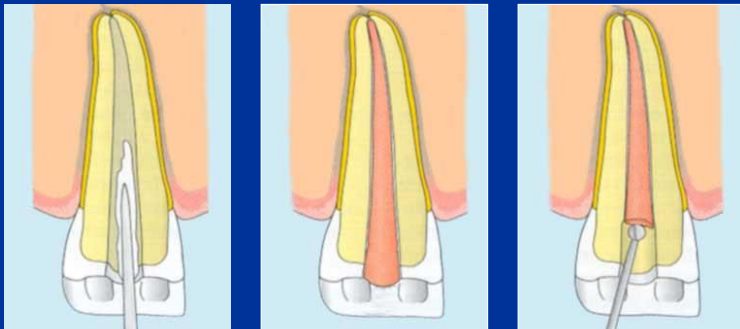
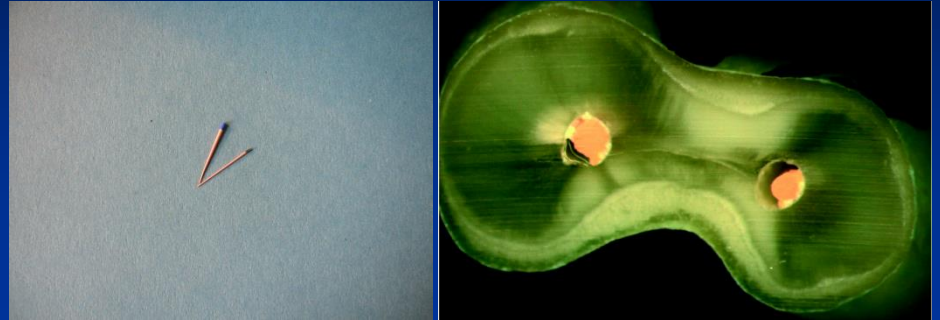
Paste only



**Shrinkage, difficult
removal**

Single cone technique

- Easy
- Fast
- Good control of WL
- Standard round preparation – risk of leakage

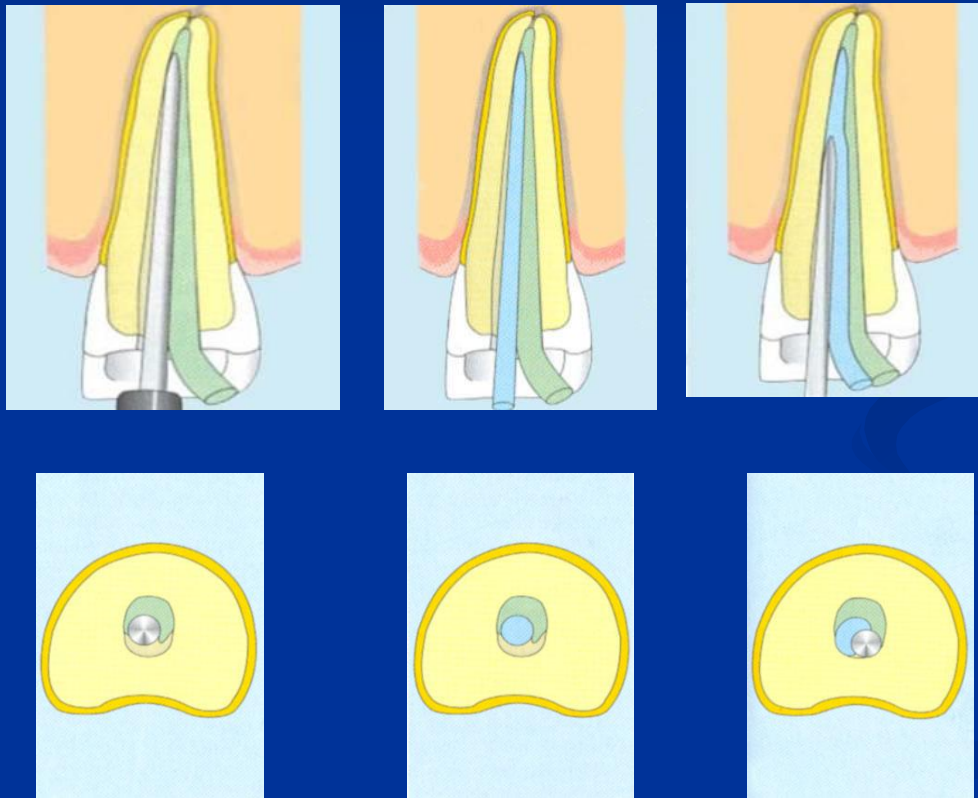


Wesselink, P.: Root filling techniques, Textbook of Endodontology; p. 286-299, Blackwell Munksgaard 2003, Oxford

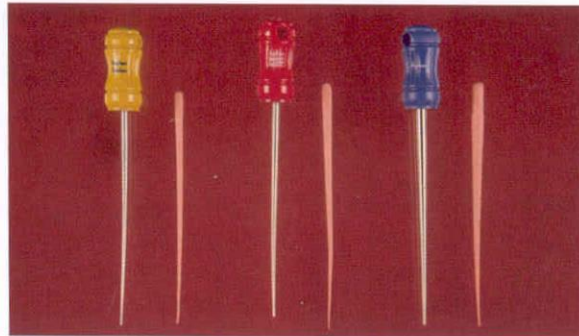


Lateral compaction

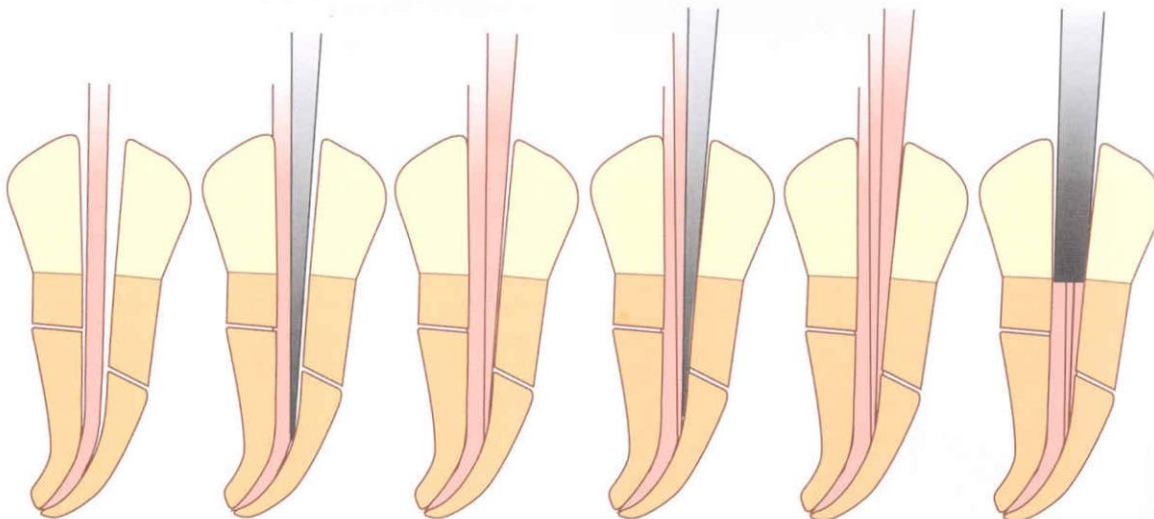
- Standard cold technique



Good control of WL
Risk of the root fracture



A

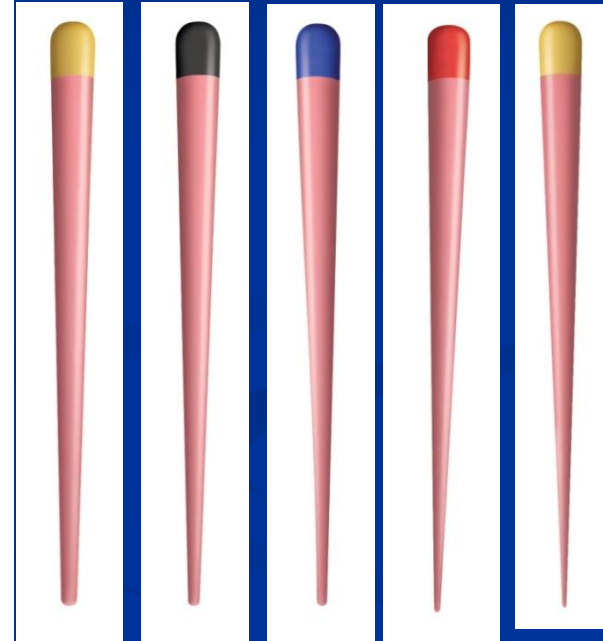


**LATERAL
CONDENSATION
(compaction)**

Standardized and non-standardized Paper Points and Gutta Percha Points



F1 F2 F3 F4 F5

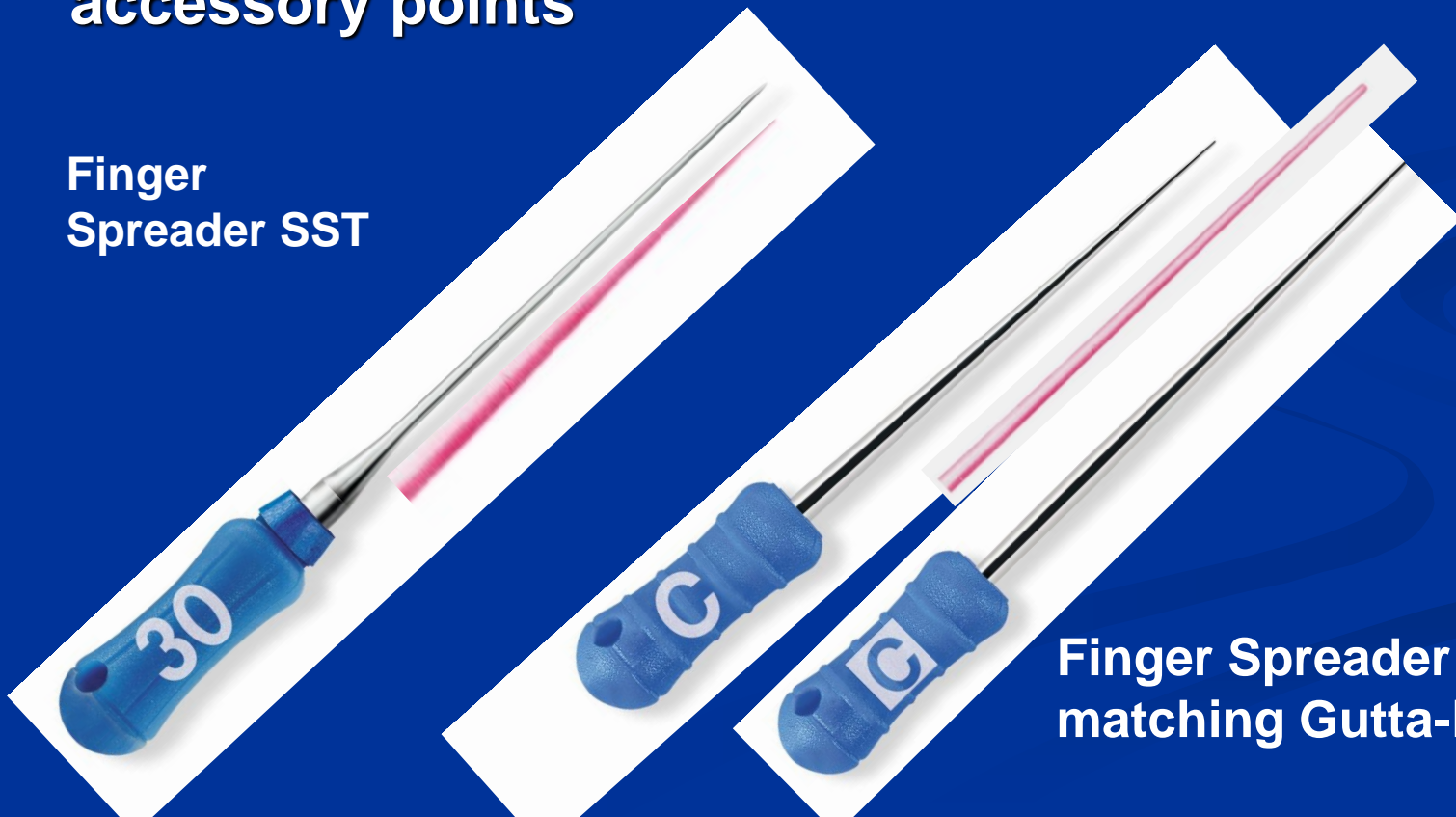


F1 F2 F3 F4 F5

Lateral Condensation

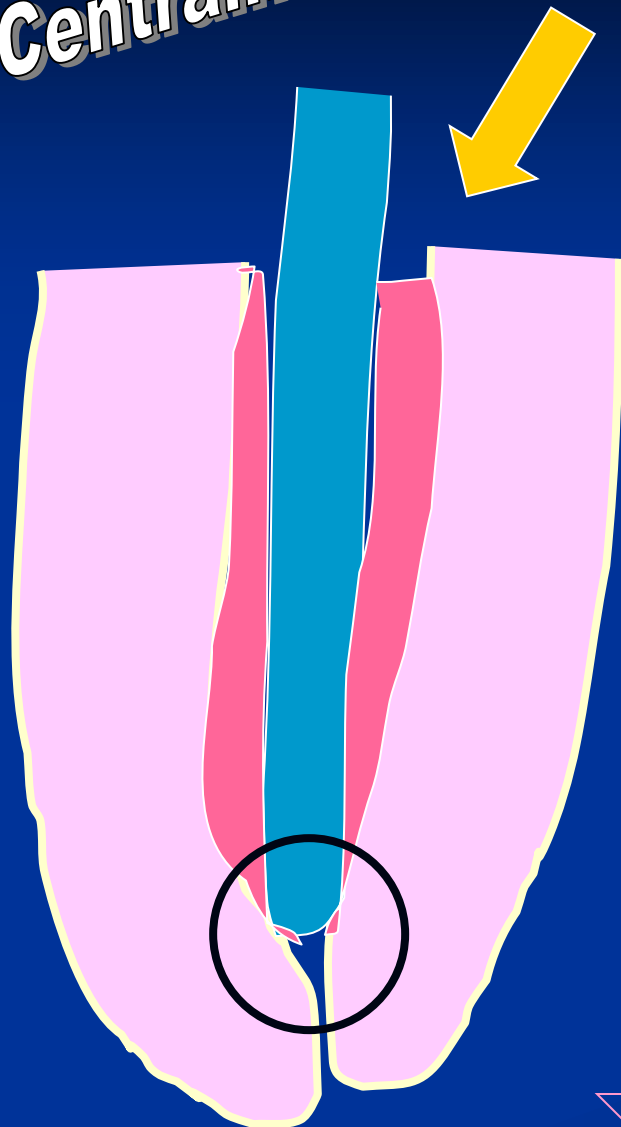
A sealer is placed in the canal followed by a fitted gutta percha Master Point compacted laterally by a tapering Spreader to make room for additional accessory points

Finger
Spreader SST

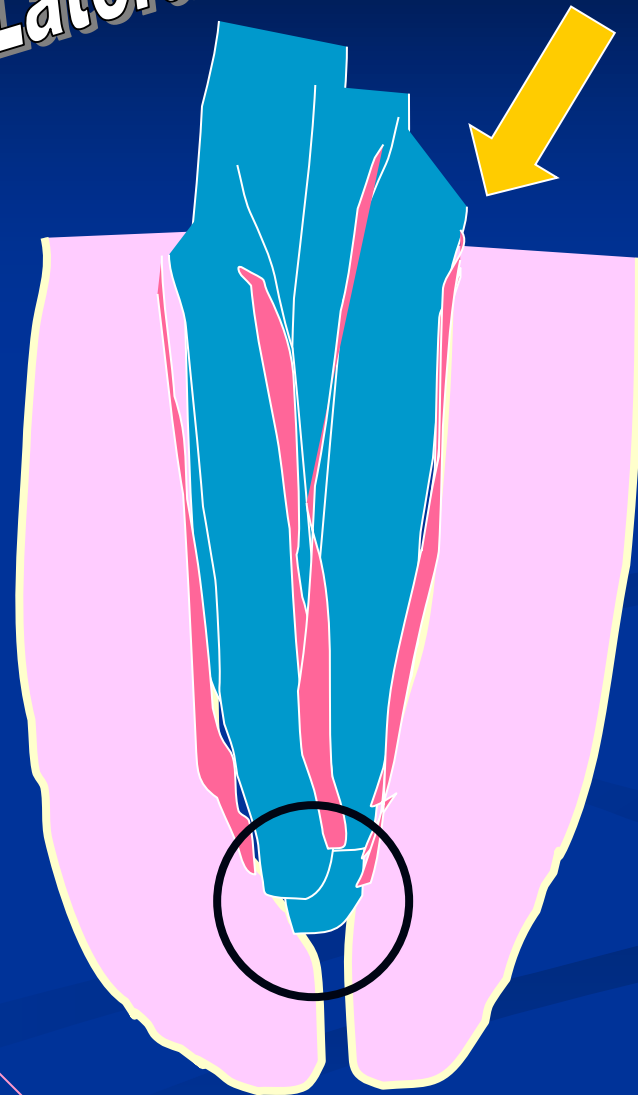


Finger Spreader SST and NiTi
matching Gutta-Percha A-D

Centrální čep



Laterální kondenzace



Warm lateral compaction

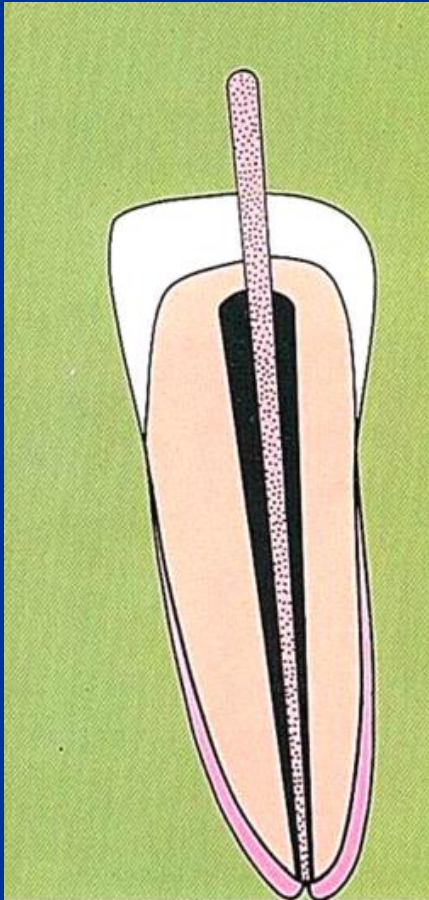


Heated spreader
Better 3D filling

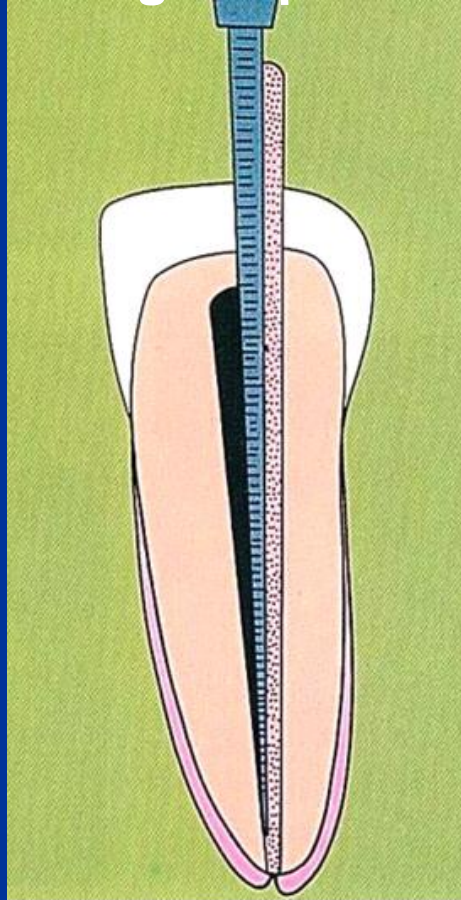


Modification – instead of spreader special instrument - rotary

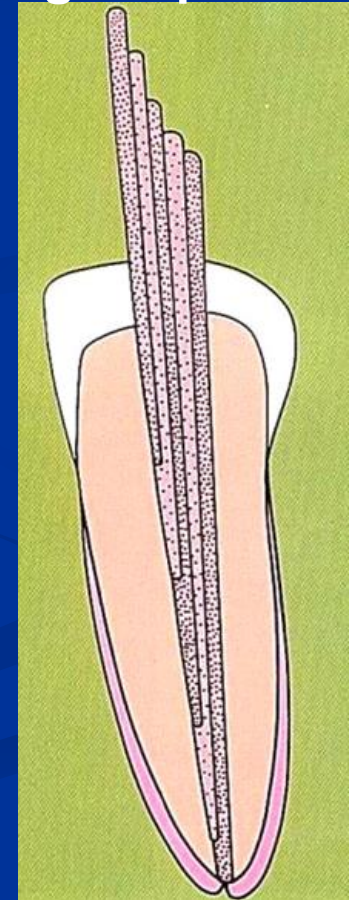
Insert a cone with sealer



Apply a Finger Spreader along the points



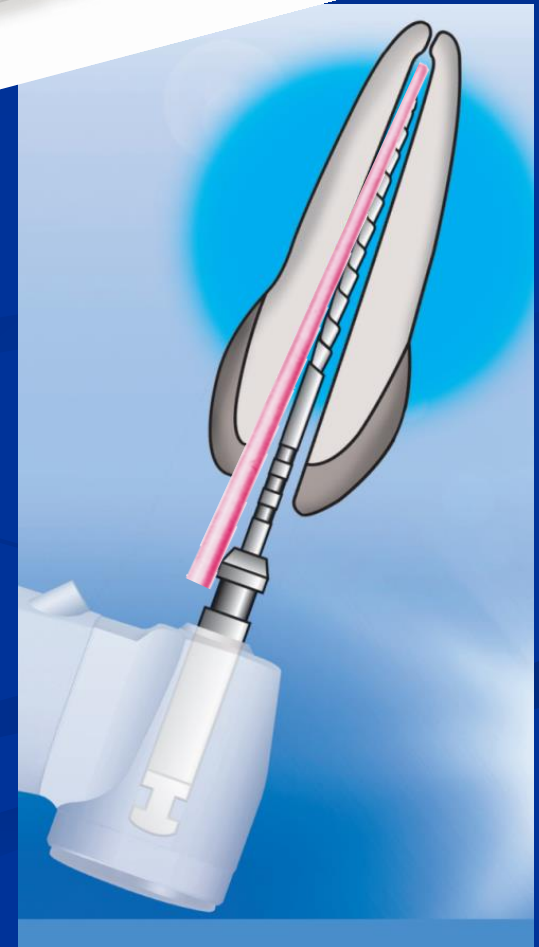
Then a new cone and again a Finger Spreader



Hybrid Technique with Gutta-Condenser (Compaction acc to Mc Spadden)

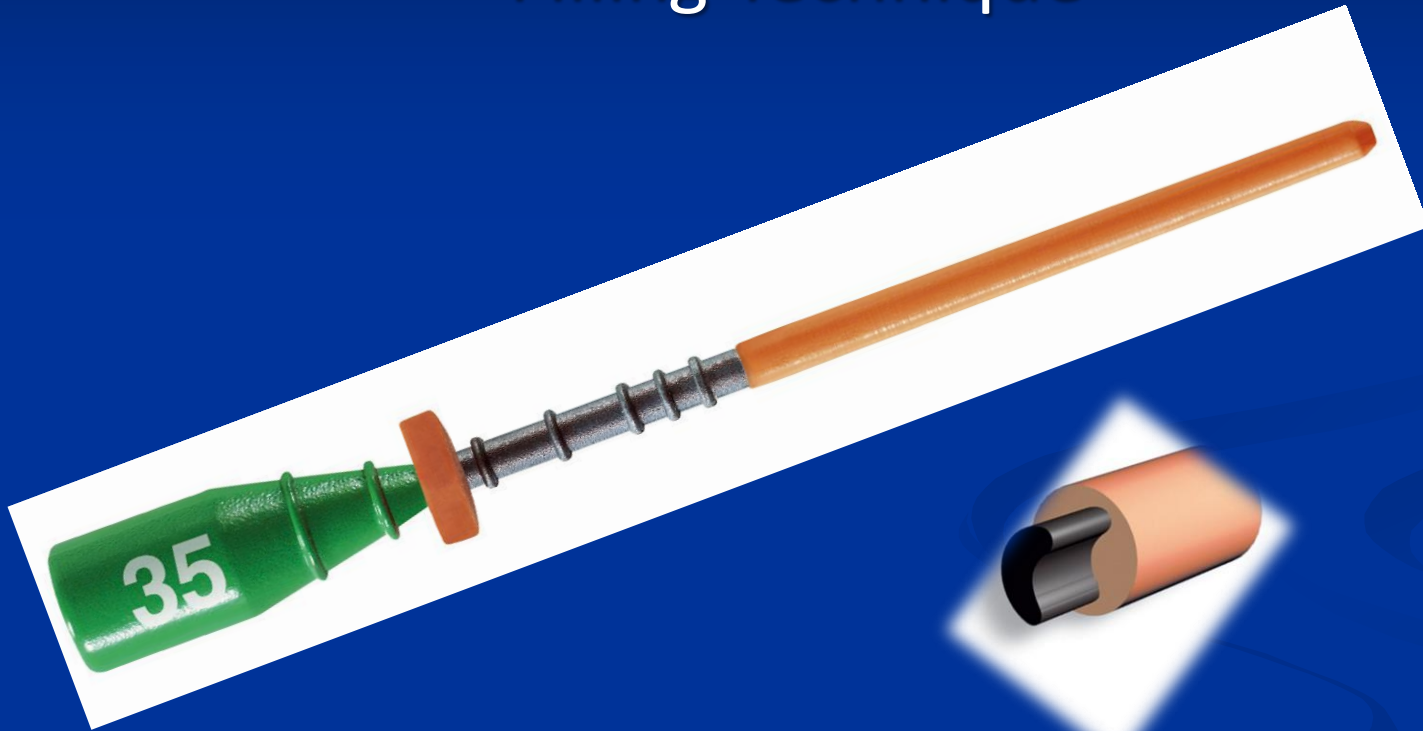


After each point of Gutta-Percha with sealer, use the Gutta-Condensor to melt and fill the canal.

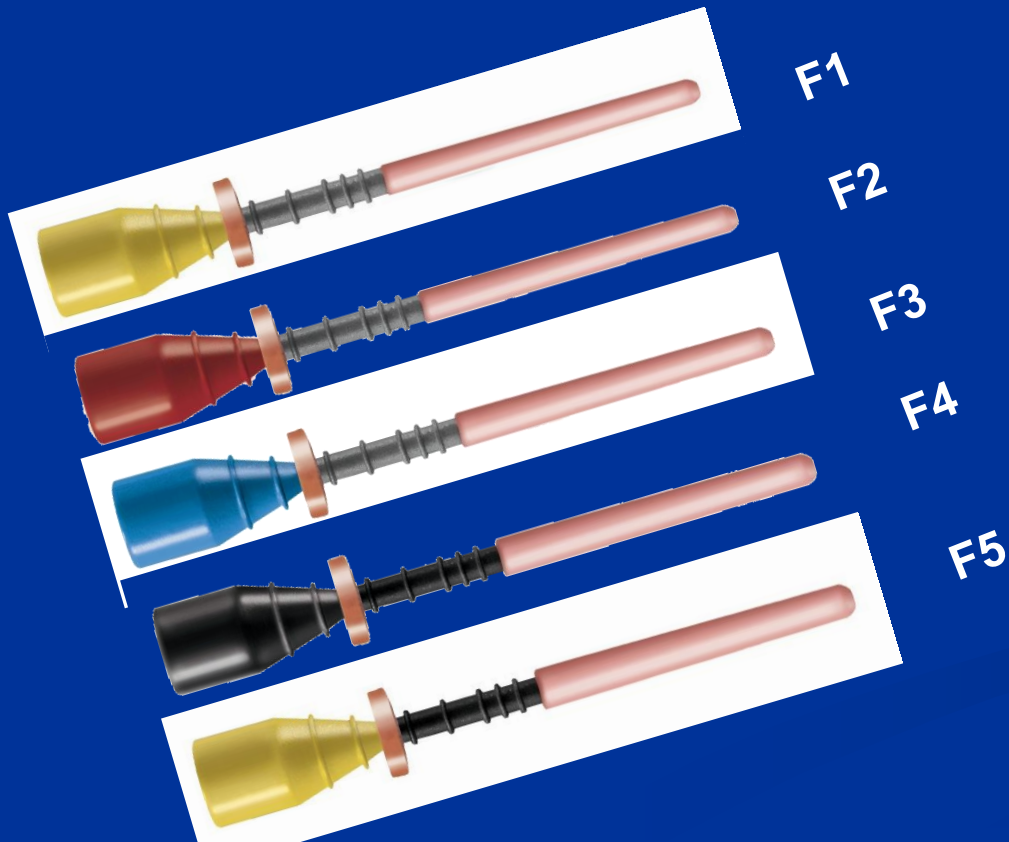




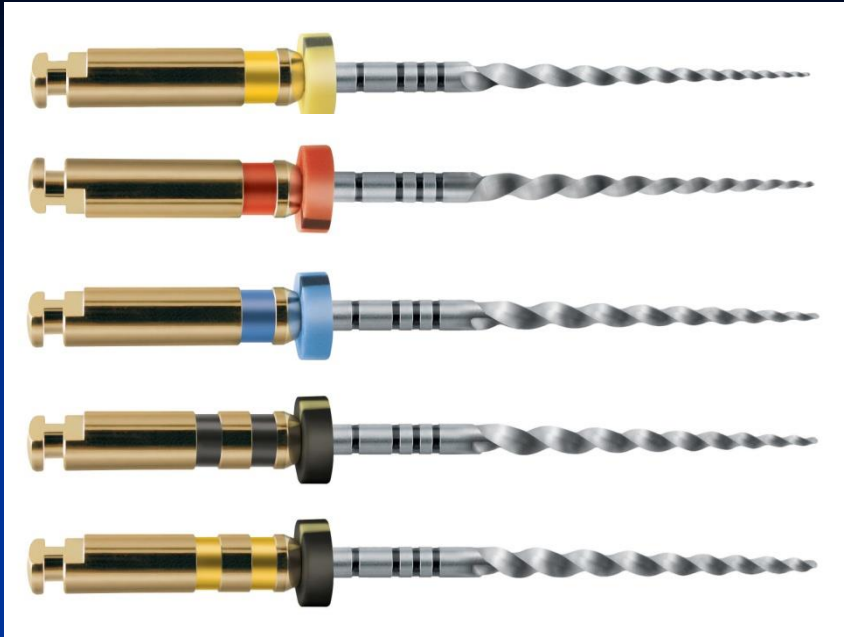
Core-Carrier (PP) - Gutta-Percha Filling Technique



Obturator compatible with instruments



Finishing Files (Apical shape)



F1

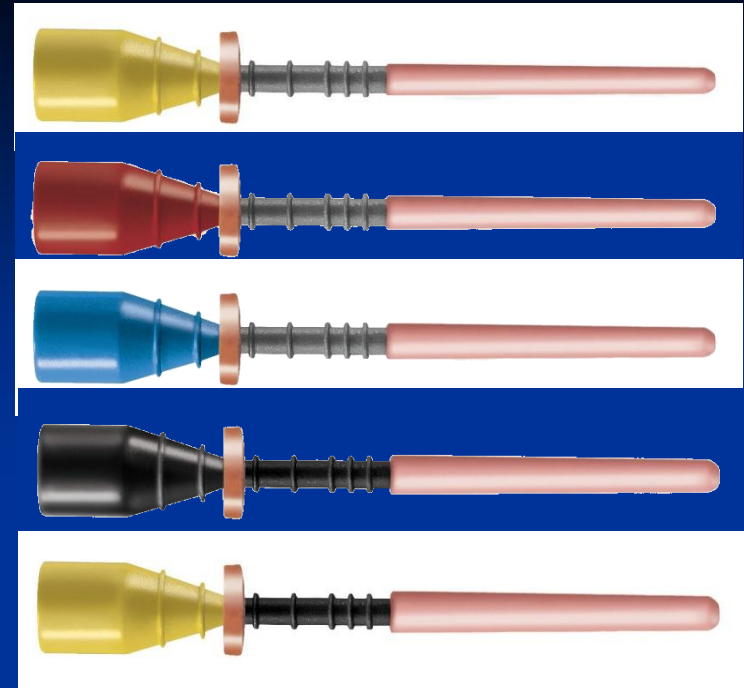
F2

F3

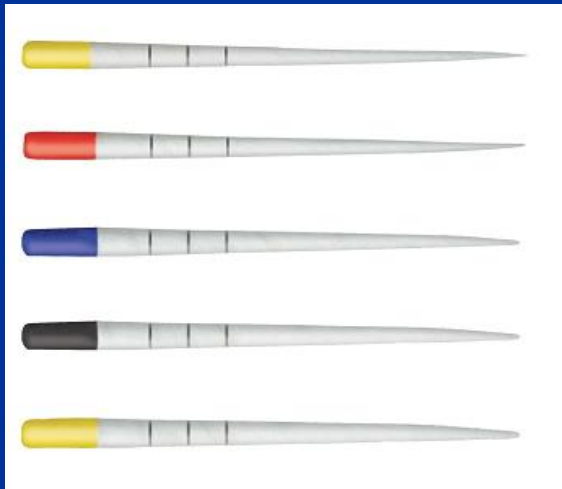
F4

F5

Calibrated Gutta-Percha Cones



Obturators - Protaper sizes



F1

F2

F3

F4

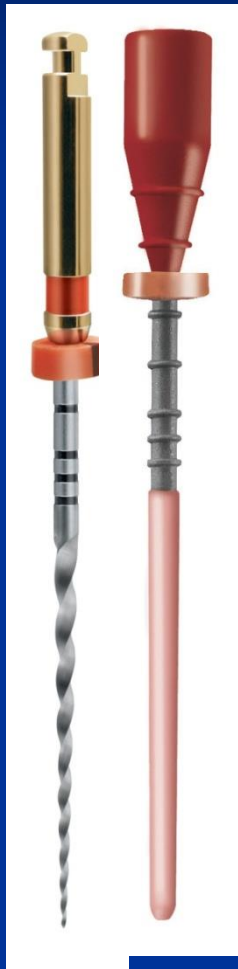
F5

Paper points - Protaper sizes

ProTaper Obturator calibrated to each Finishing File



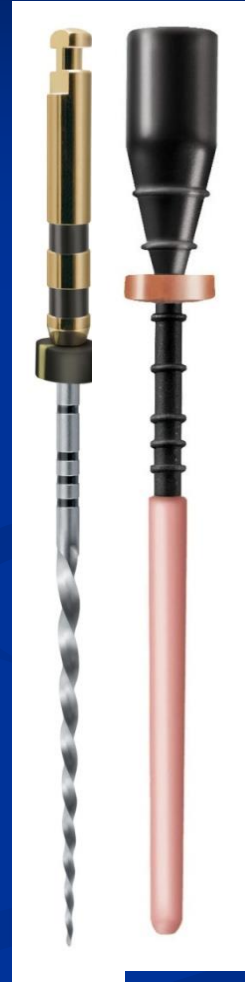
F1



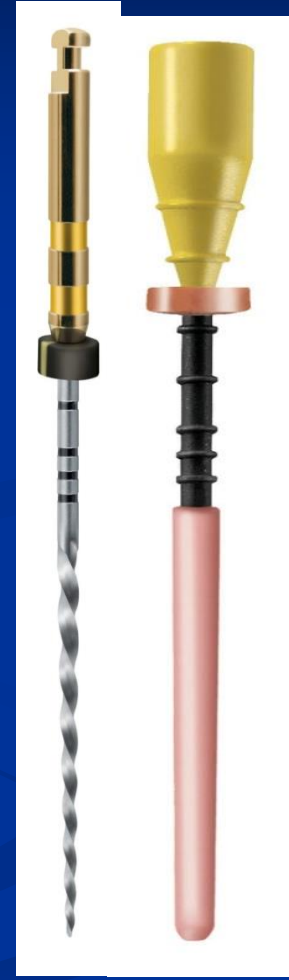
F2



F3



F4



F5



3D Filling of the Root-Canal System with THERMAFIL Or PROTAPER OBTURATOR



Thermaprep Oven



Size verifier to measure the apical size



Thermacut bur



Post space bur

Core-Carrier Obturator Technique



1st step :

Opening

cleaning

Shaping ...

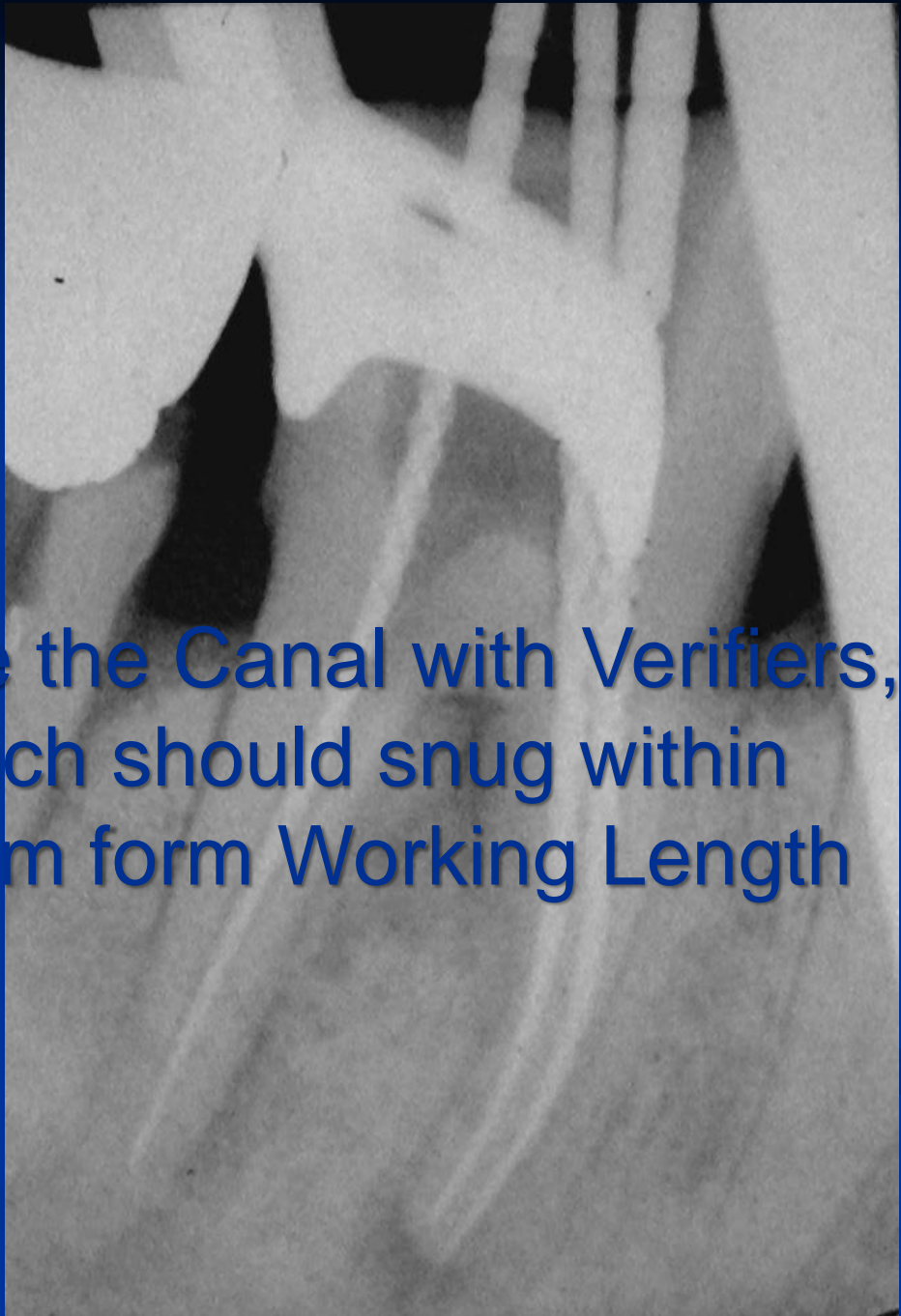
V35

V25

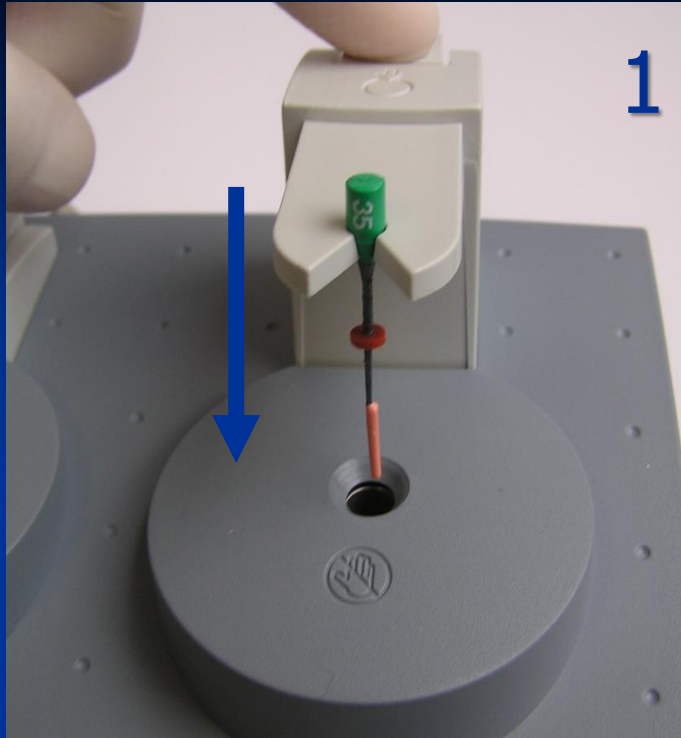
Gauge the Canal with Verifiers, which should snug within 0,5mm from Working Length

Verifier 35

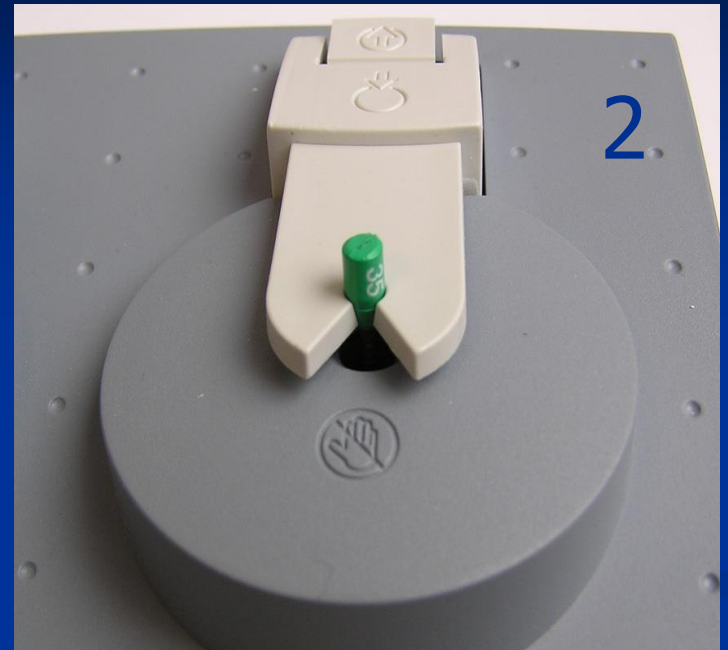
Verifier 25



Place the Obturators

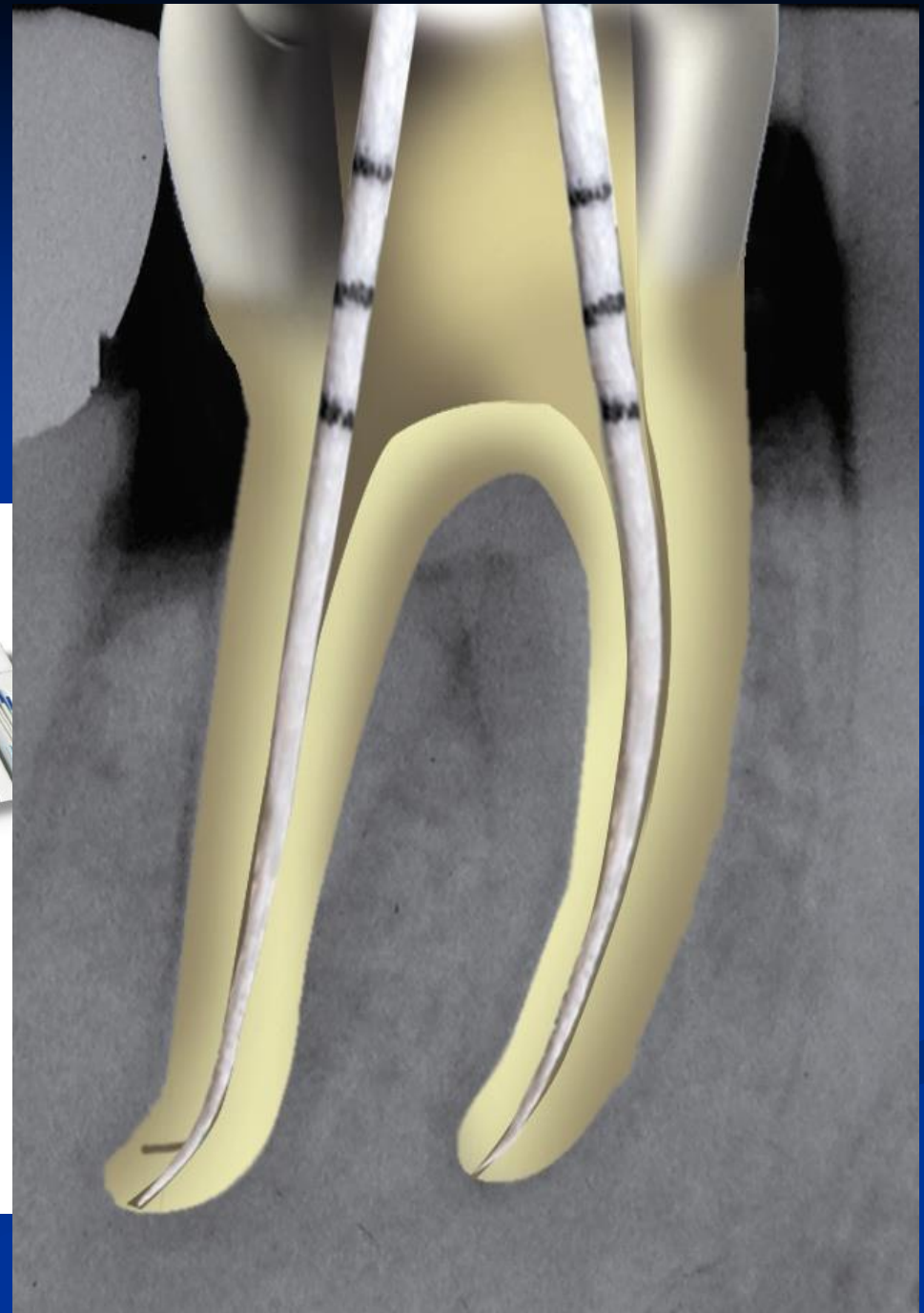


Heat The
Obturator



Select the right
size and start

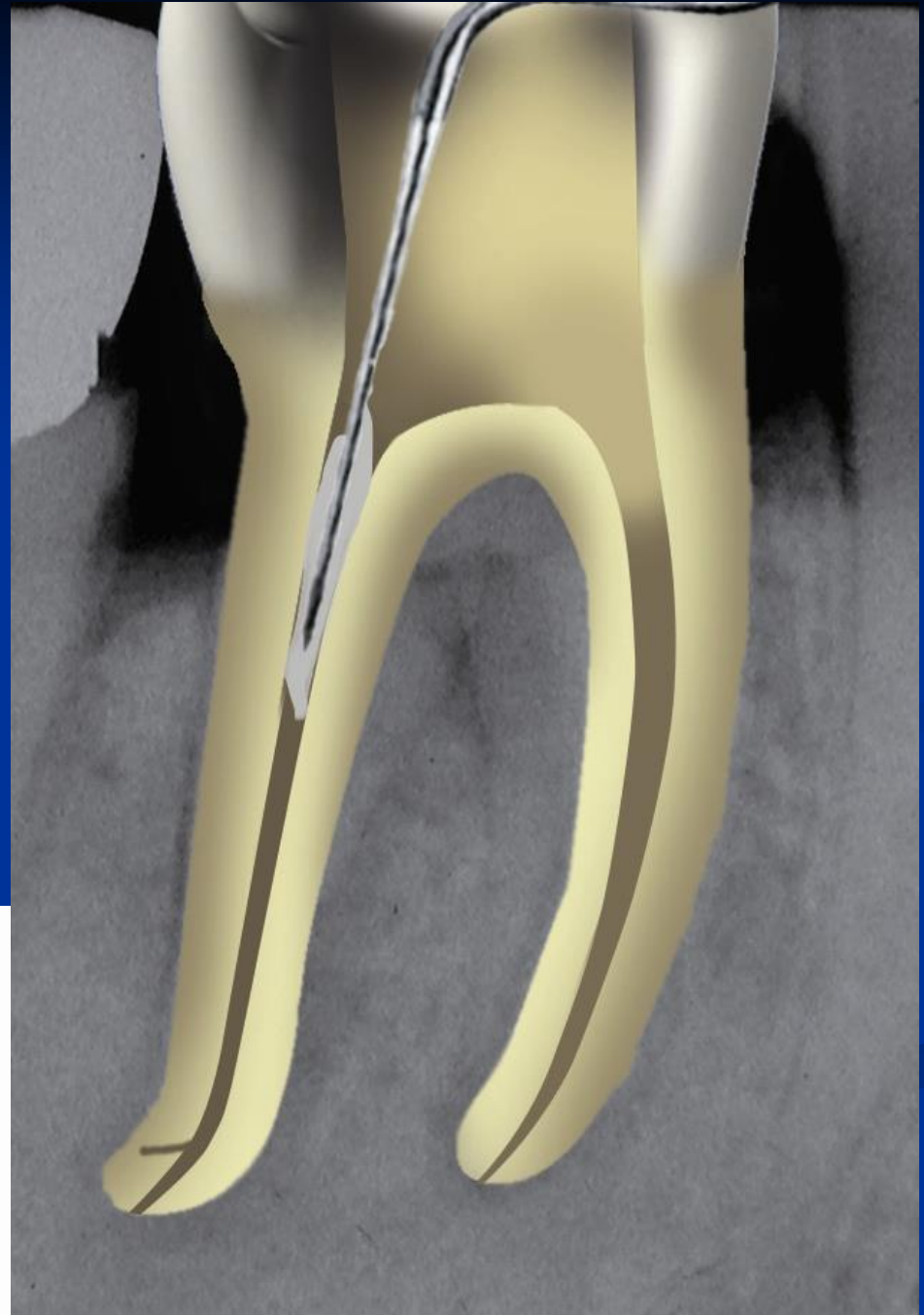
Dry the Canals with Sterile Paper Points

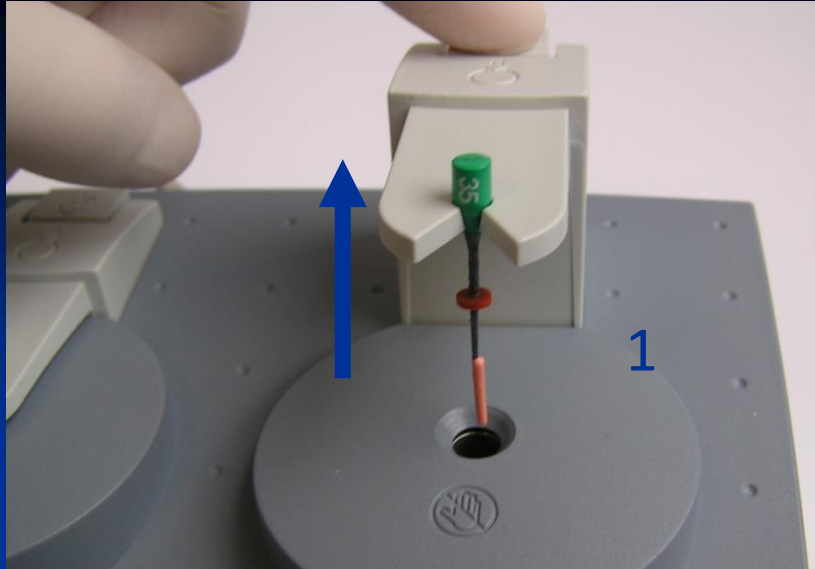


**Mix the Sealer and coat
thewalls of the canal with a
thin layer using a Probe or a
paper point**

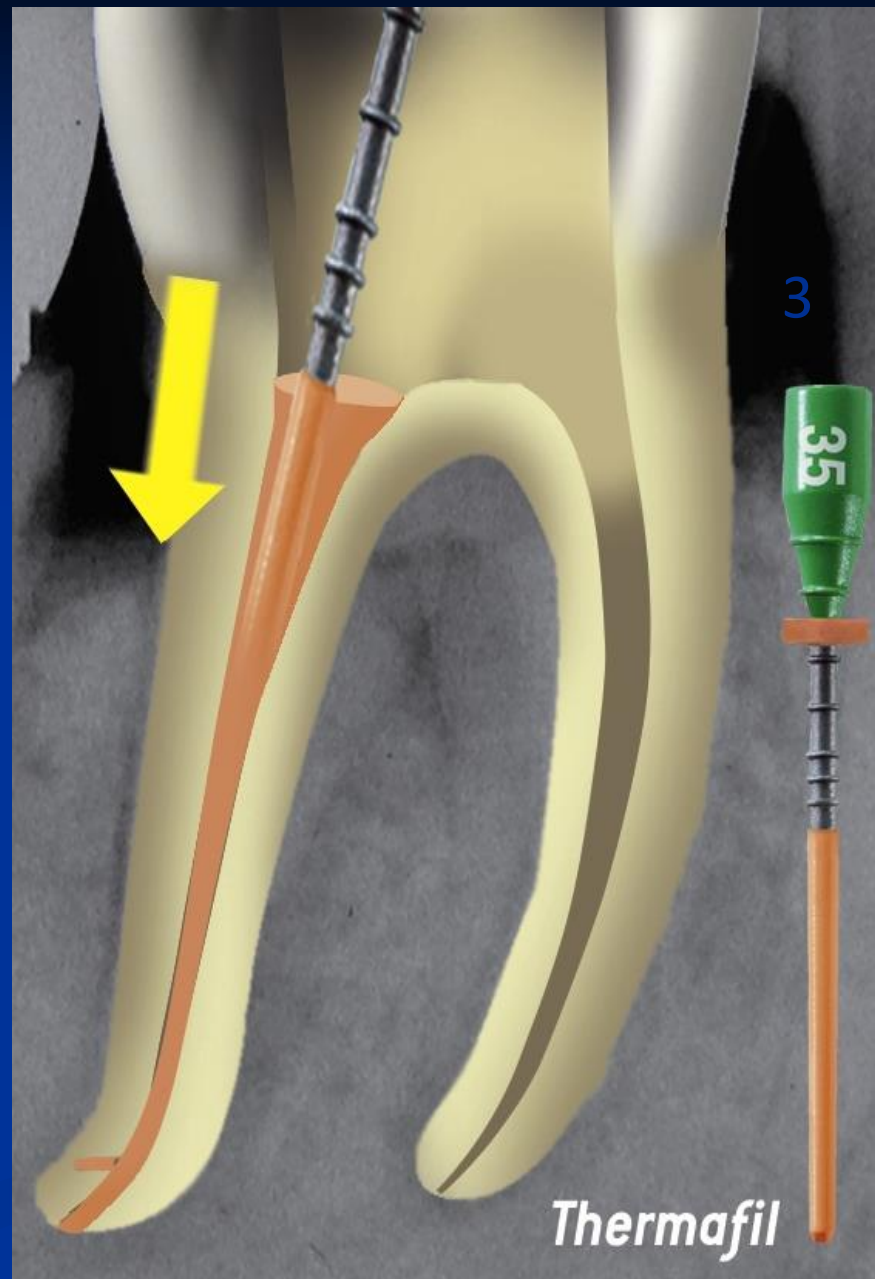
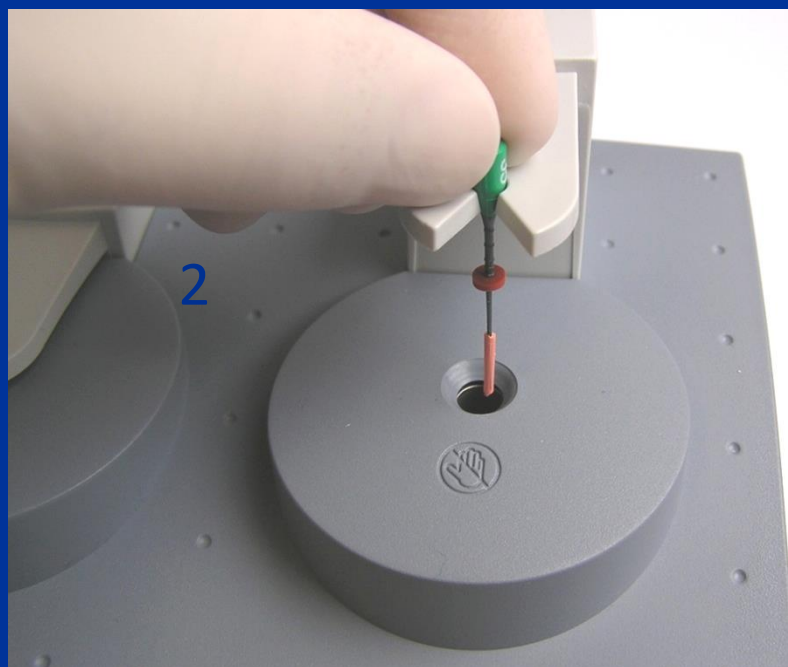


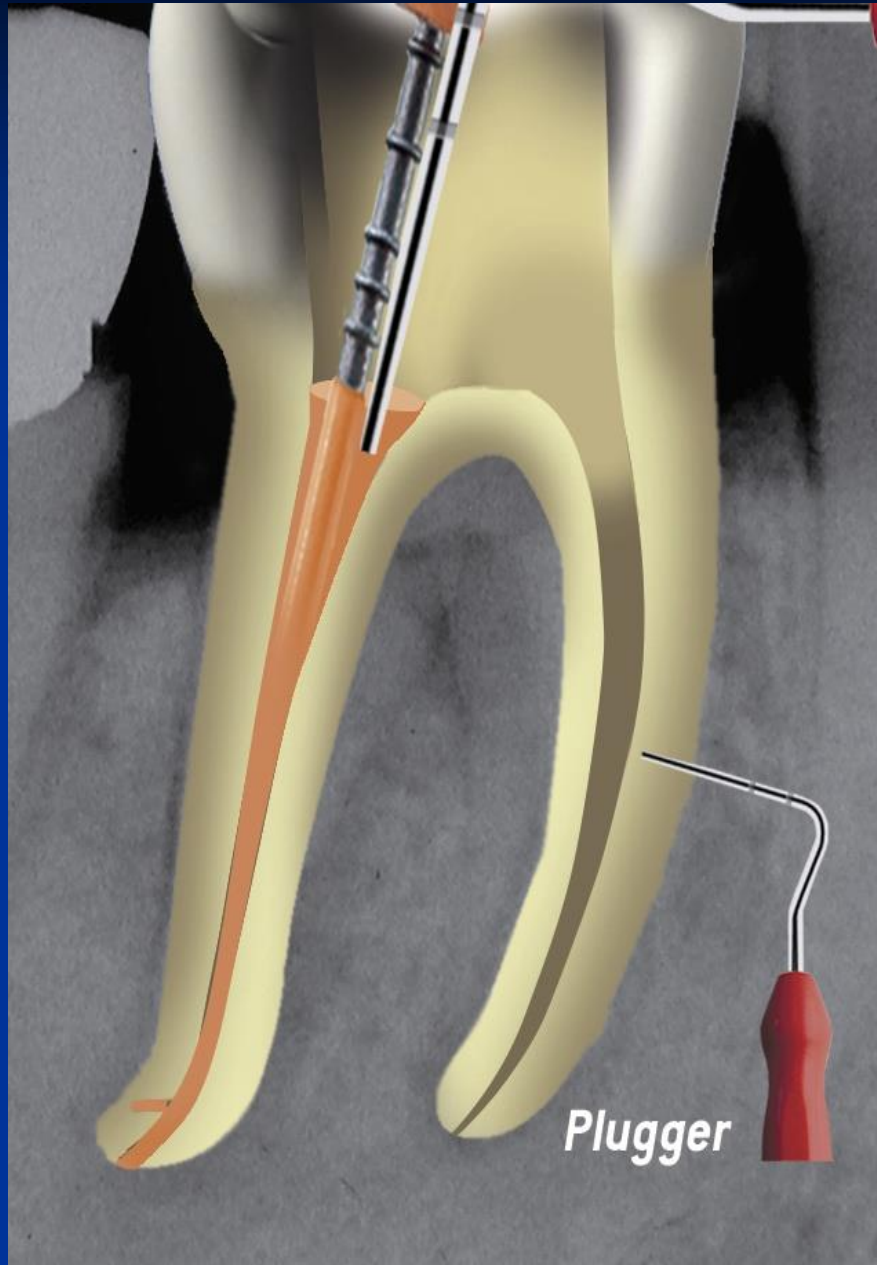
Topseal MIX



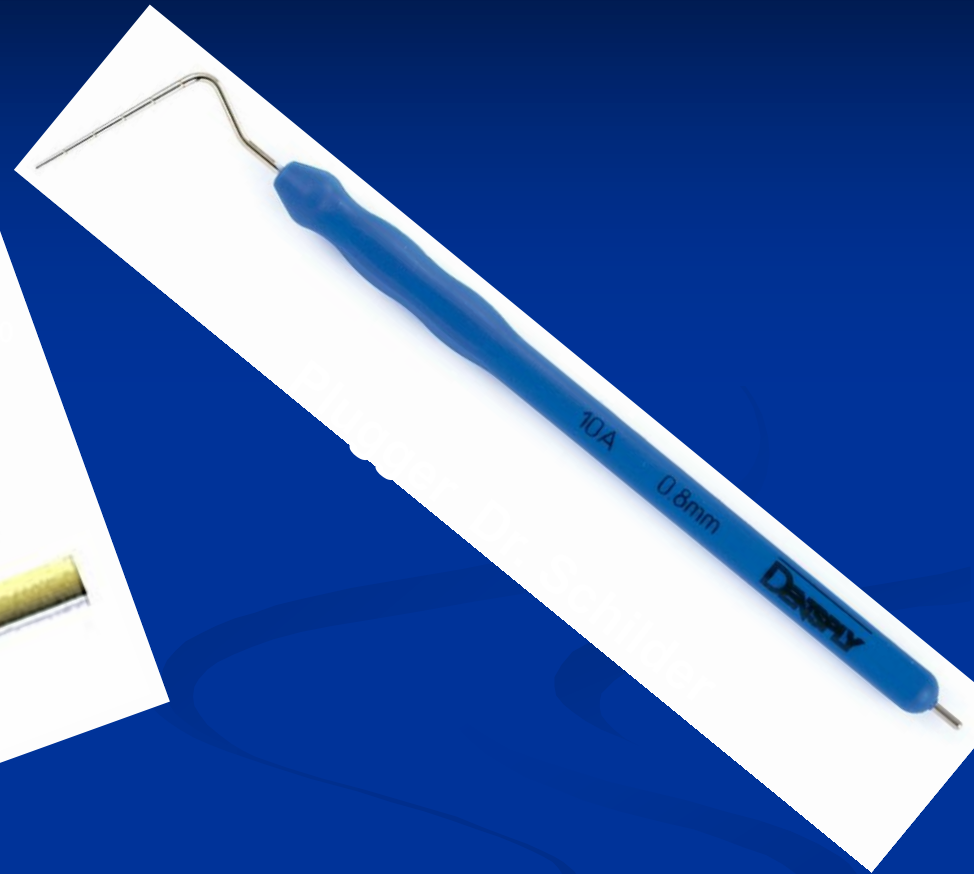
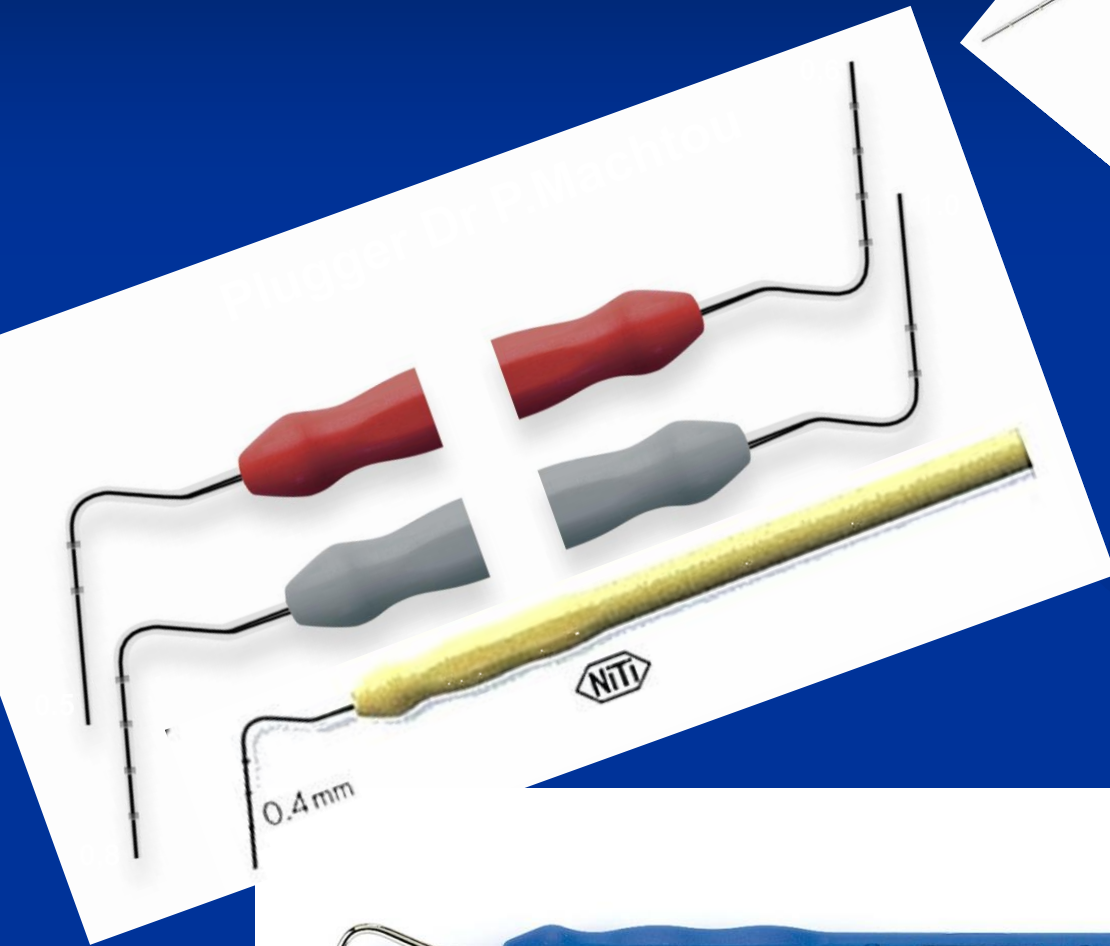


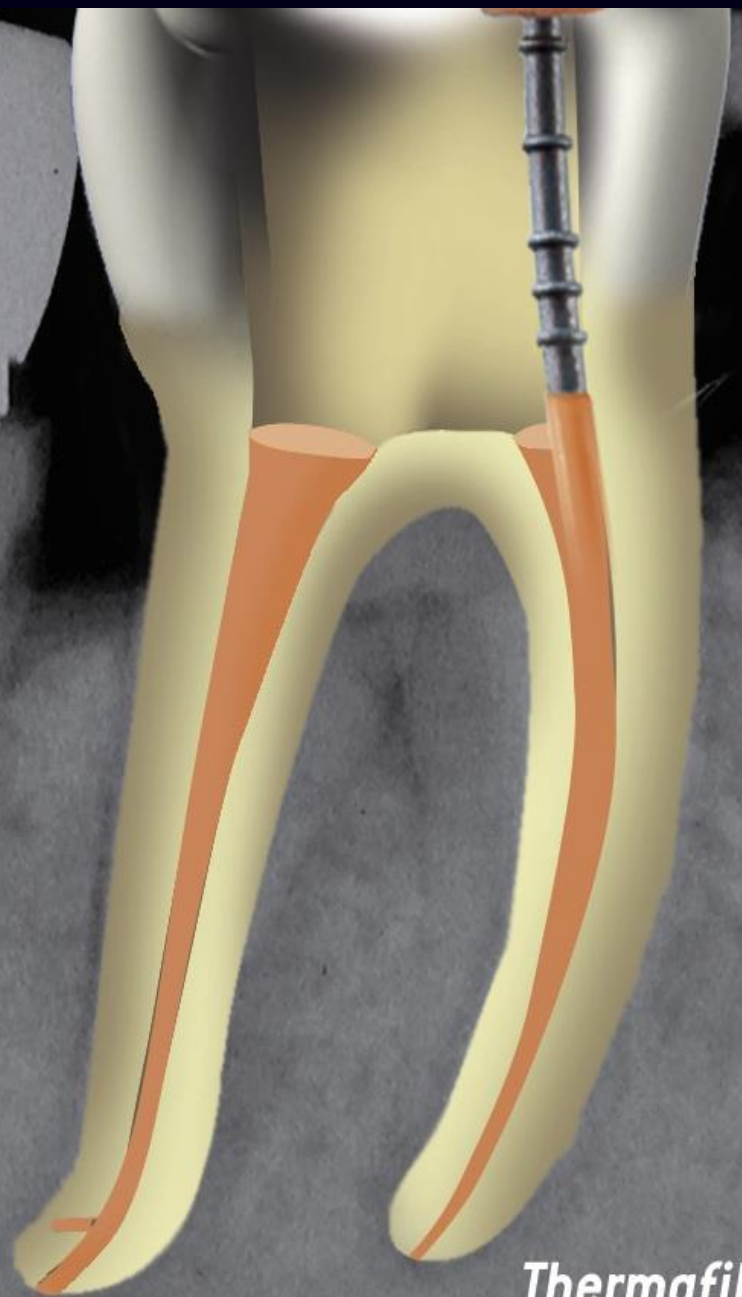
**Take it out
and insert it in the canal**





Use of a selected Plugger to ensure homogeneity of the filling.





Thermafил



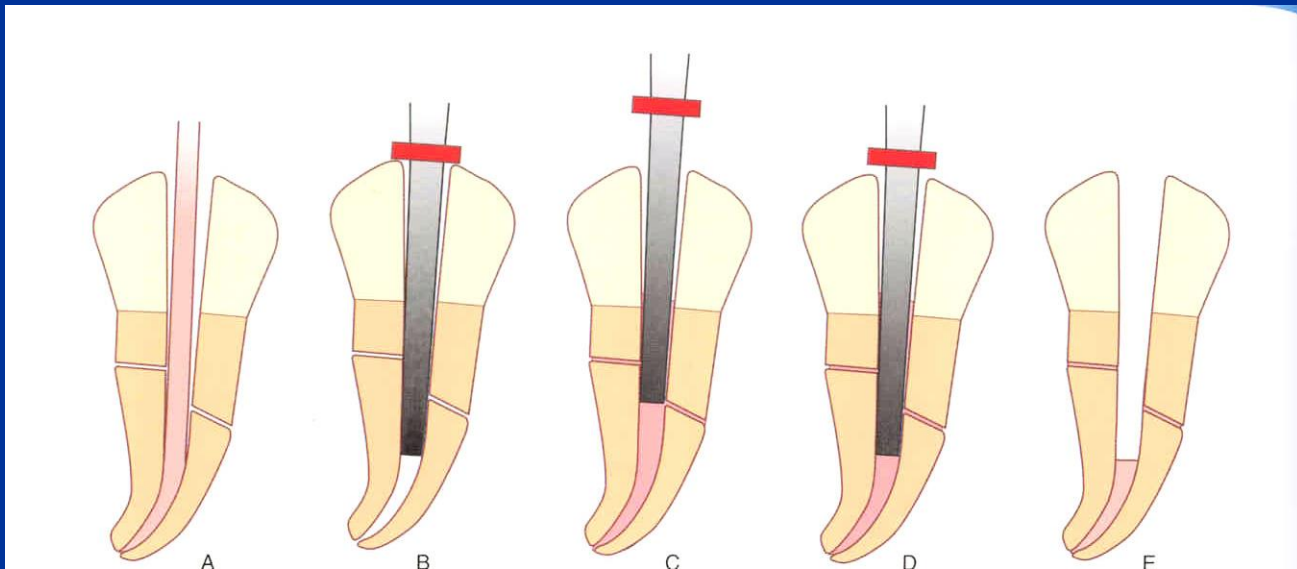


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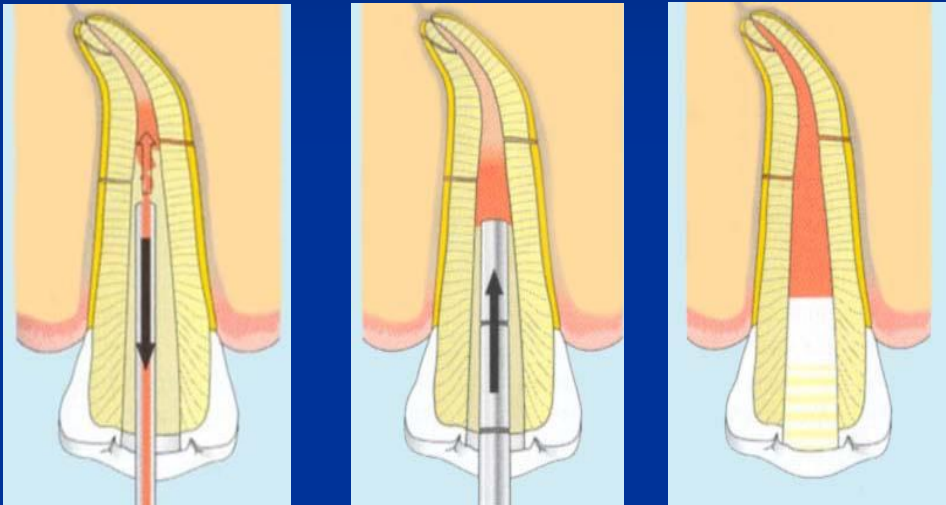


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WARM VERTICAL COMPACTION



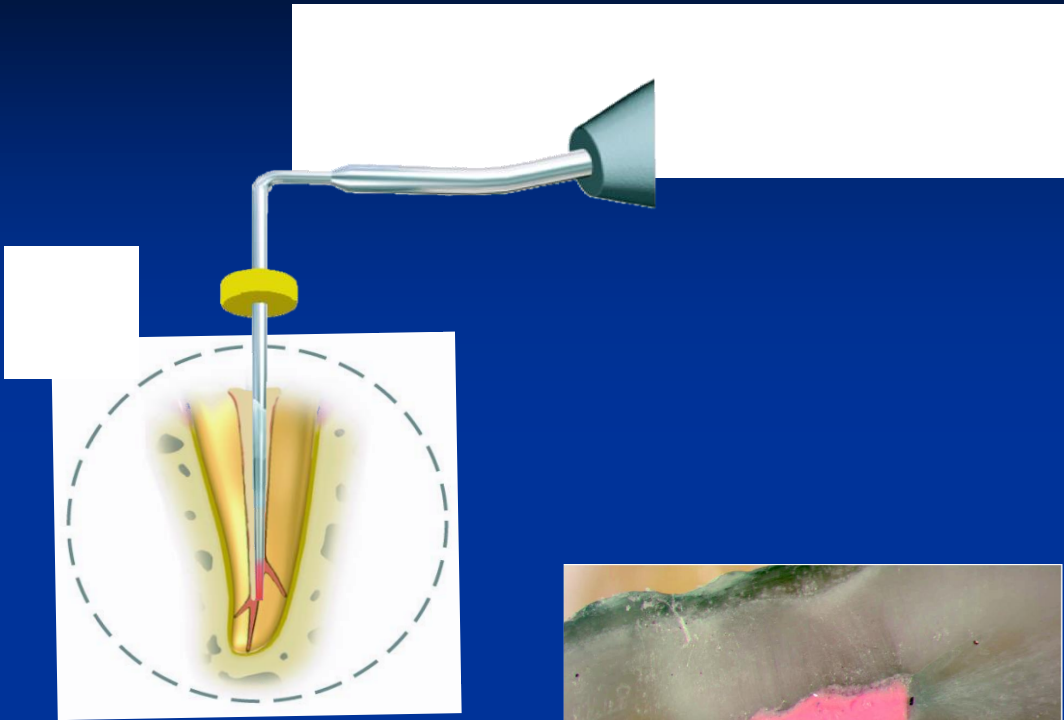
Injection



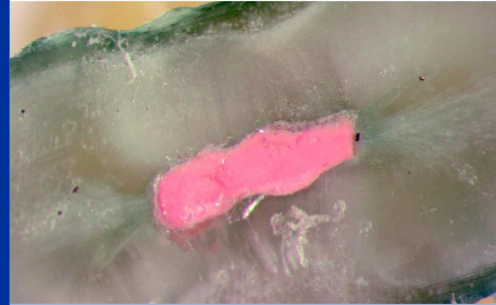
Fast technique
Possible extrusion of sealer
Risk of thermal damage of PL



HERMETICKY!, RYCHLE, A LEVNĚ zaplním



Downpack



Backfill

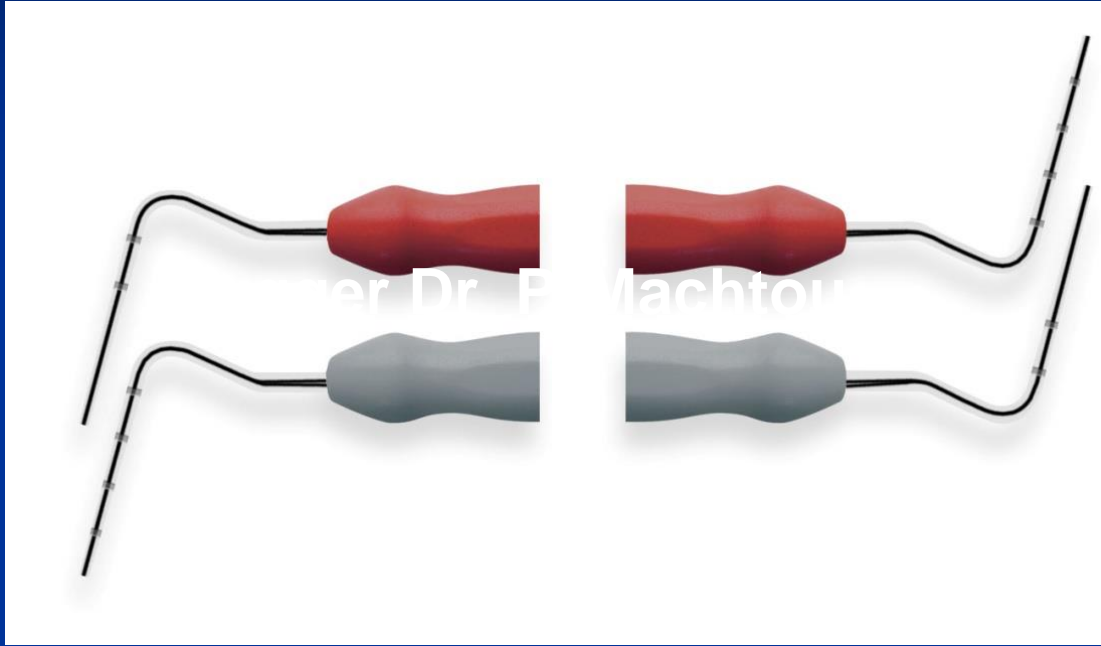


Warm Vertical Compaction Continuous Wave Technique

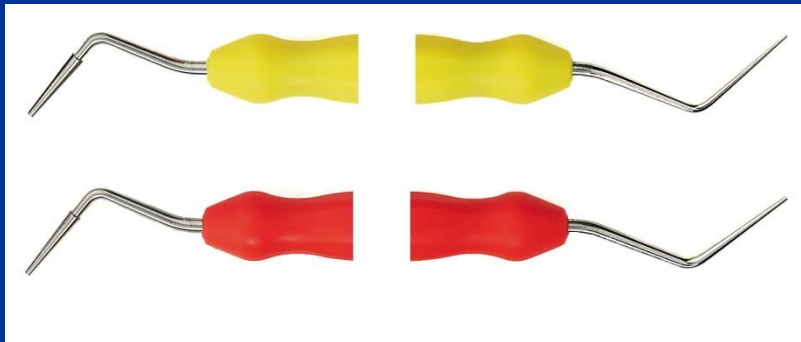


SCHILDER Technique

Similar technique to the Warm Gutta-Percha vertical condensation with Calamus device described later in this module

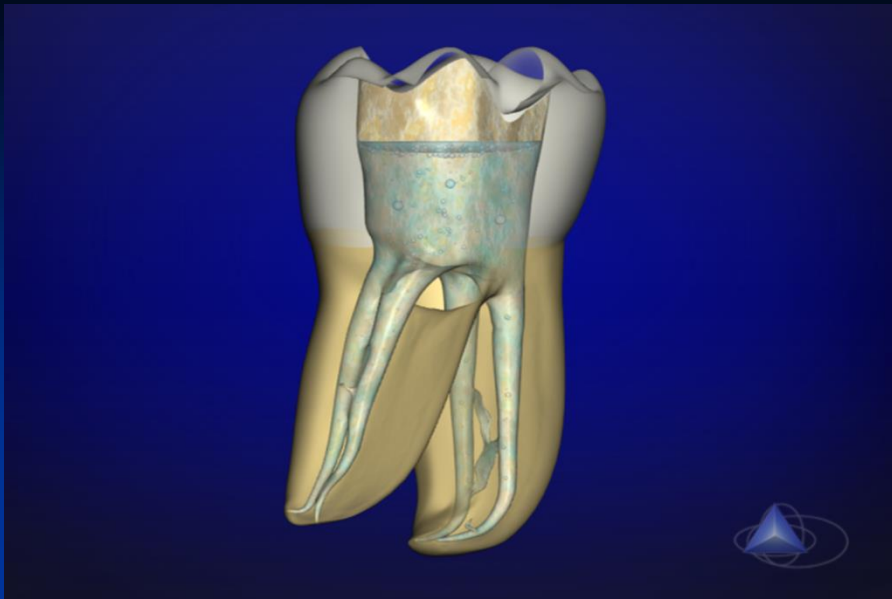


Other type of Heat-Carrier / Plugger

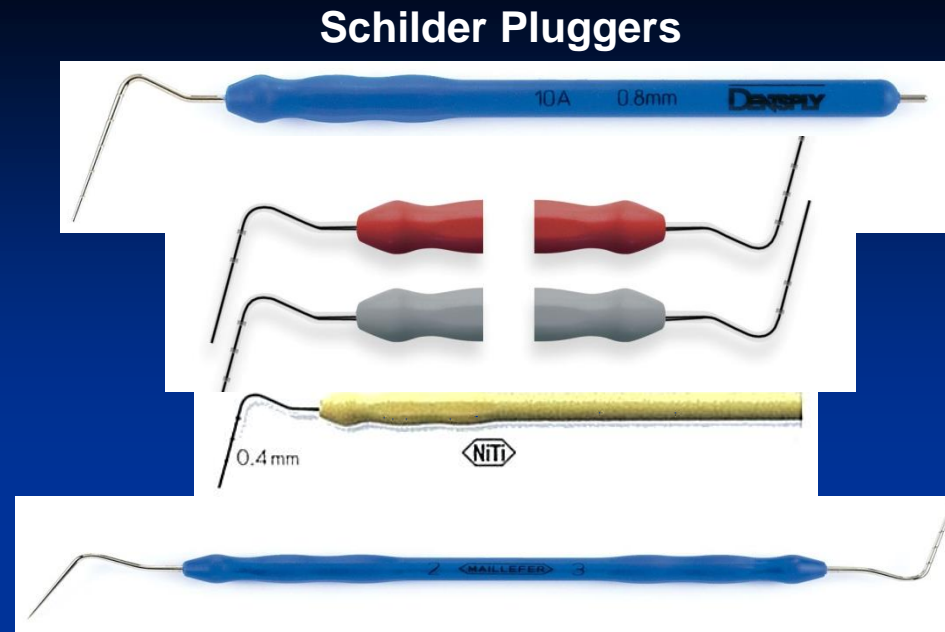


Heat Carrier

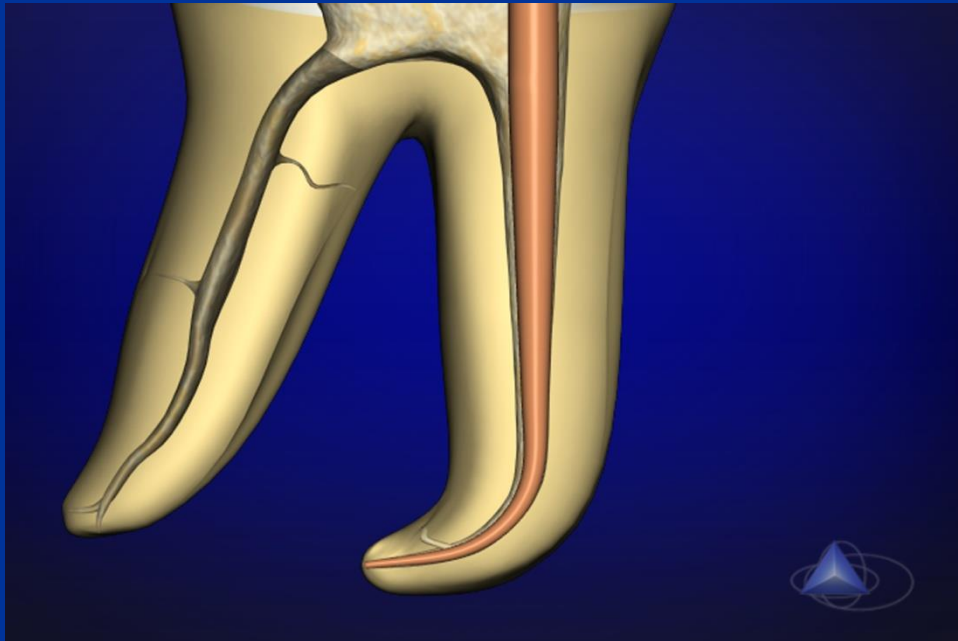
Cone Fit & Pluggger Selection



**Irrigation and disinfection
of root canal system**

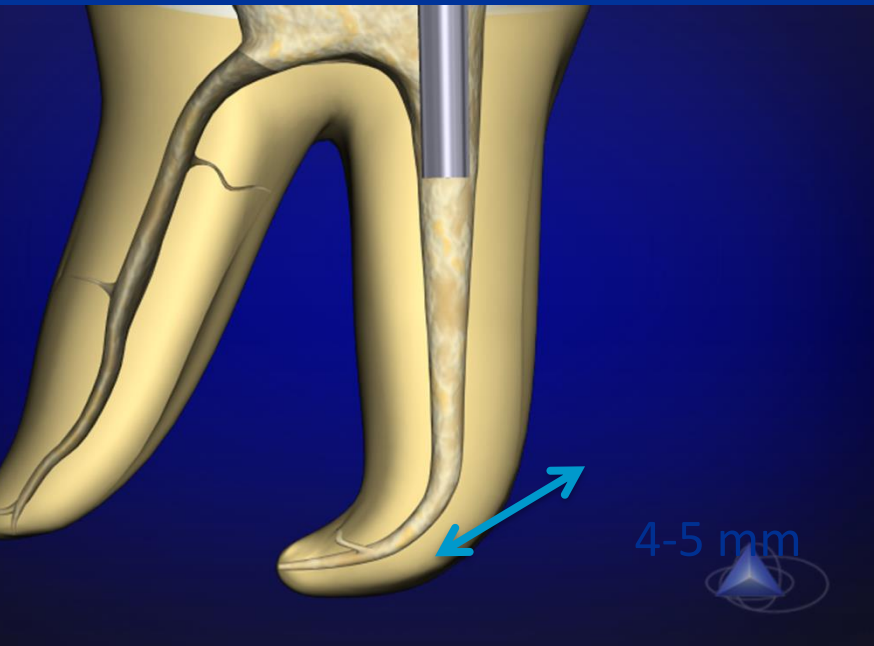
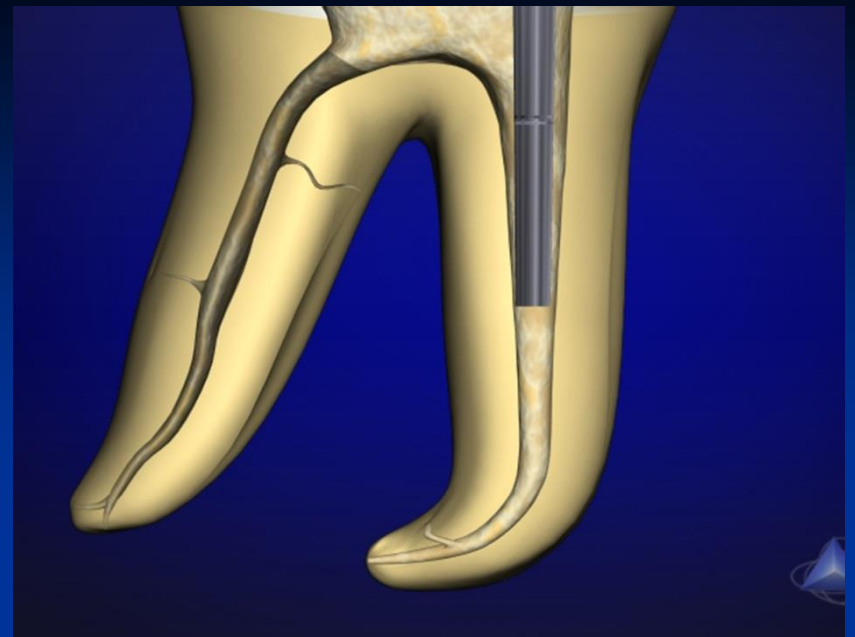
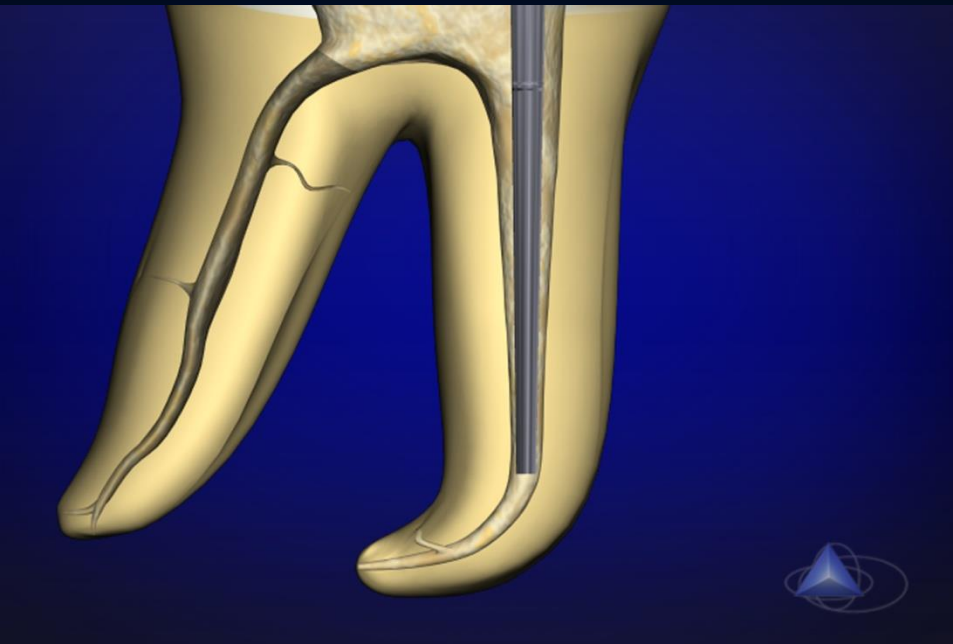


Heat-Carrier Pluggers



**Manual Pluggers
for compaction**

Fit a master cone

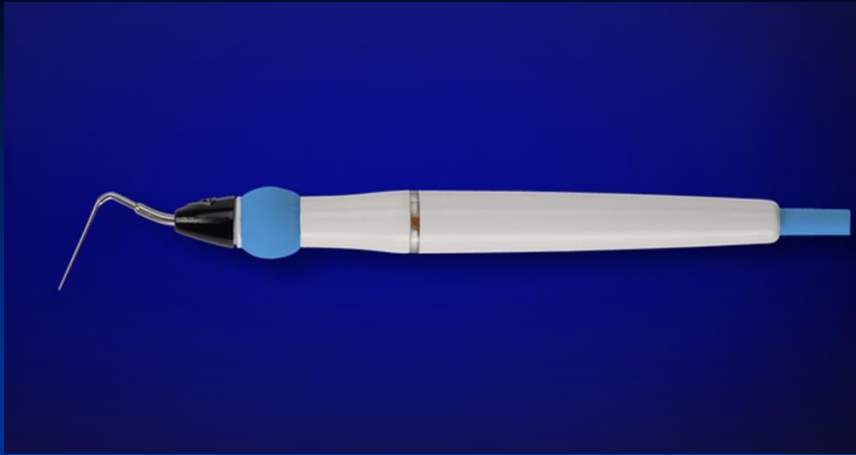


Selection small size manual plugger

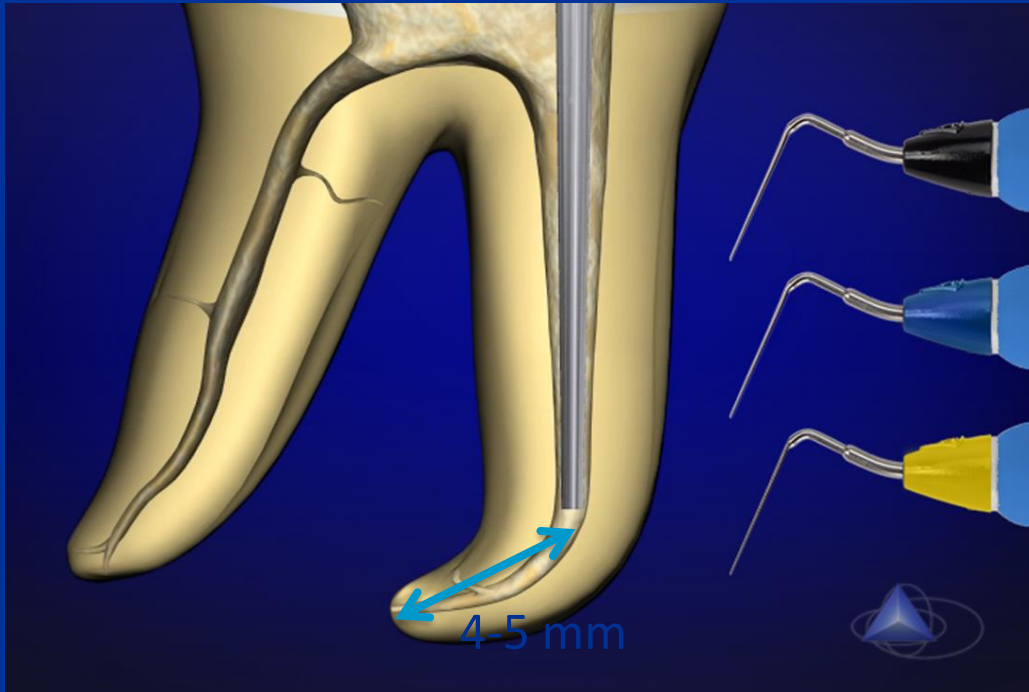
Selection medium size manual plugger

Selection large size manual plugger

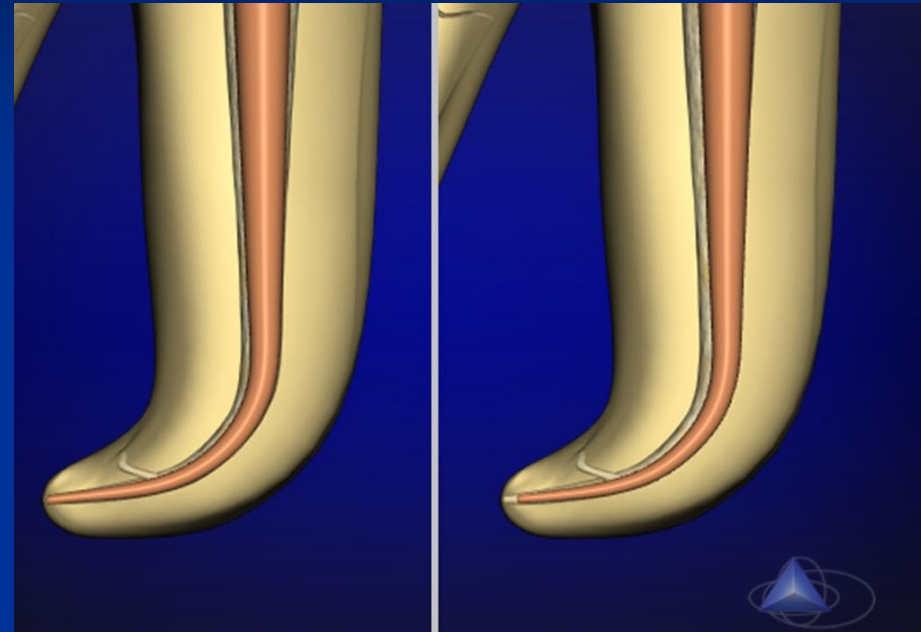
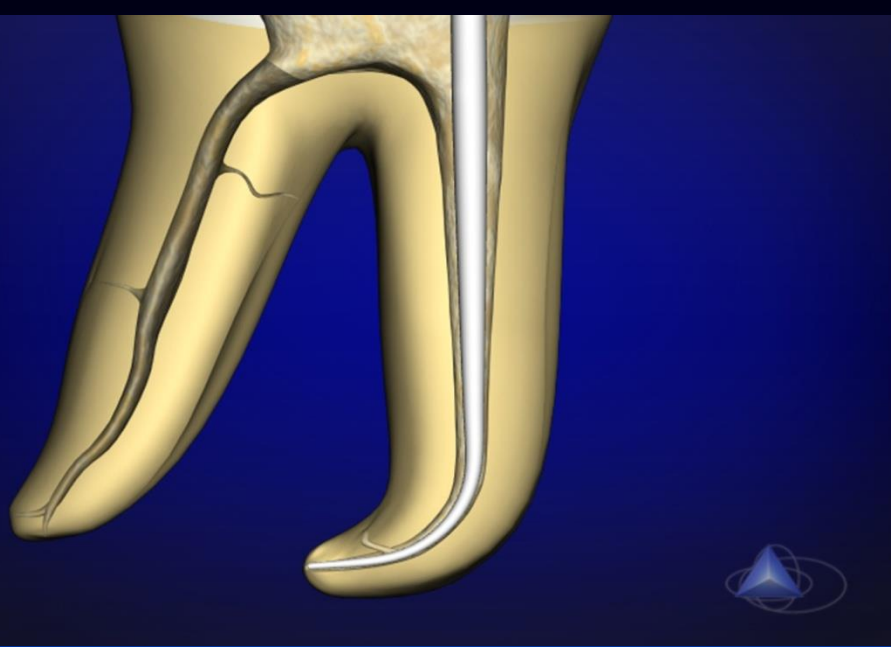
Down-Pack handpiece



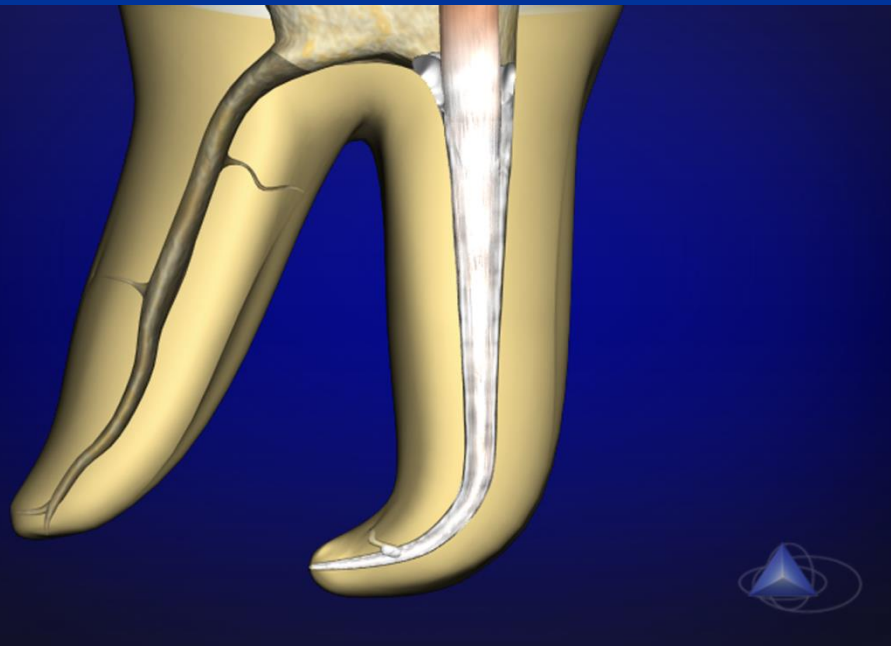
Selection of the Heat Plugger



**Mesured paper point to
Working Length**



Trim the master cone

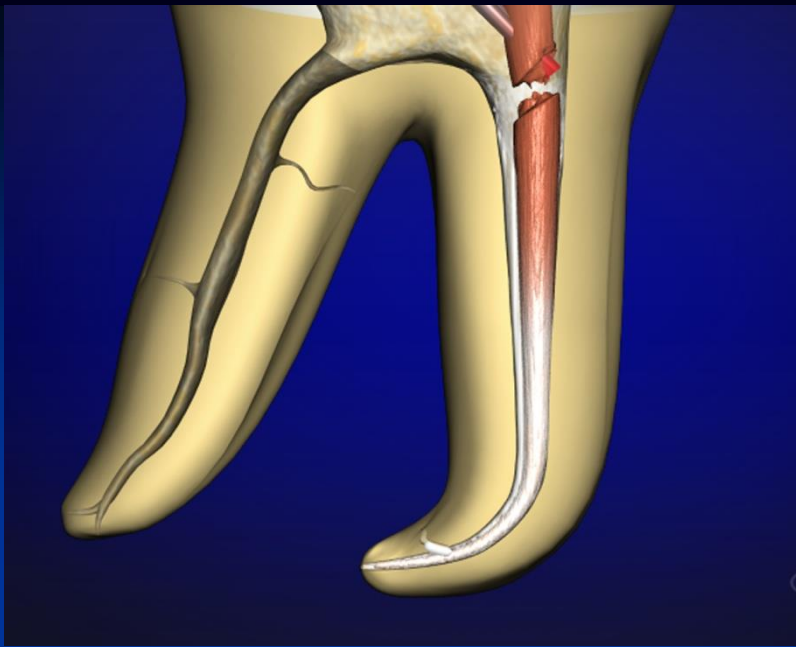


Insert lubricate (sealer) master cone

Heat of the
plugger

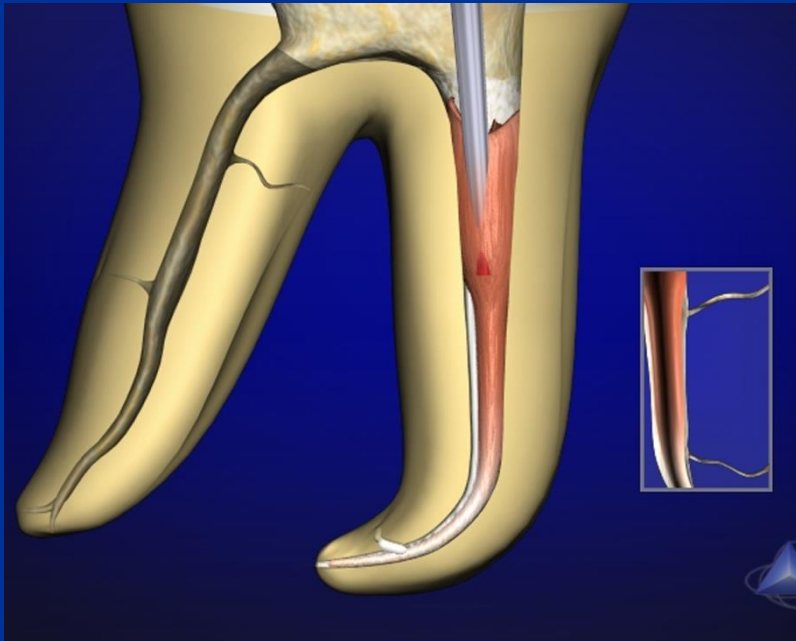
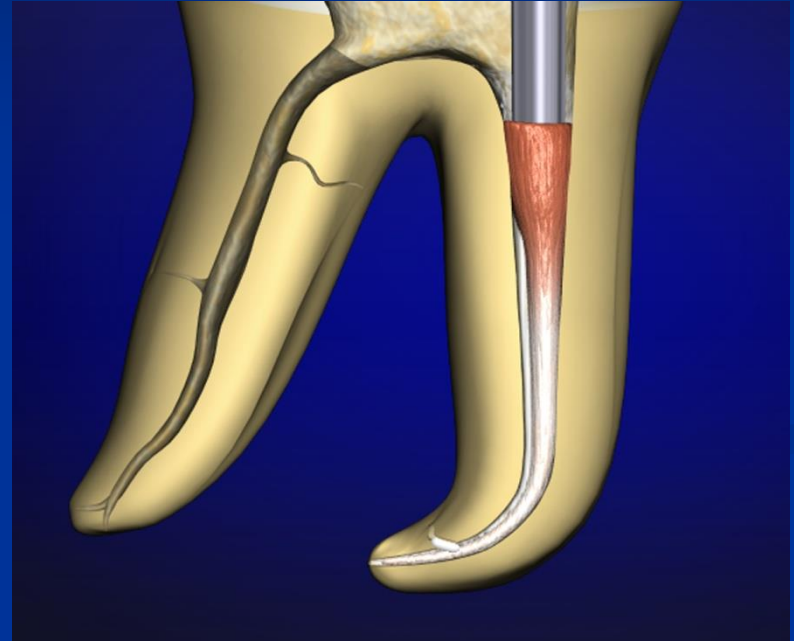


Downpack : Vertical Condensation

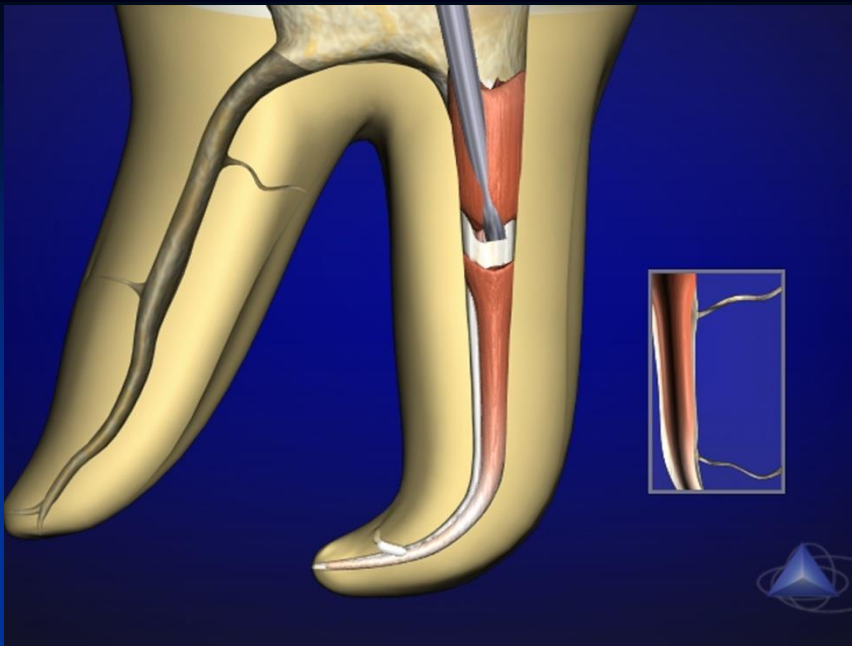


Activate Calamus and sear off the master cone

Select the larger prefit, manual plugger and move Gutta Percha apically

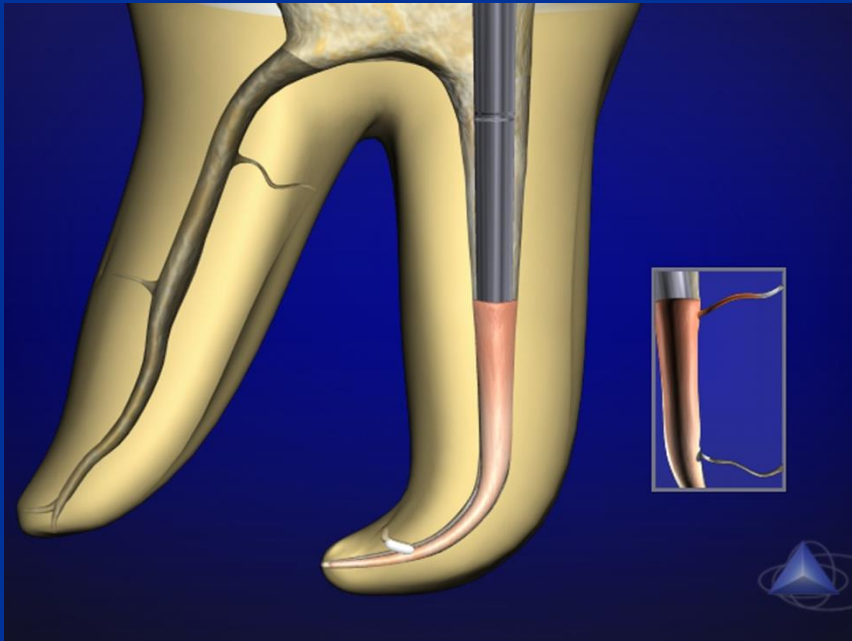
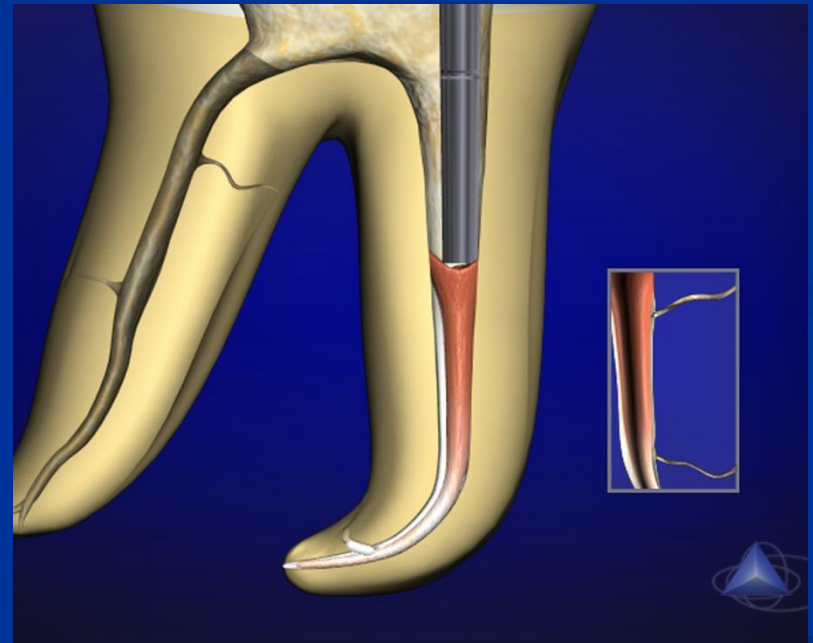


Activate Calamus and plunge 3-4 mm into the gutta-percha

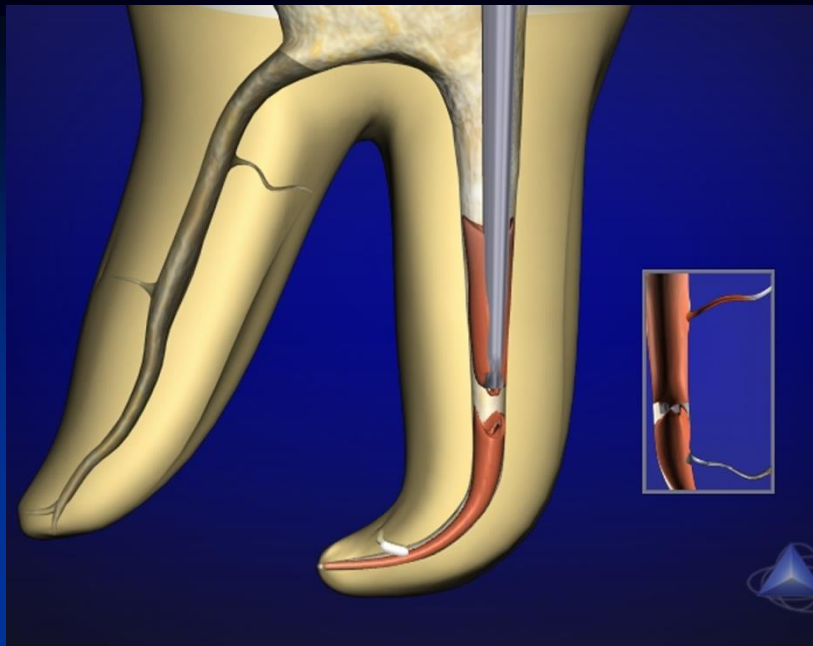


Desactivate Calamus 1-2 seconds, then remove “bite” of Gutta Percha

Select the medium size, manuel plugger and move Gutta Percha apically

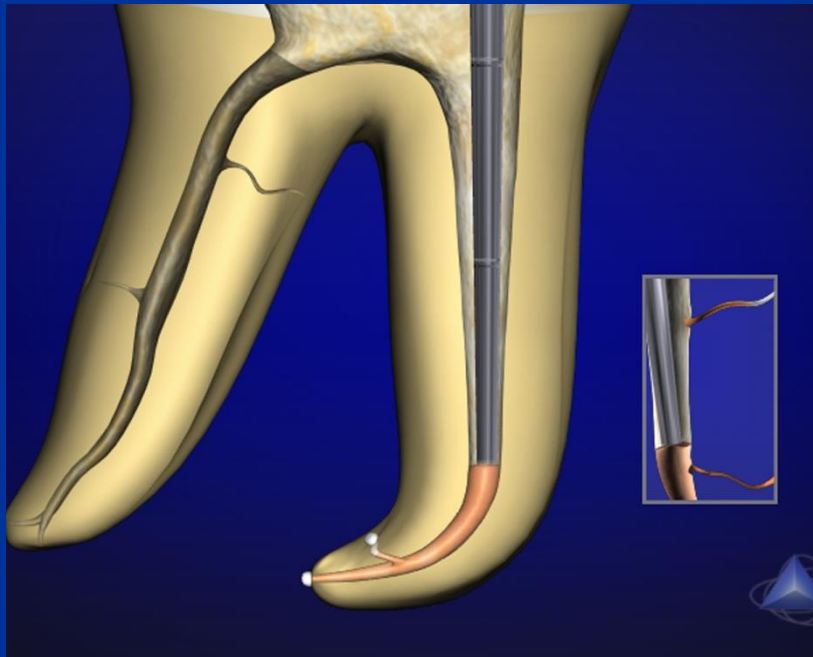
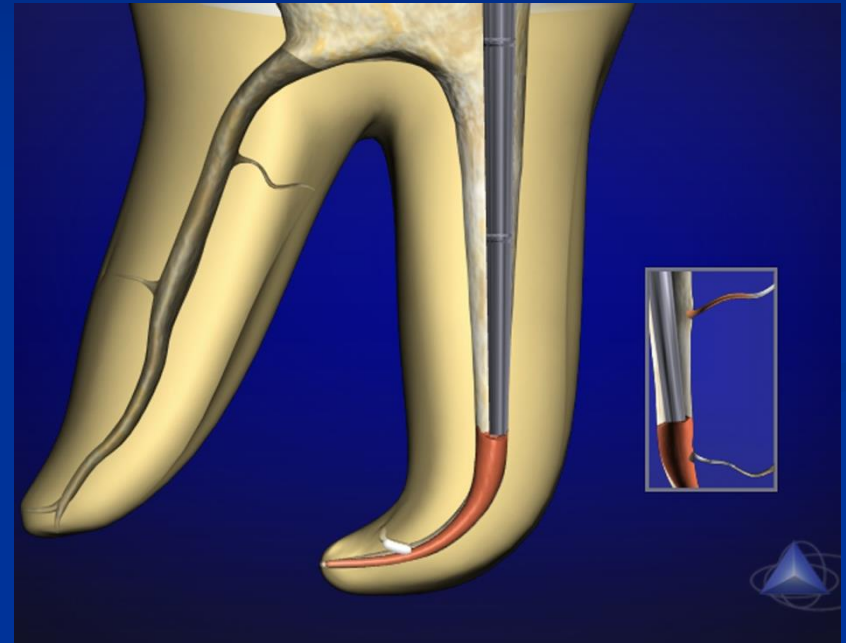


Press apically for 5 seconds



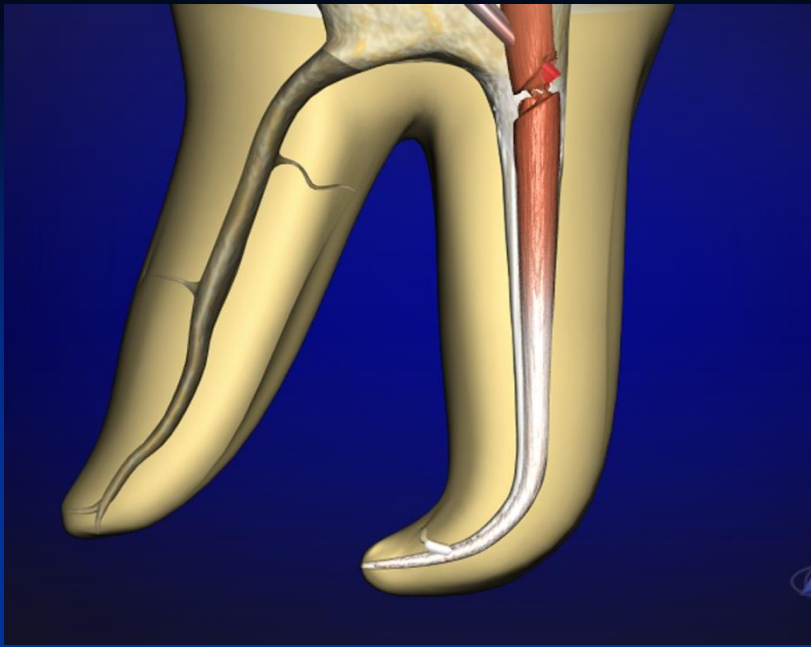
Activate Calamus, plunge deeper 3-4mm and wait 1-2 seconds after deactivate it

Select small size manuel Plugger, move gutta-percha apically



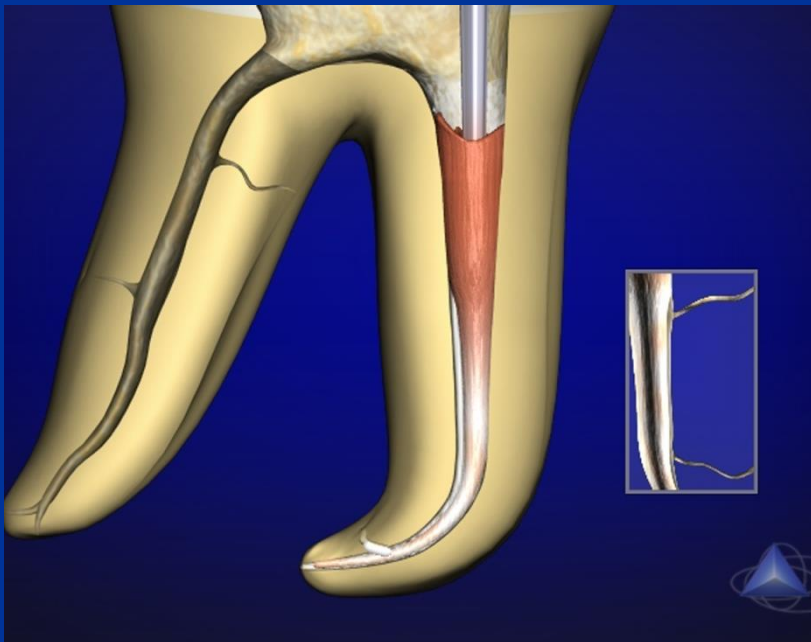
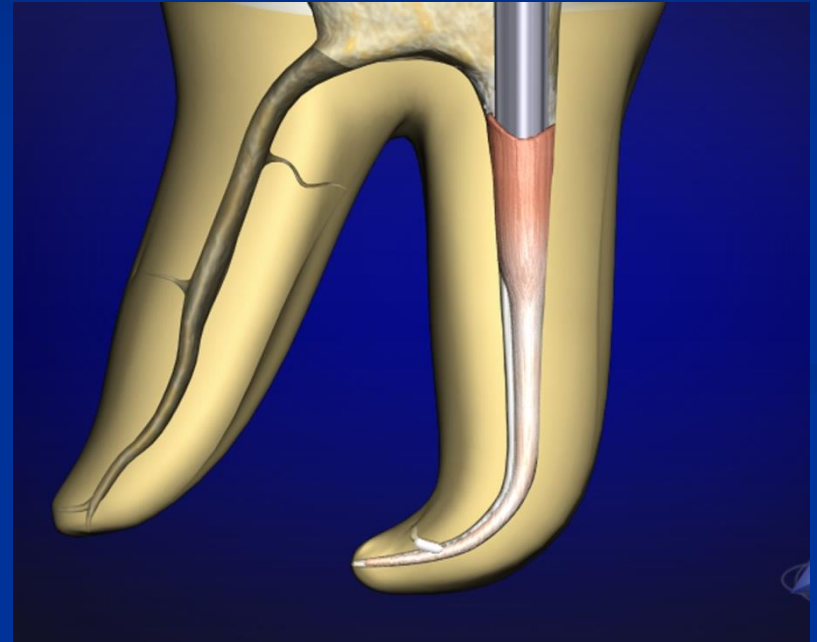
Press small Plugger 5 seconds into the apical third

Downpack : Continuous Wave Technique

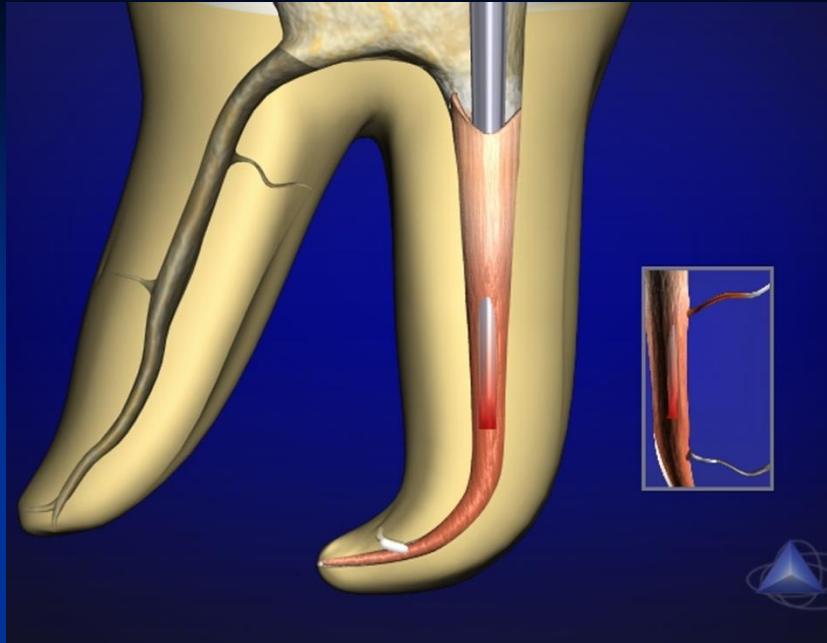


Activate Calamus and sear off the master cone

Select the larger prefit, manual plugger and move Gutta Percha apically

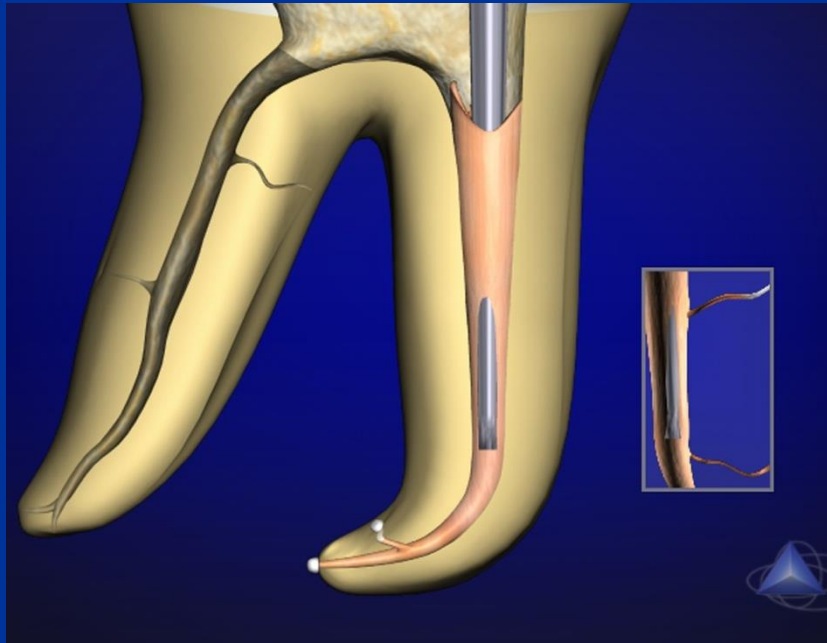
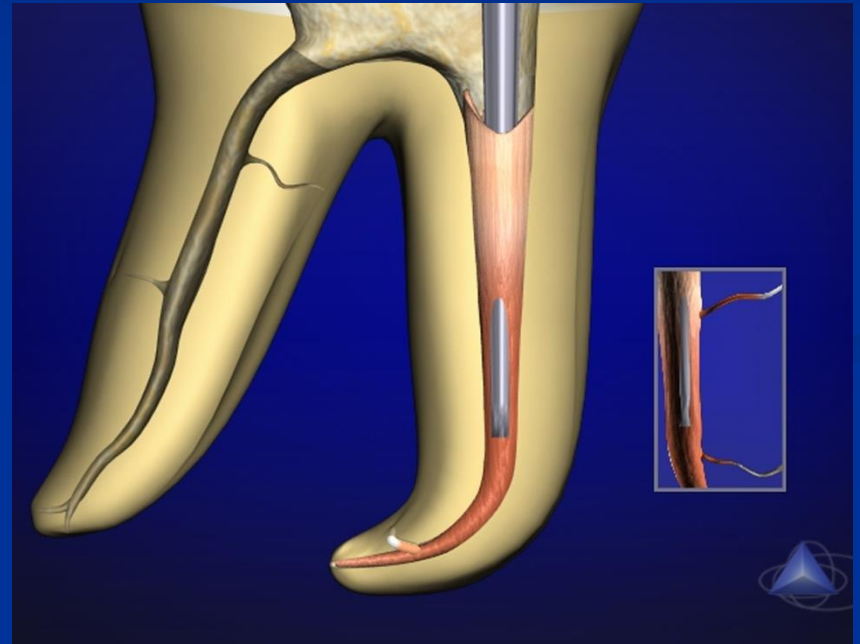


Activate Calamus



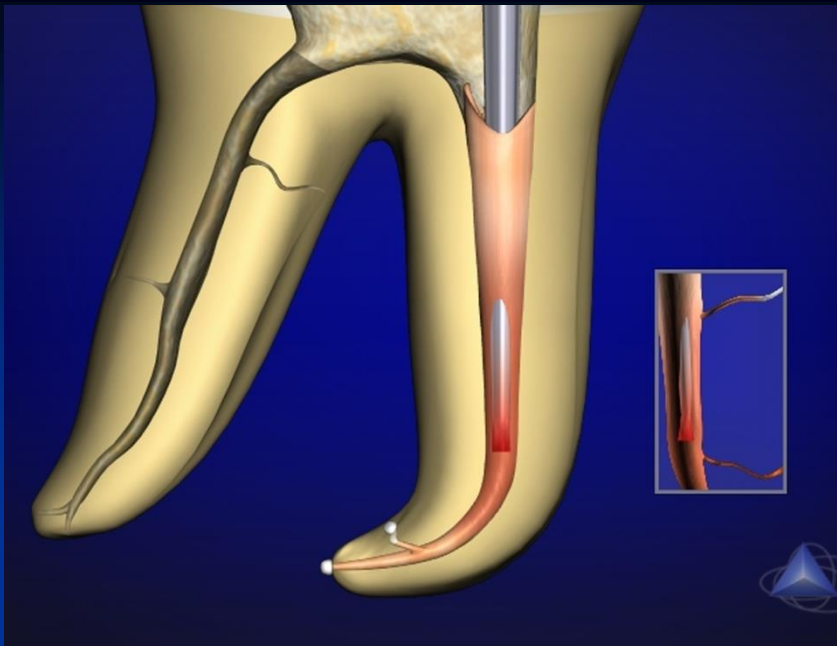
In one continuous motion press until the “stop” is at 2 mm of the reference point

Deactivate Calamus, maintain firm apical pressure till the reference point is reached

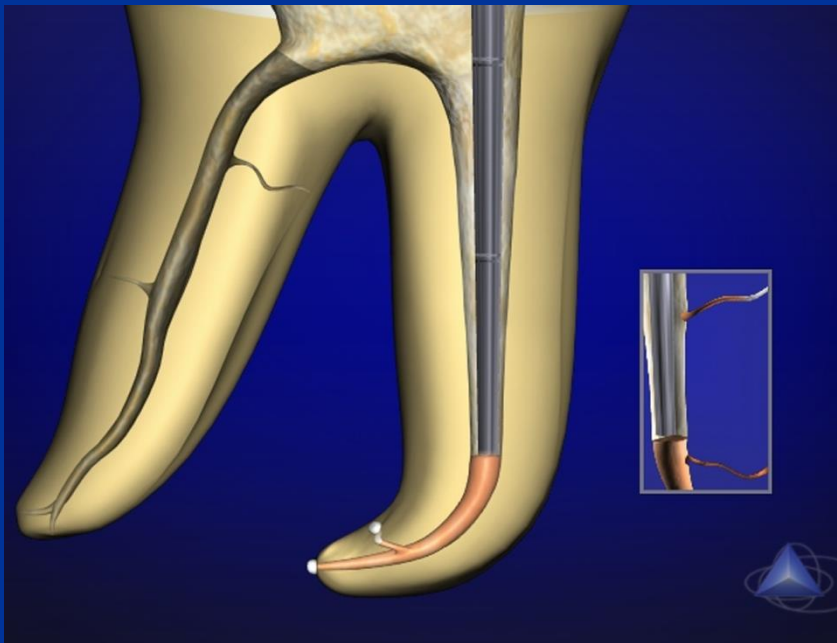
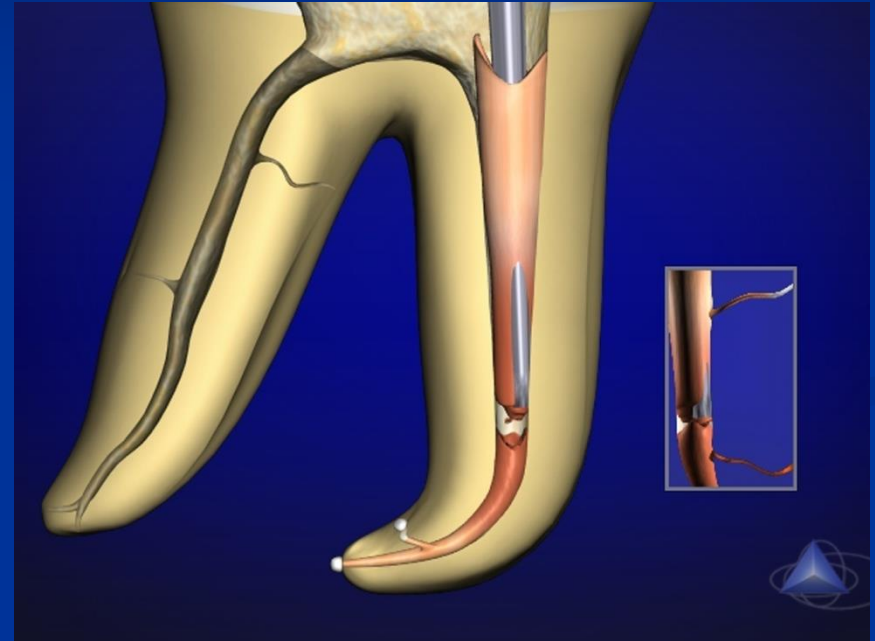


Maintain firm pressure for 10 seconds

**Activate Calamus for 1-2 seconds
and desactivate , then remove the
plugger**



**This will separate and
remove Gutta-Percha**

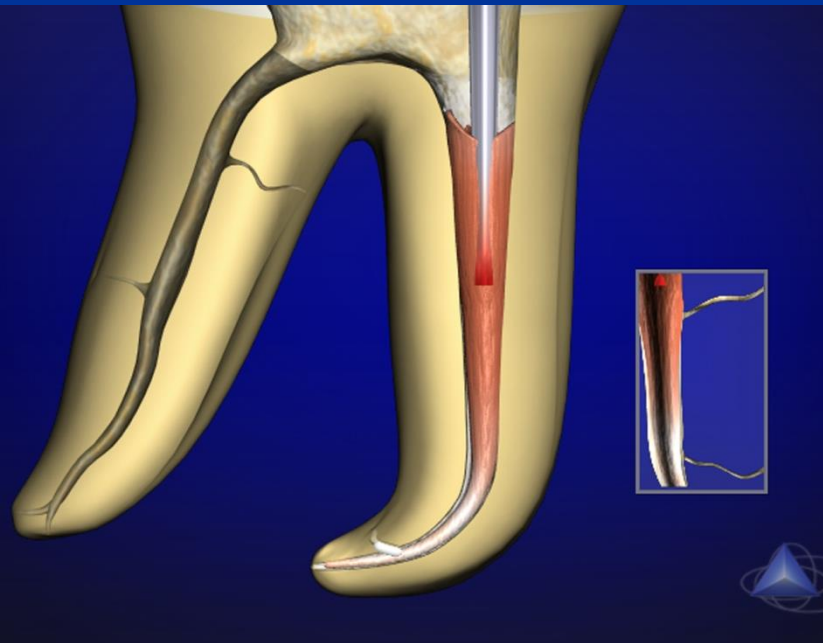
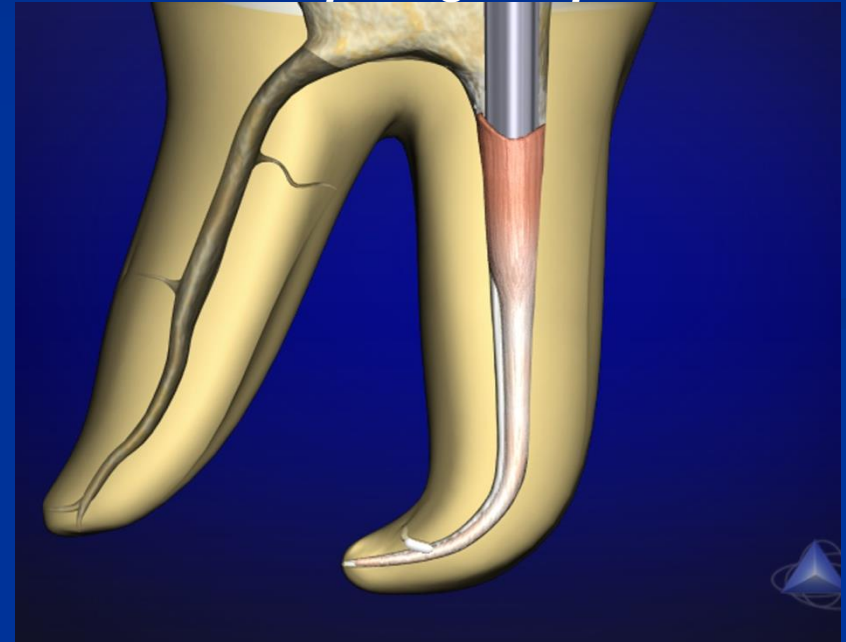
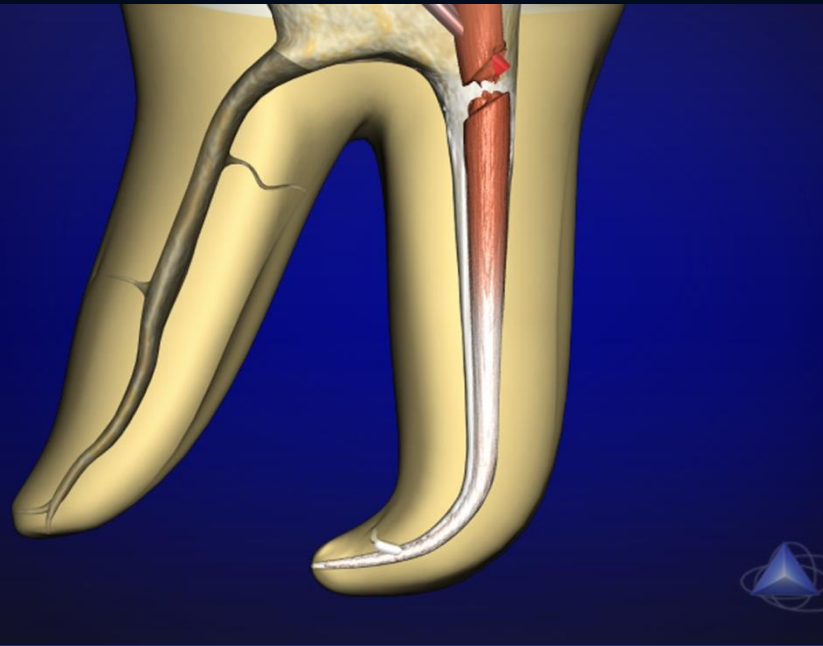


**Select the small size, prefit manual
plugger and condense the Gutta-Percha**

Downpack : Hybrid Technique

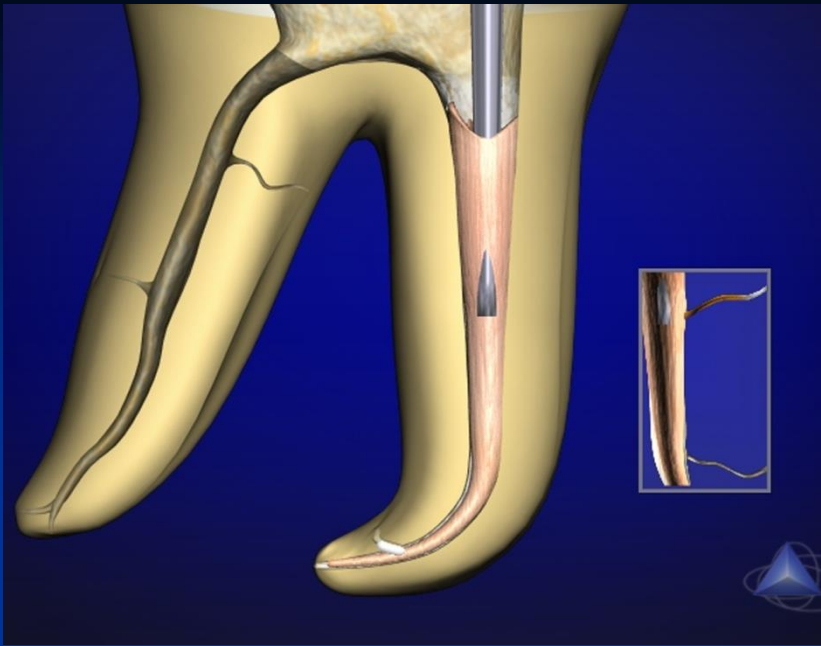
Activate Calamus and sear off the master cone

Select the larger prefit, manual plugger and move Gutta Percha apically, press 5 seconds to compact gutta-percha

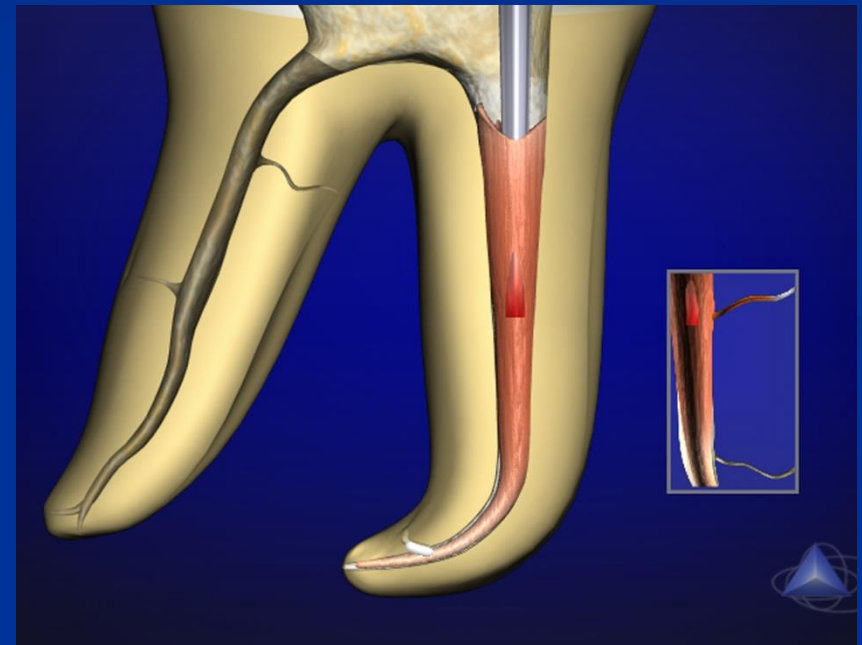


Activate Calamus and plunge 3-4 mm into the gutta-percha

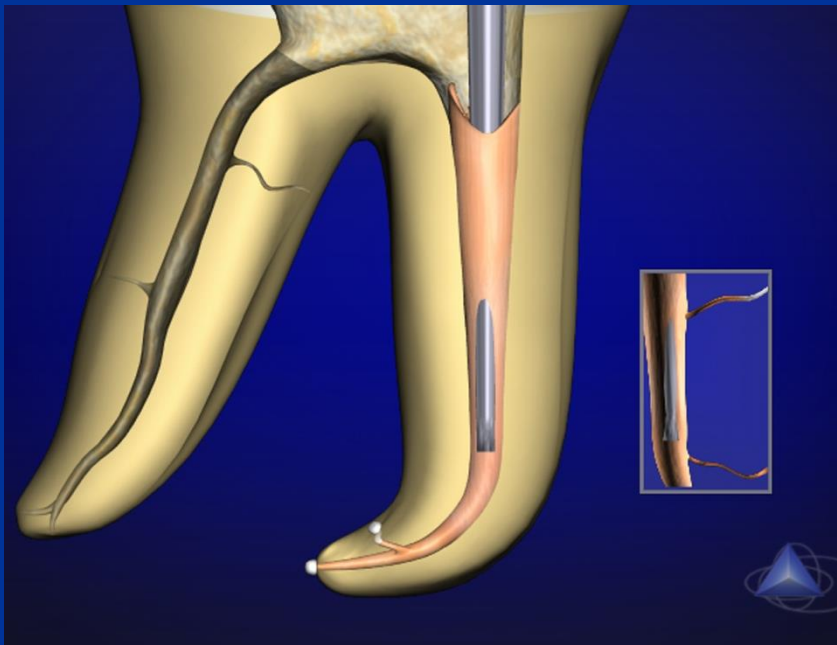
Deactivate Calamus maintain 5 seconds pressure to compact gutta.percha

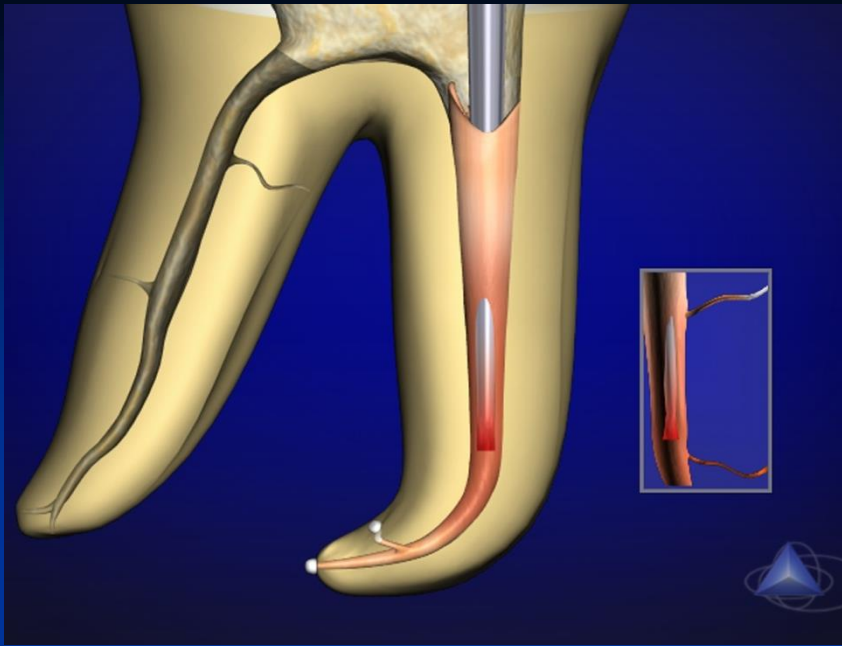


Activate Calamus



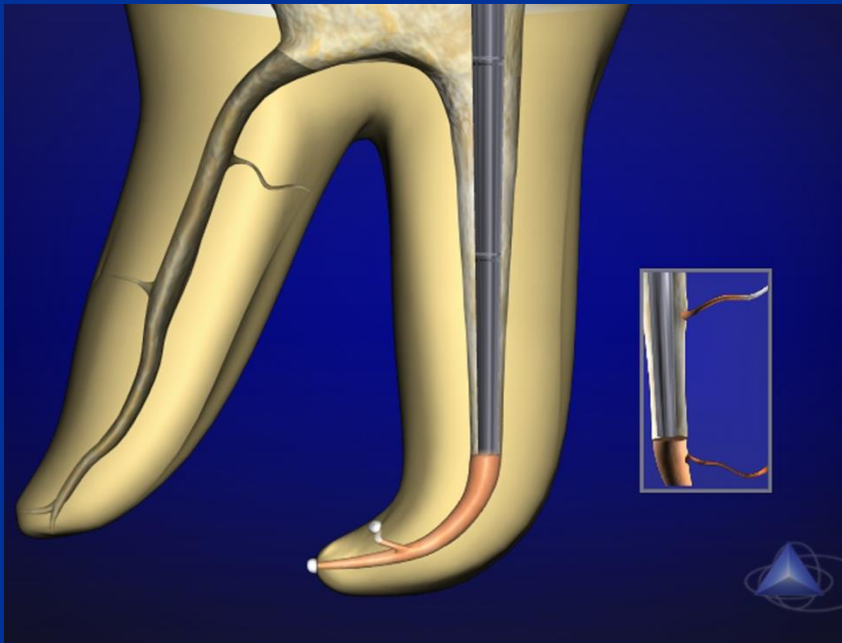
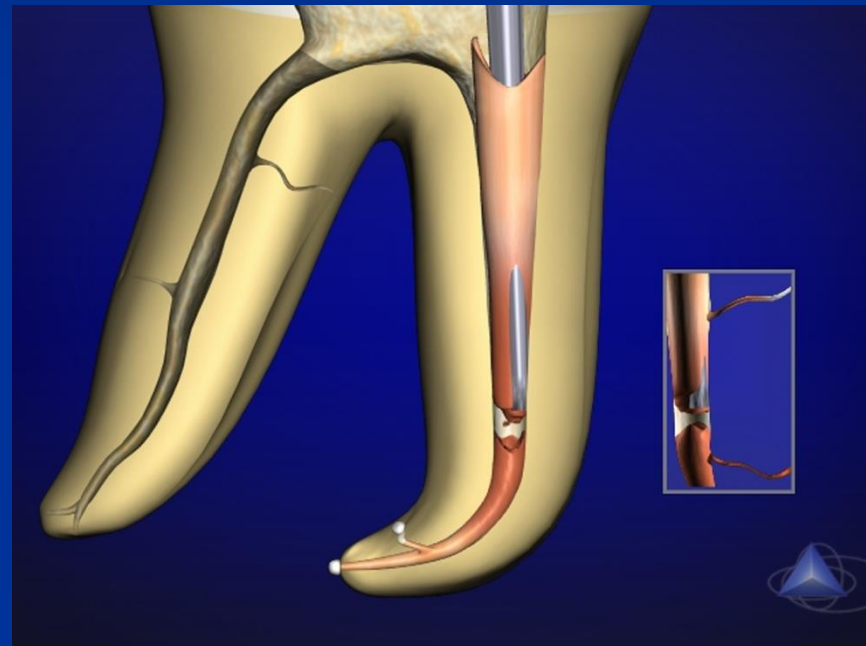
Deactivate and maintain 5 seconds . Maintain apical pressure till the working depth is reached





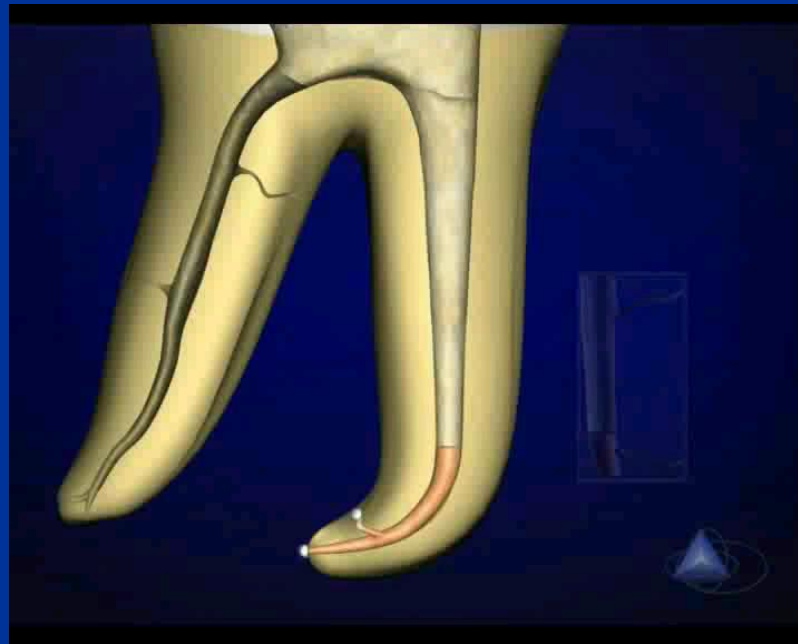
Activate Calamus 1-2 seconds

Desactivate and remove the plugger.

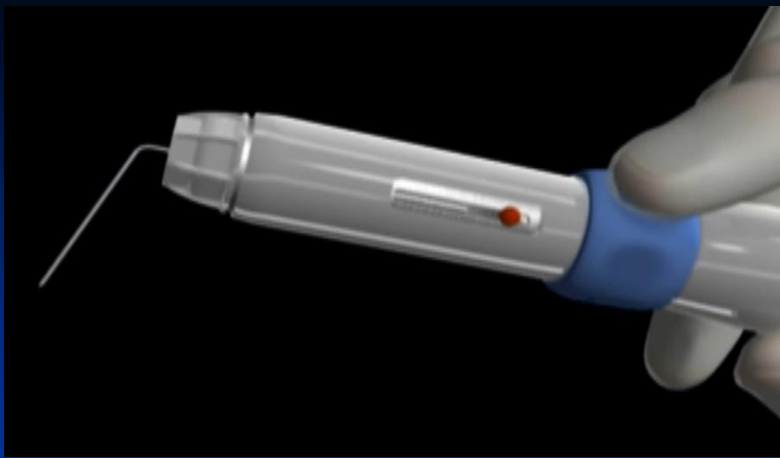


Select the small size, prefitted manual plugger and condense the Gutta-Percha

Backpack (backfill) Technique (flow)







Calamus flow handpiece



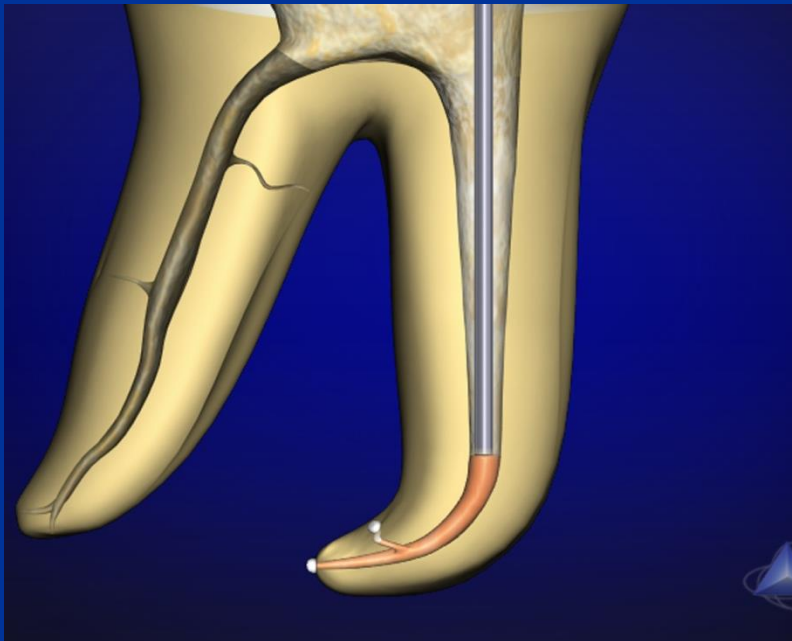
Cartridge of Gutta-Percha

#20(0,8) and
#23(0,6)

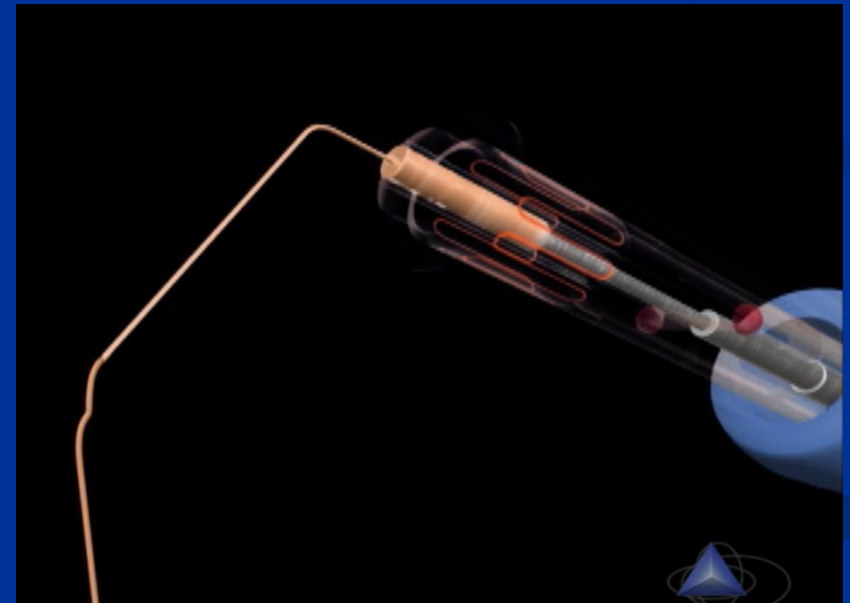


Cartridge tender

Internal view of activated flow handpiece



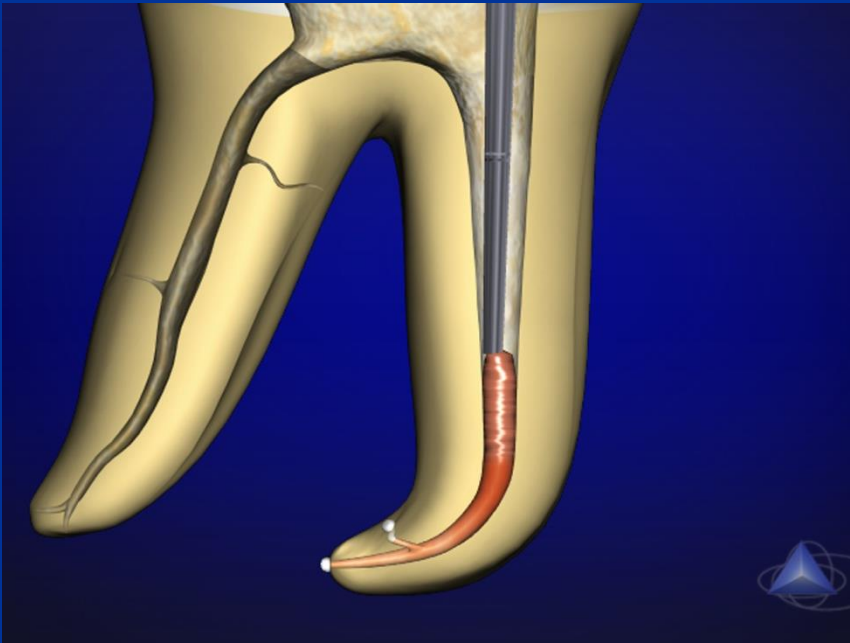
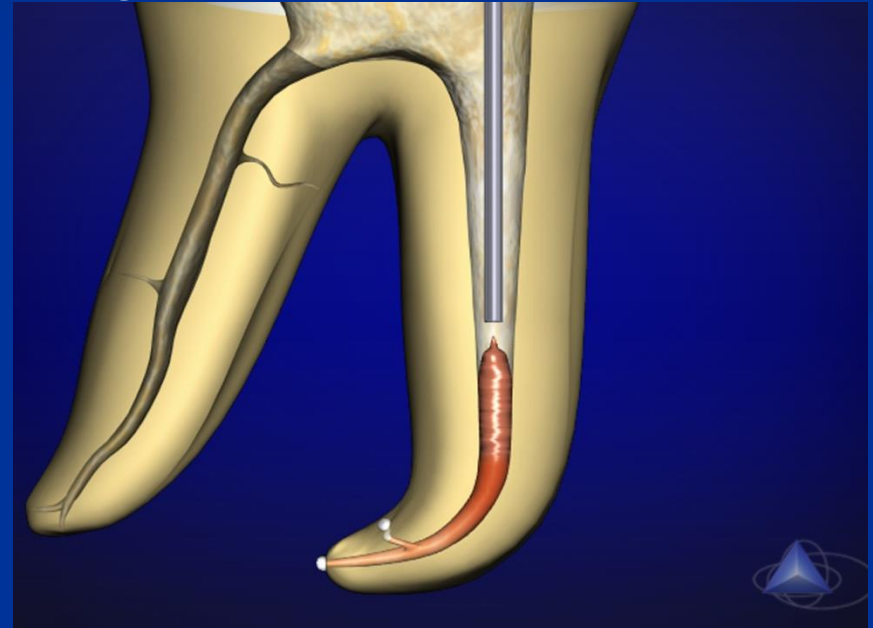
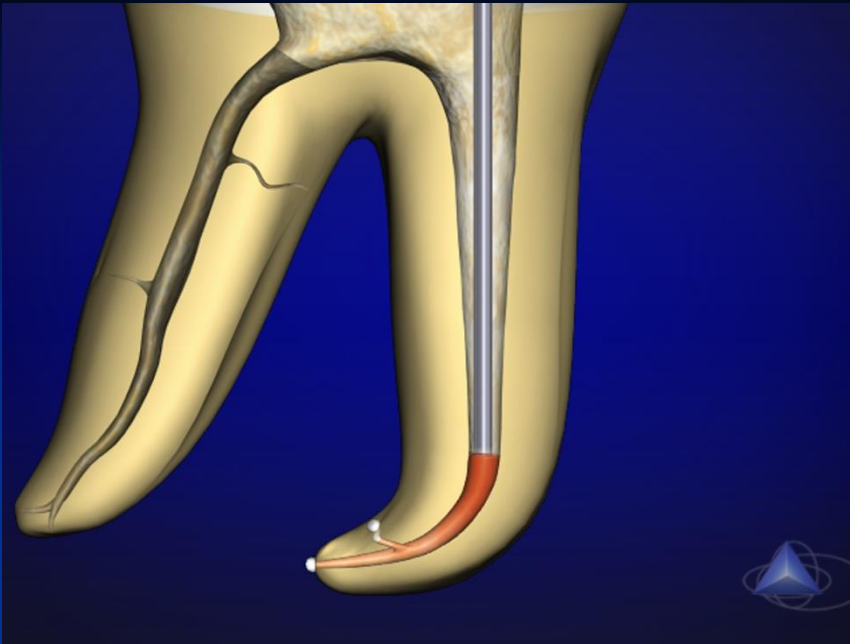
Position the tip against the packed filling material

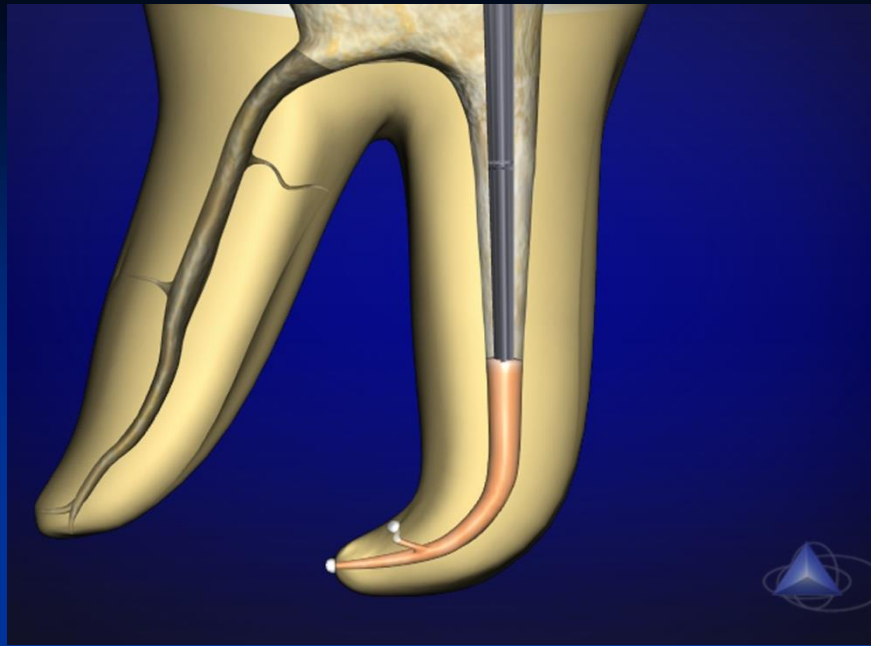


**Placing warm tip against packed-material
re-thermosoftens gutta-percha**

**Activate Calamus flow , dispense 2-3 mm
warm gutta-percha**

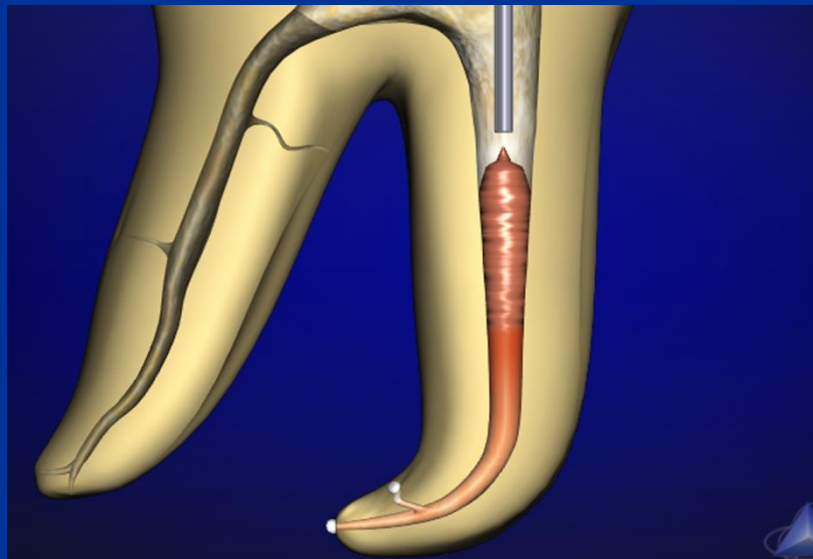
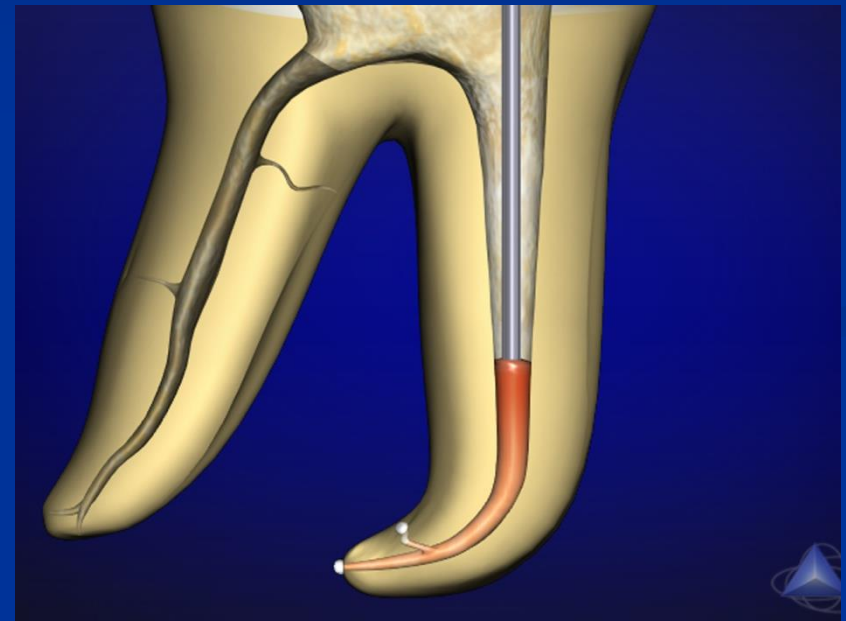
**Select smaller prefit manuel plugger
and condense material**



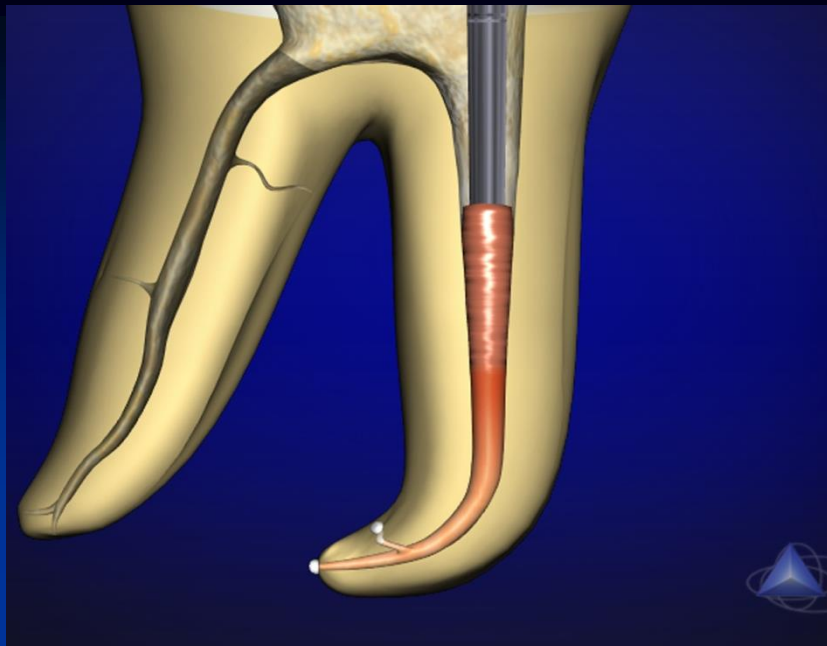


With the same plugger, press 5 seconds to avoid shrinkage during cooling phase

Position tip 5 seconds against packed material

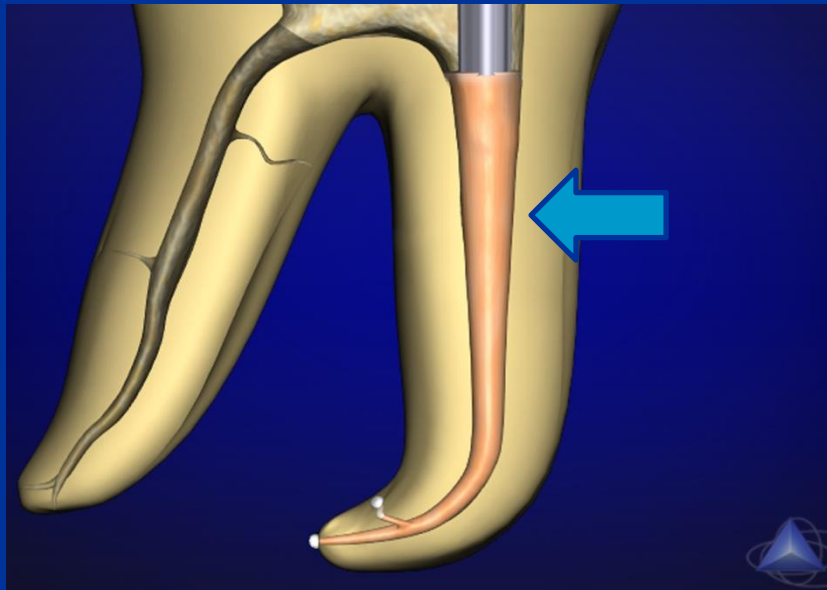
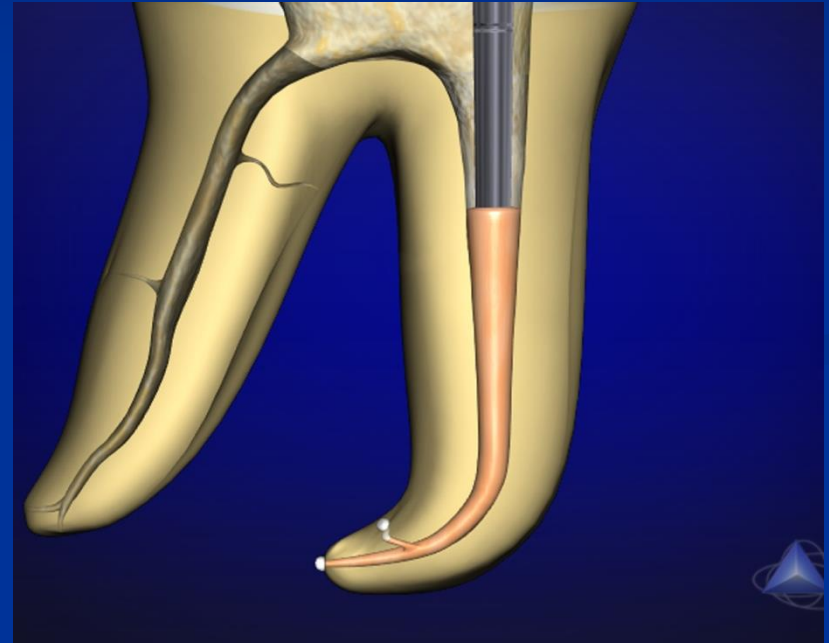


Activate Calamus flow and dispense 3-4 mm warm gutta-percha



With a prefit, medium size manual plugger condense the material

*And press the material for 5 seconds
(avoiding shrinkage)*

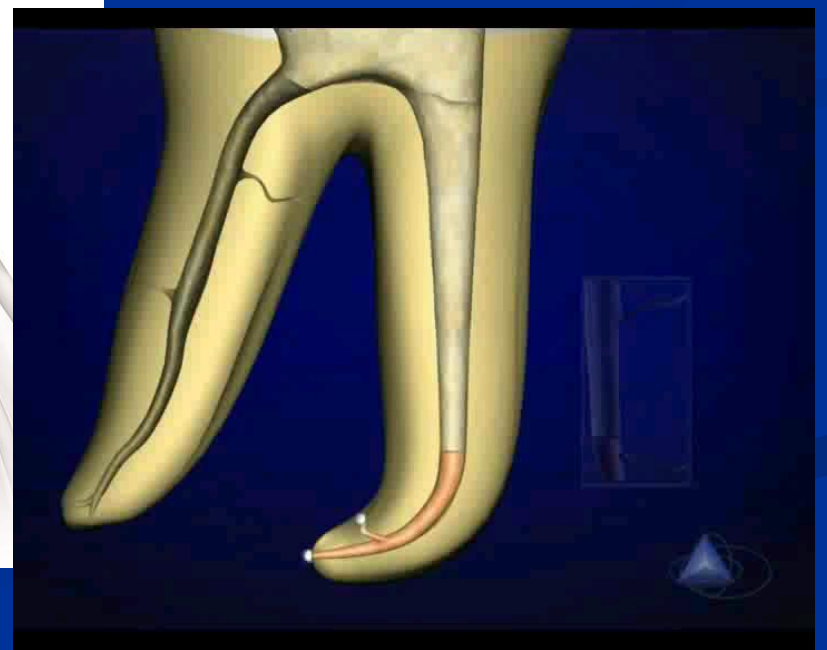


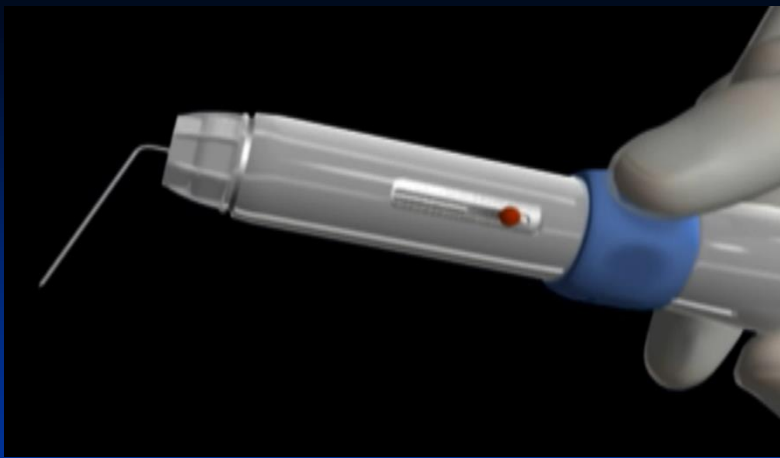
*Continue the backfilling in the same manner until the canal is full **OR stop** to accommodate a post for restorative*

VIDEO

CALAMUS[®] DUAL

Backpack Technique (flow)





Calamus flow handpiece



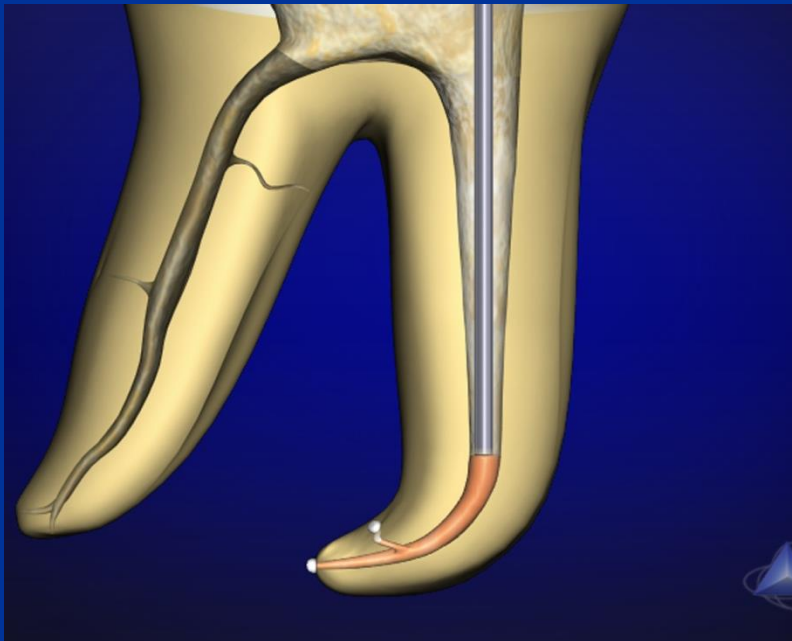
Cartridge of Gutta-Percha

#20(0,8) and
#23(0,6)

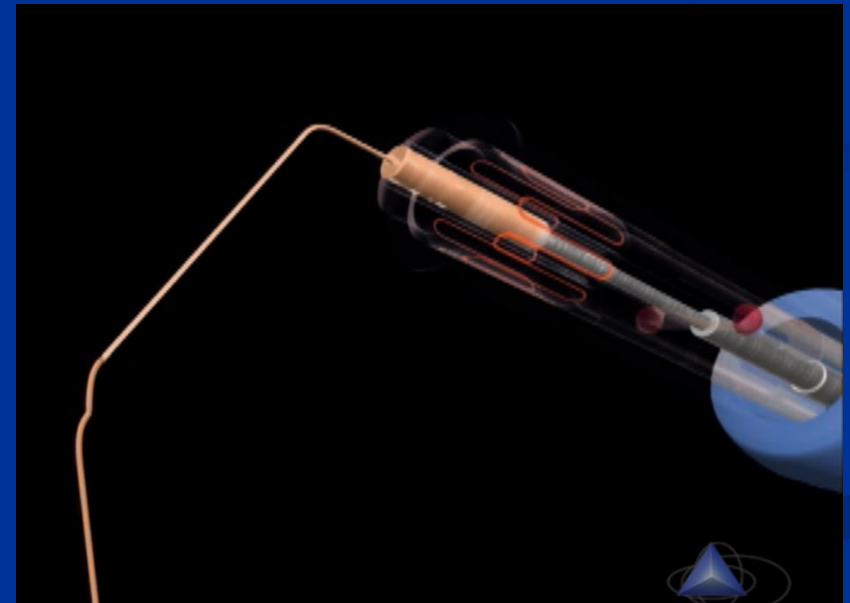


Cartridge tender

Internal view of activated flow handpiece



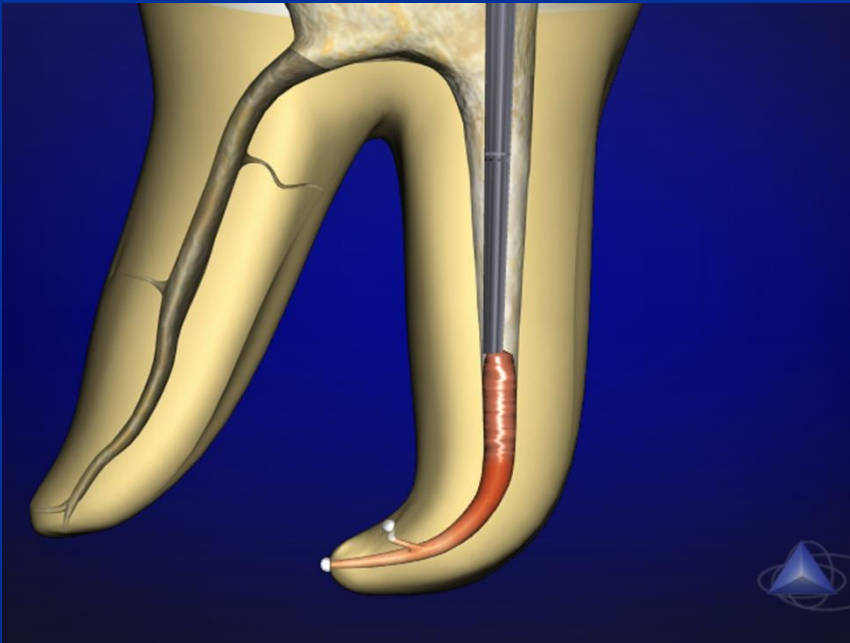
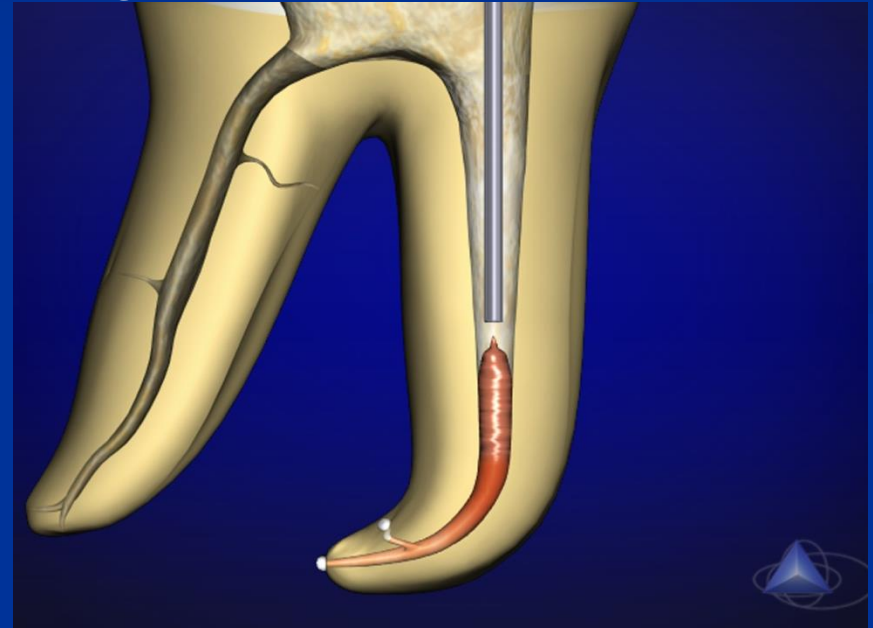
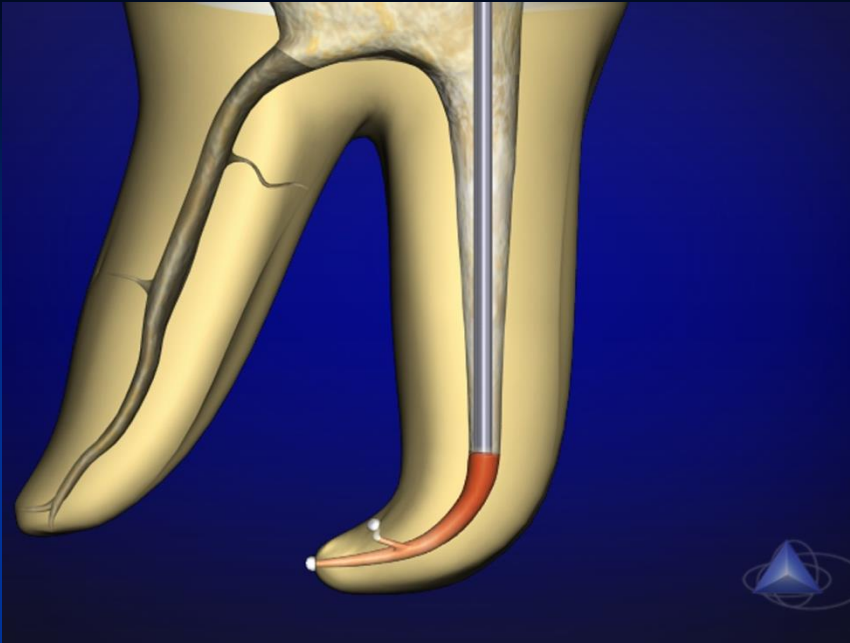
Position the tip against the packed filling material

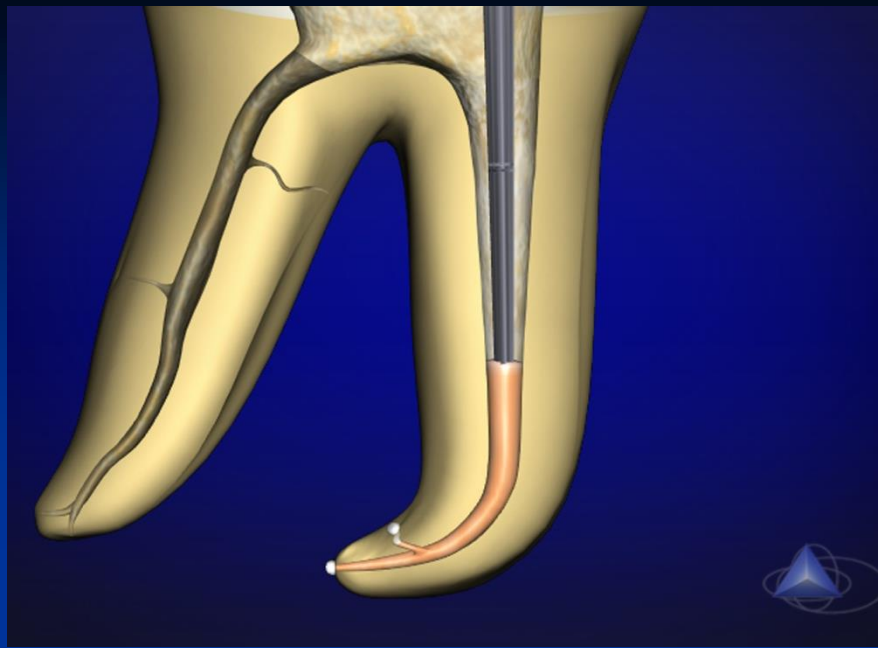


**Placing warm tip against packed-material
re-thermosoftens gutta-percha**

**Activate Calamus flow , dispense 2-3 mm
warm gutta-percha**

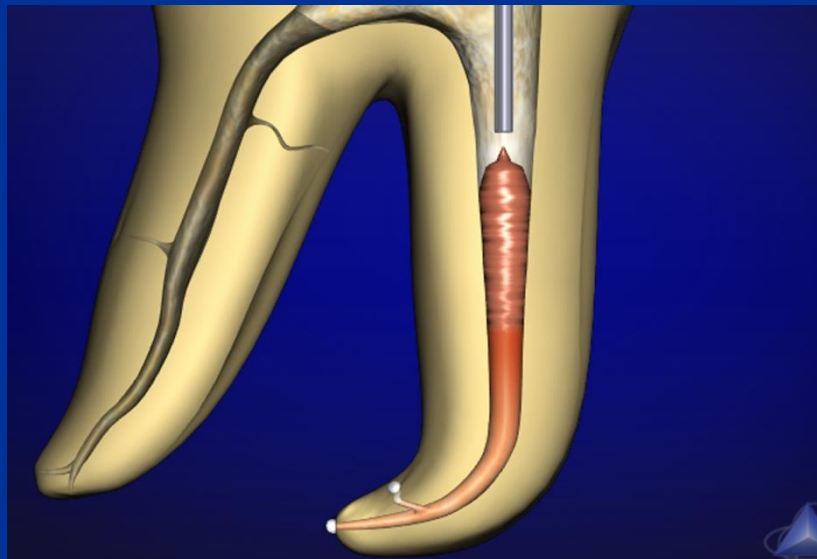
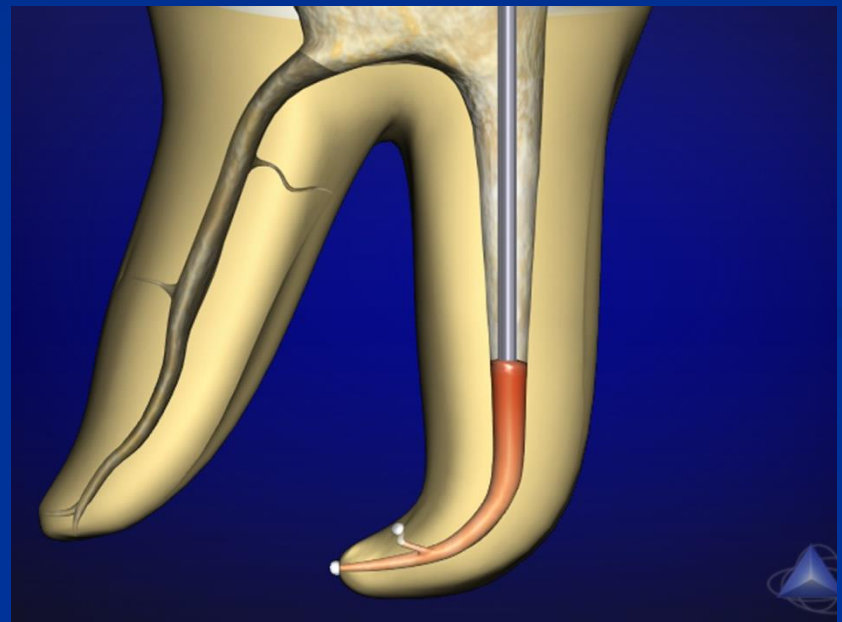
**Select smaller prefit manuel plugger
and condense material**



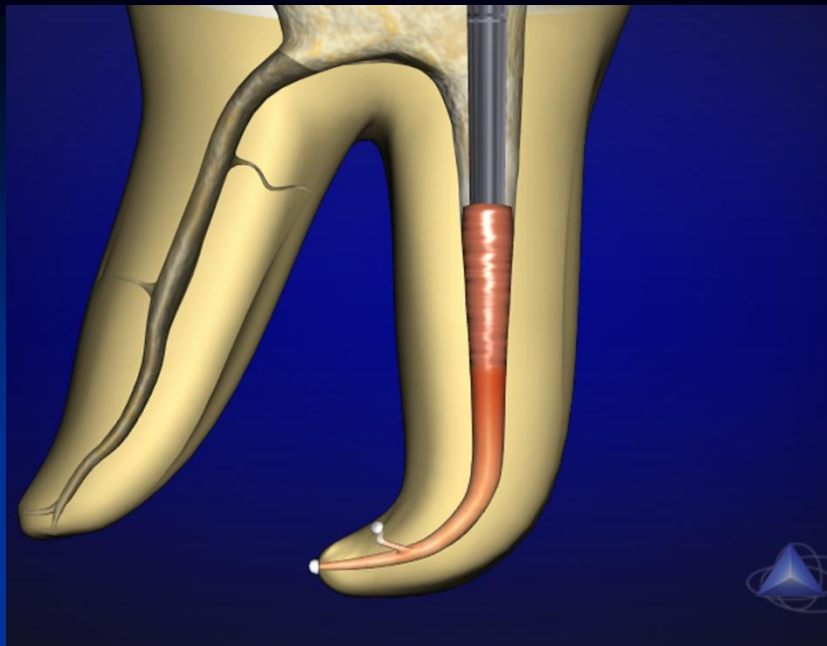


With the same plugger, press 5 seconds to avoid shrinkage during cooling phase

Position tip 5 seconds against packed material

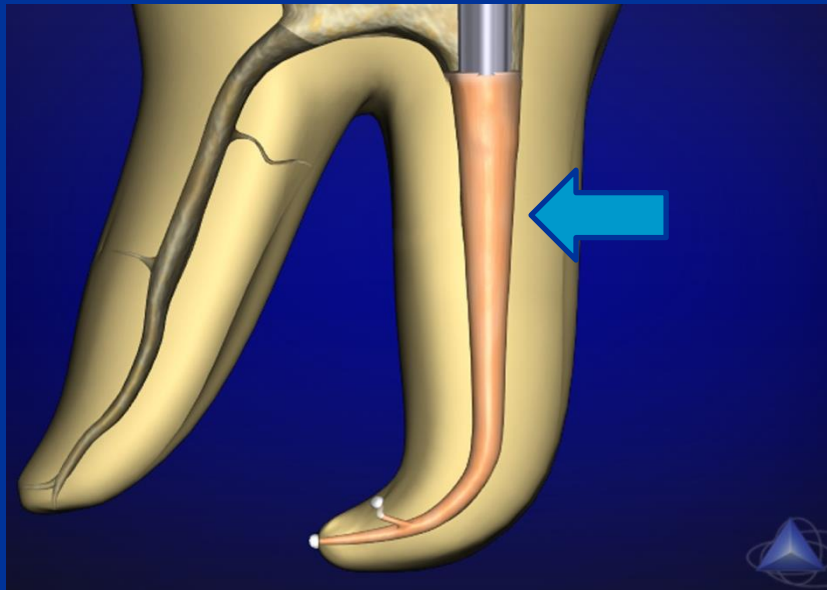
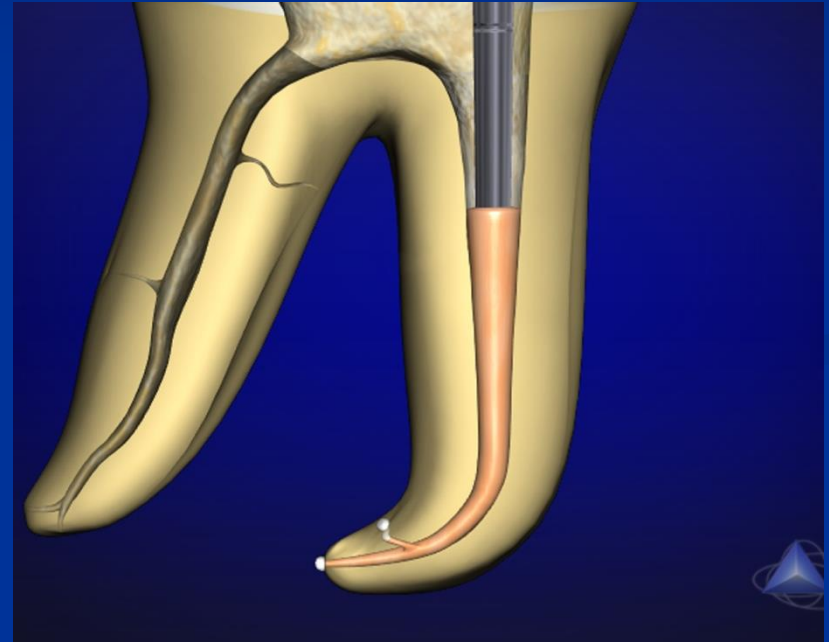


Activate Calamus flow and dispense 3-4 mm warm gutta-percha



With a prefit, medium size manual plugger condense the material

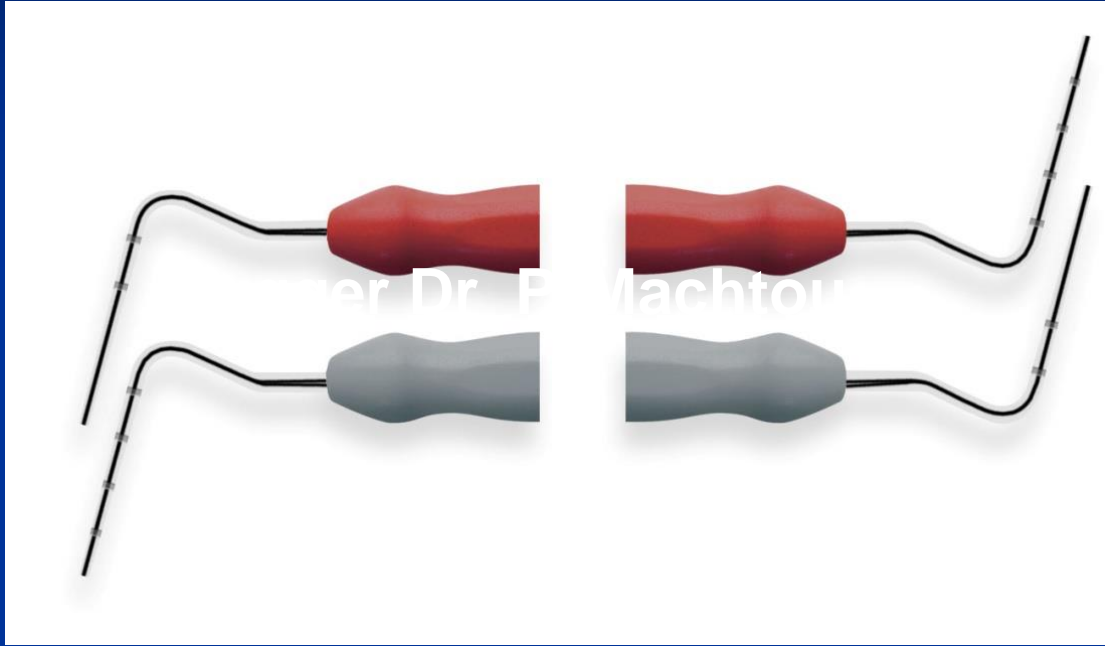
And press the material for 5 seconds (avoiding shrinkage)



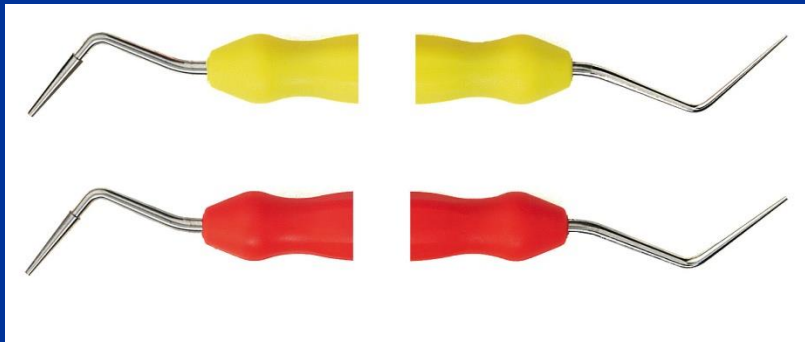
*Continue the backfilling in the same manner until the canal is full **OR stop** to accommodate a post for restorative*

SCHILDER Technique

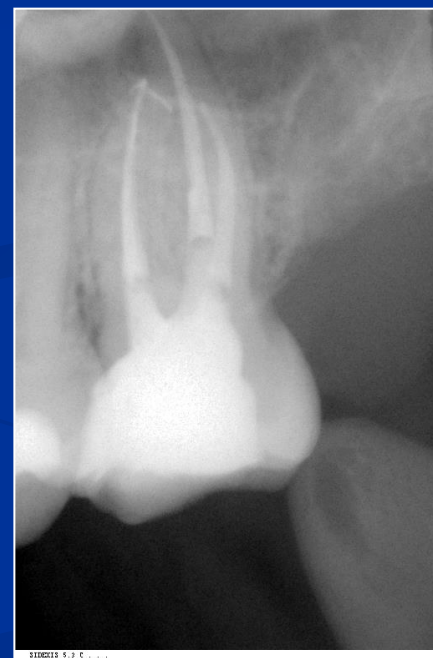
Similar technique to the Warm Gutta-Percha vertical condensation with Calamus device described later in this module



Other type of Heat-Carrier / Plugger



Heat Carrier

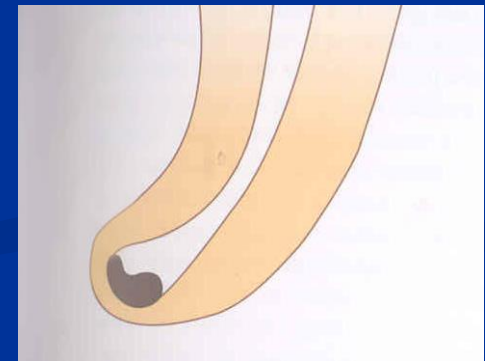
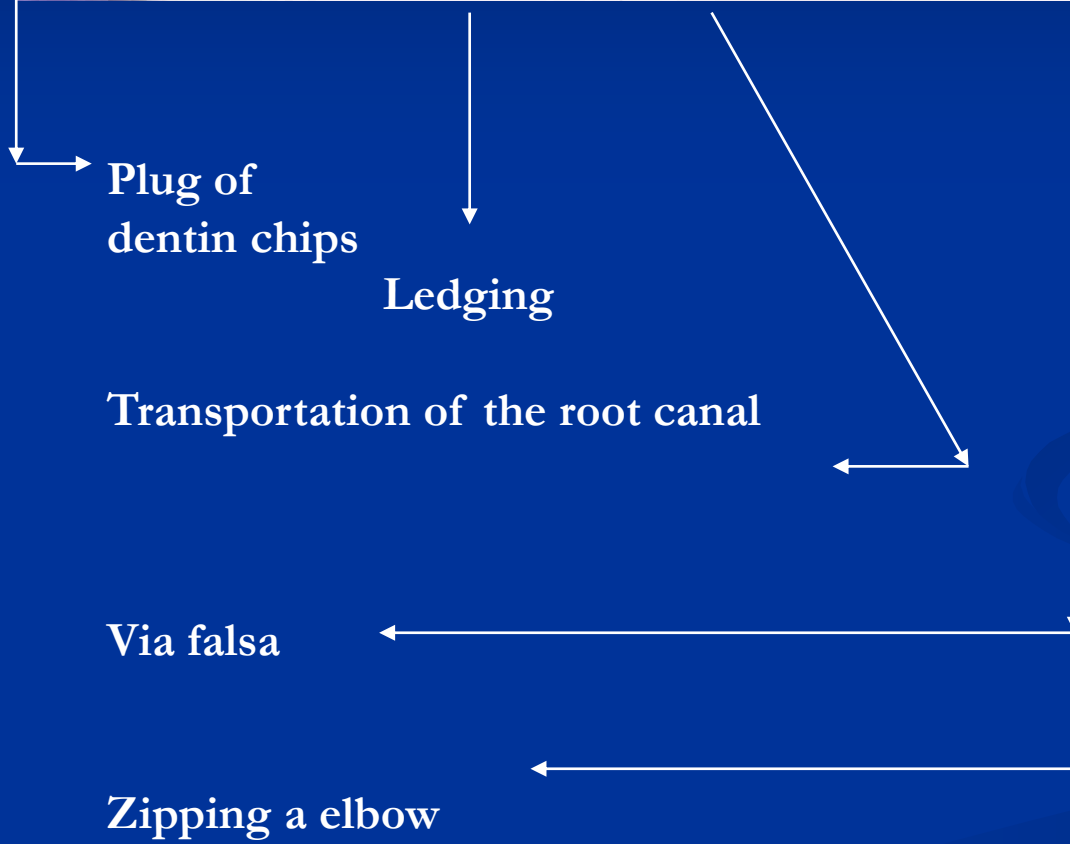


Complications of endodontic treatment

Local

Regional

Systemic



Local complications

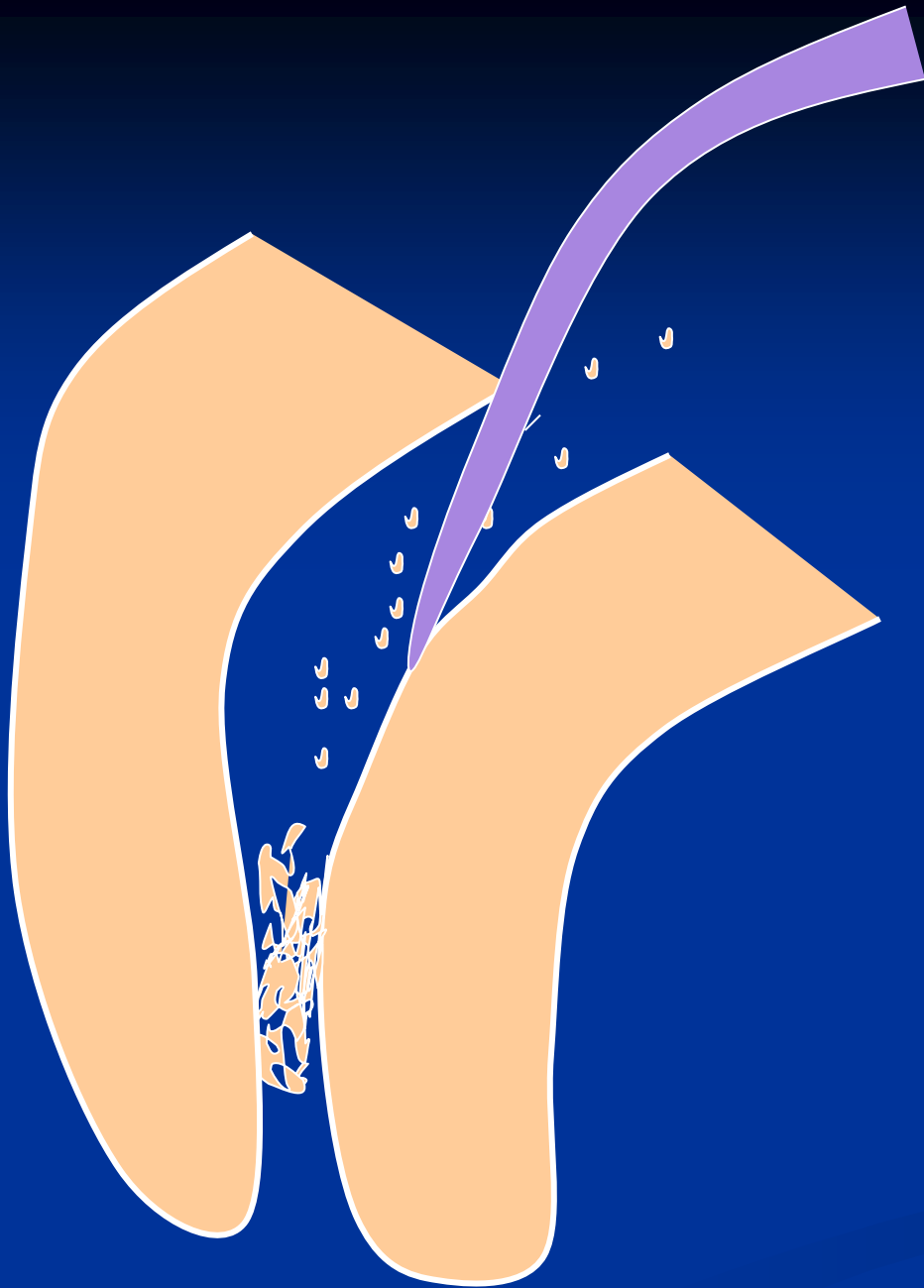
Plug



Reasons

**Insufficient irrigation and
recapitulation**

Loss of the working length



Solution

Repeated careful
instrumentation
with a thin
instrument

*Irrigation is not
effective in this
case!!!*

Ledging



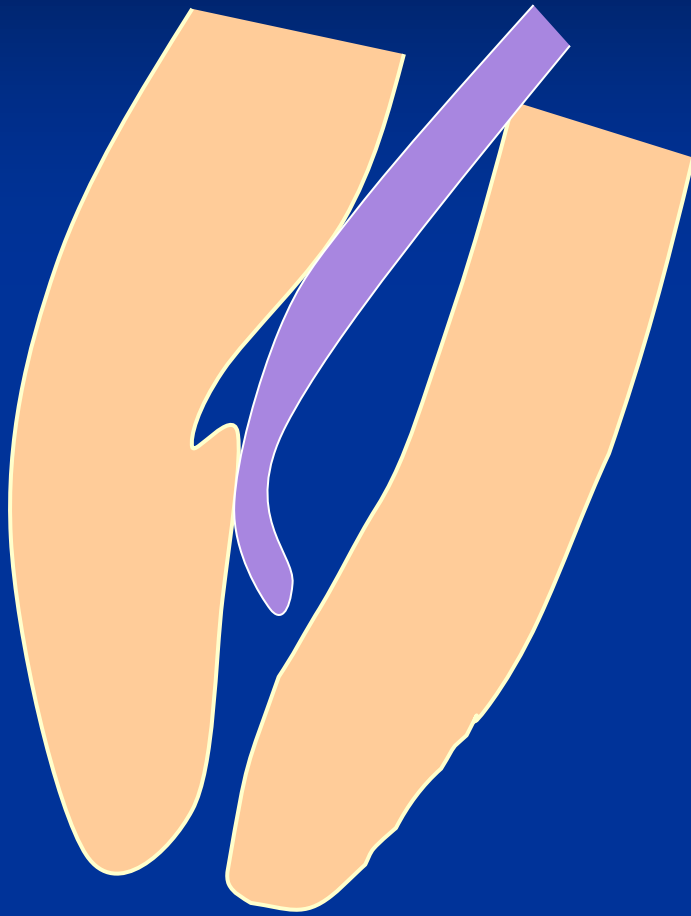
Reasons

The instrument is not bended in advance!

No control of the WL

=

No recapitulation Loss of the WL



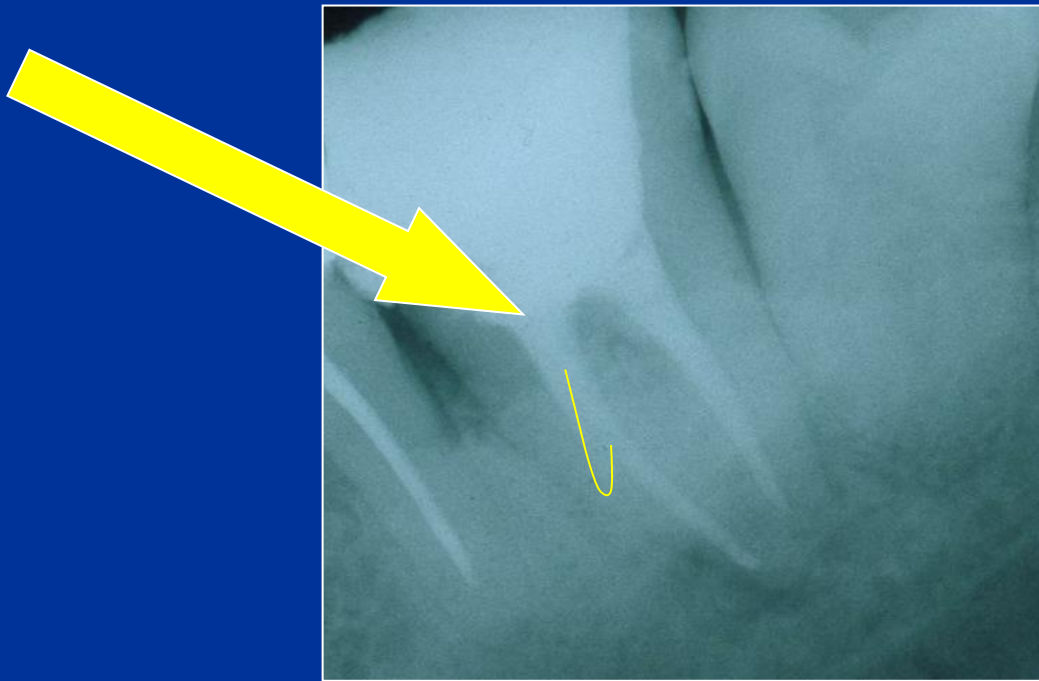
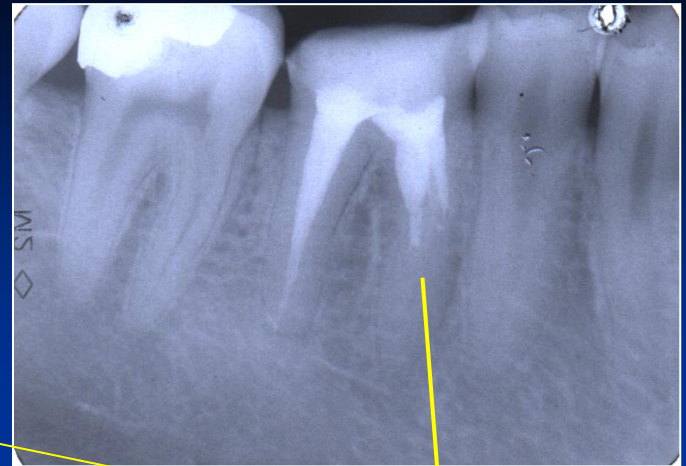
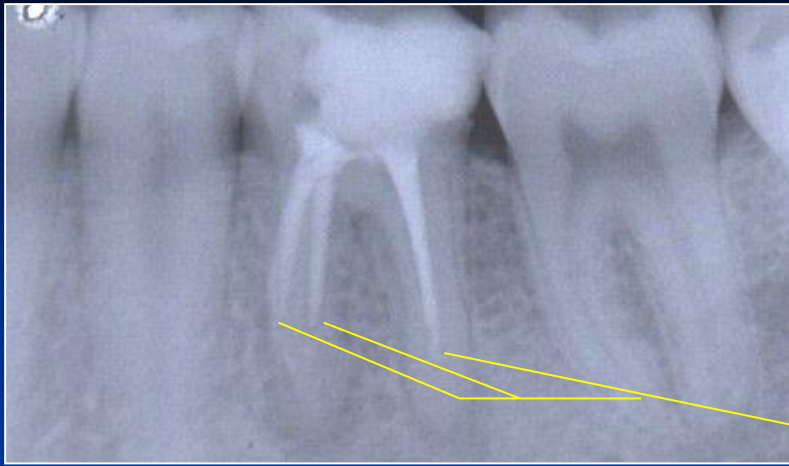
Solution

The instrument must be
bended in advance

Careful but complete rotation

Finishing with the fine filing

No NiTi!!!



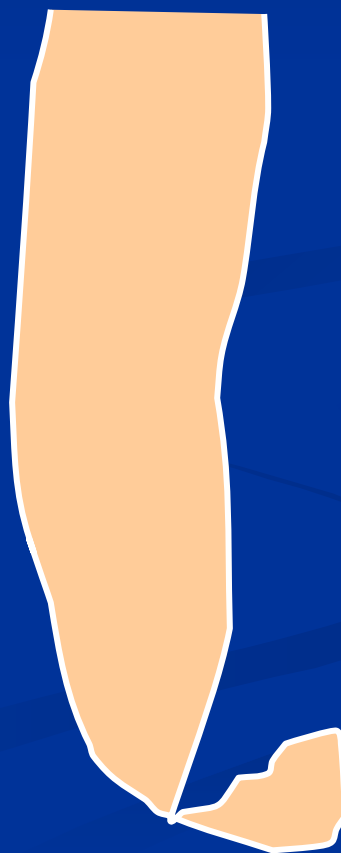
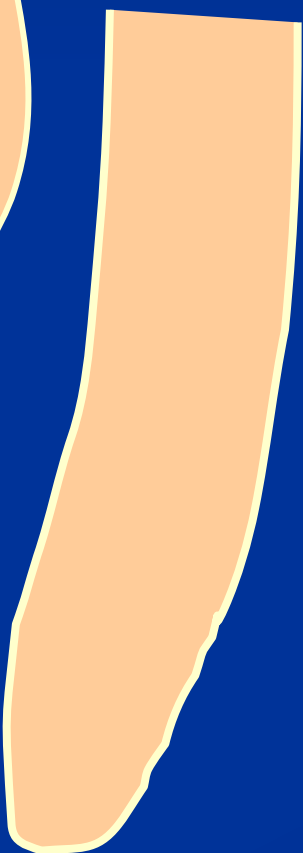
Ledging

Zippering a Elbow



The instrument is not bended in advance!

Rotation in curved canals



Stripping

Reasons

Bad orientation in morphology – no diagnostic x-
Instruments are not bended
Rotary NiTi with a big taper

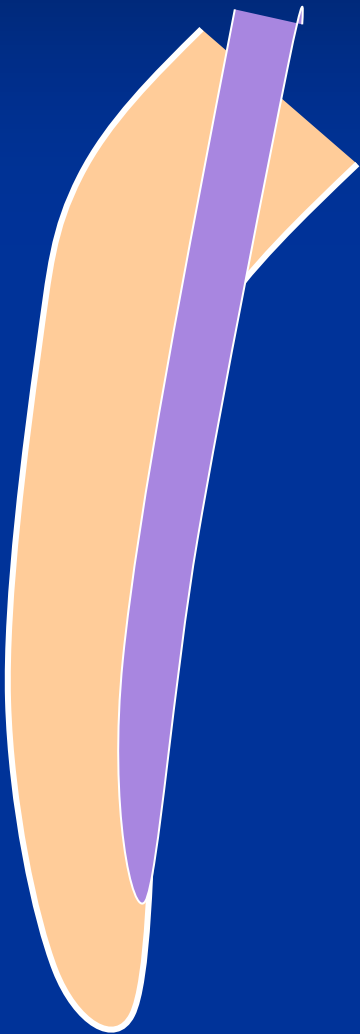
Dangerous zones

Mandibular molars – mesial roots

Premolars, esp. maxillar

Mandibular incisors

Oblast isthmu



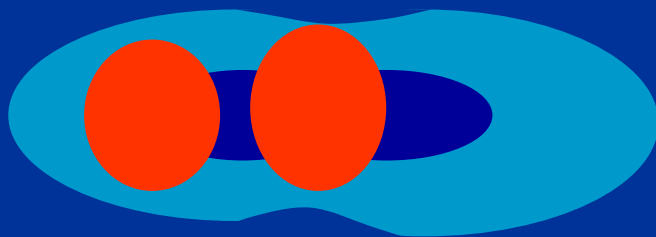
Stripping

Důkladný přehled!

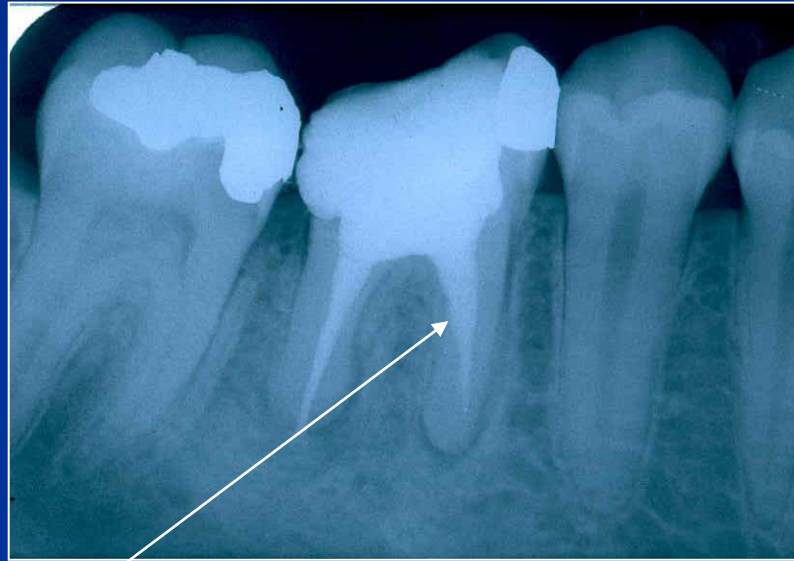
Šetřit oblast isthmu!

Ruční preparace!

Menší kónus NiTi !



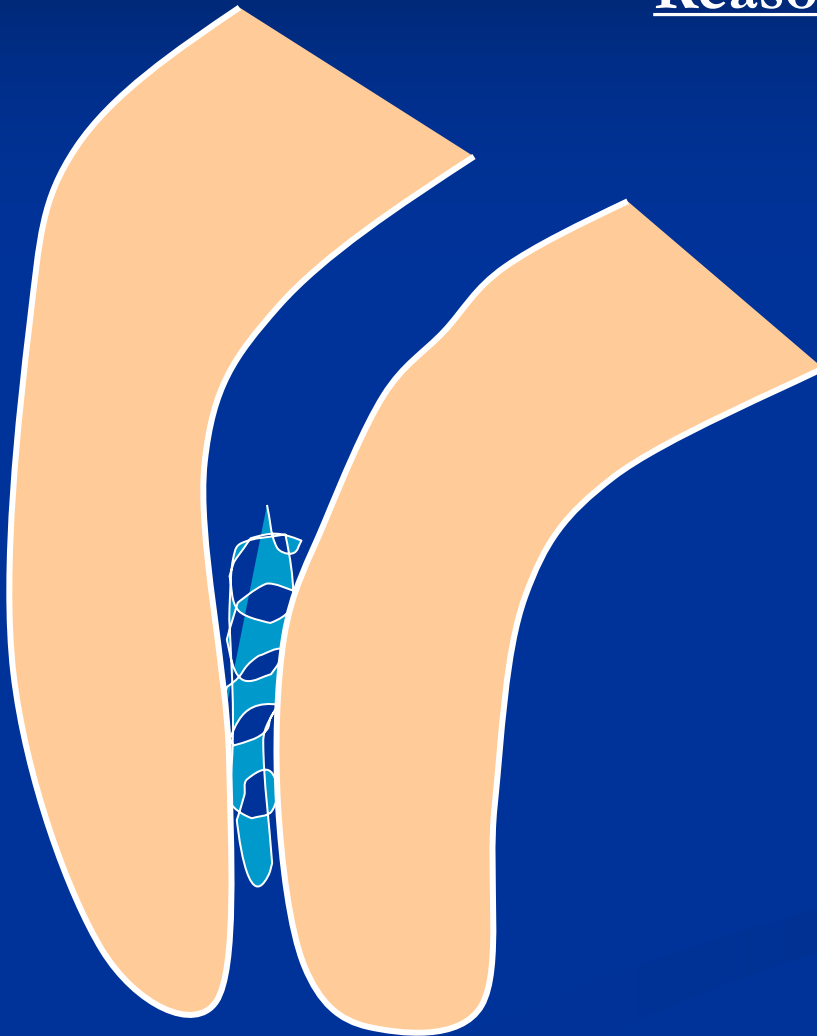
Stripping



Bend the instrument and eventually blunt it !

Fracture of the root canal instrument

Reasons



**Insufficient
coronal flaring**

**Old root canal
instrument**

Aggressive force

**Incorrect
movement of the
root canal
instrument**

Solution

Enlargement of the
root canal till the
instrument

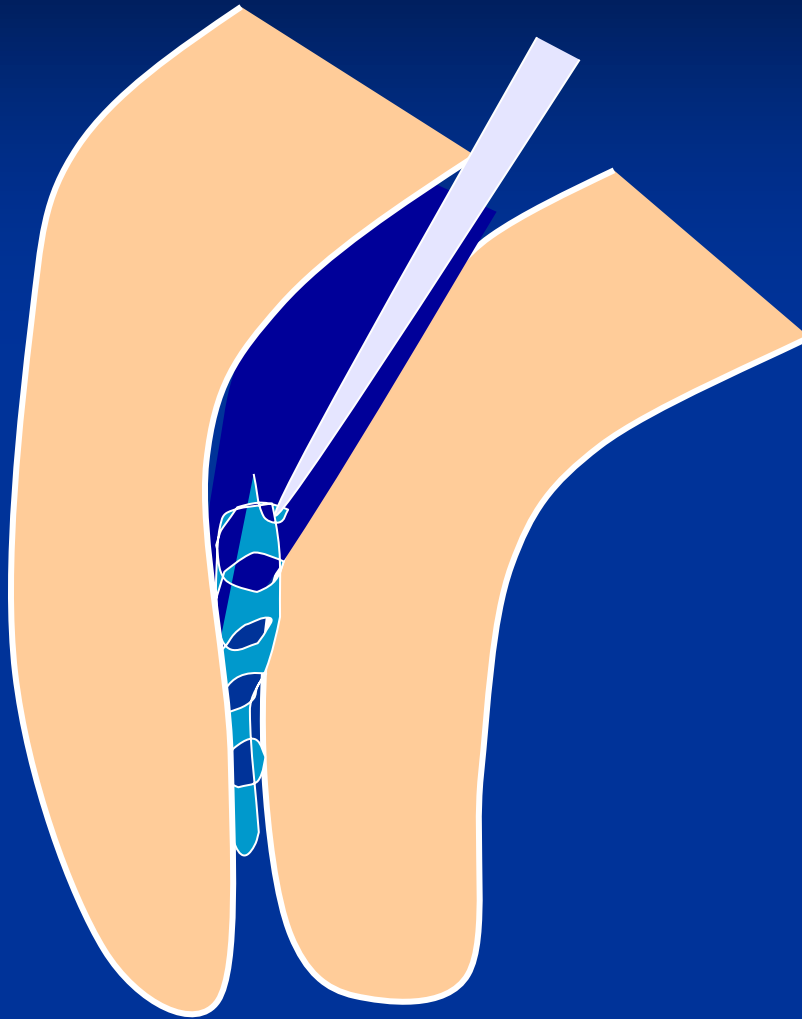
Ultrasound tips

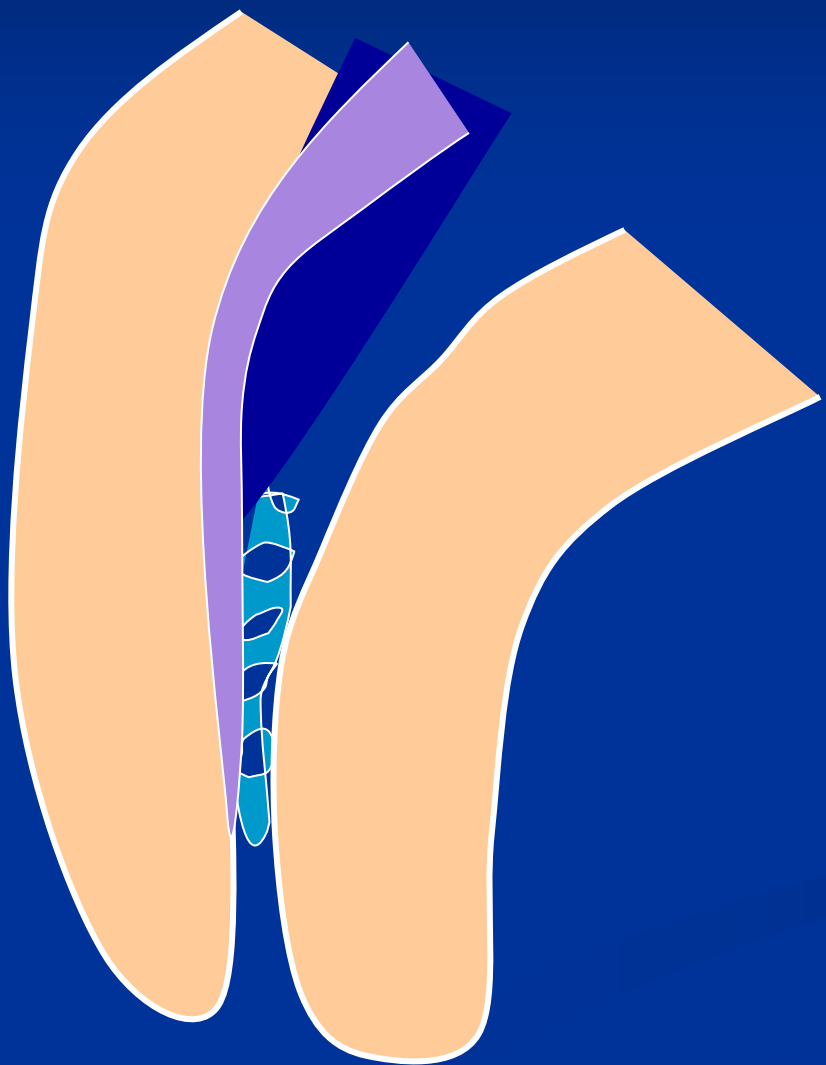
Rotating root canal
instrument – caution!

Bypass

Leaving in

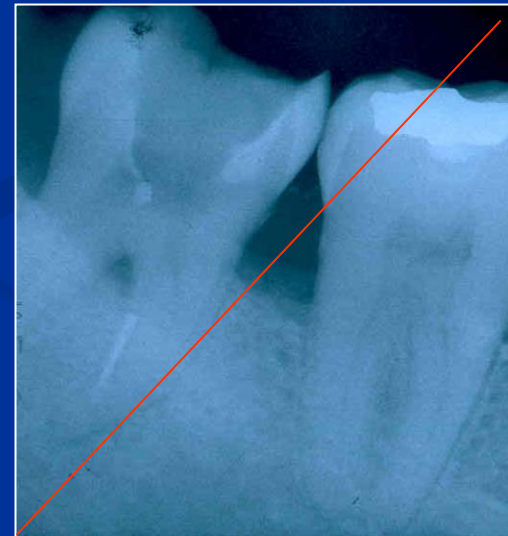
Surgical treatment





Bypass

Fractured instrument

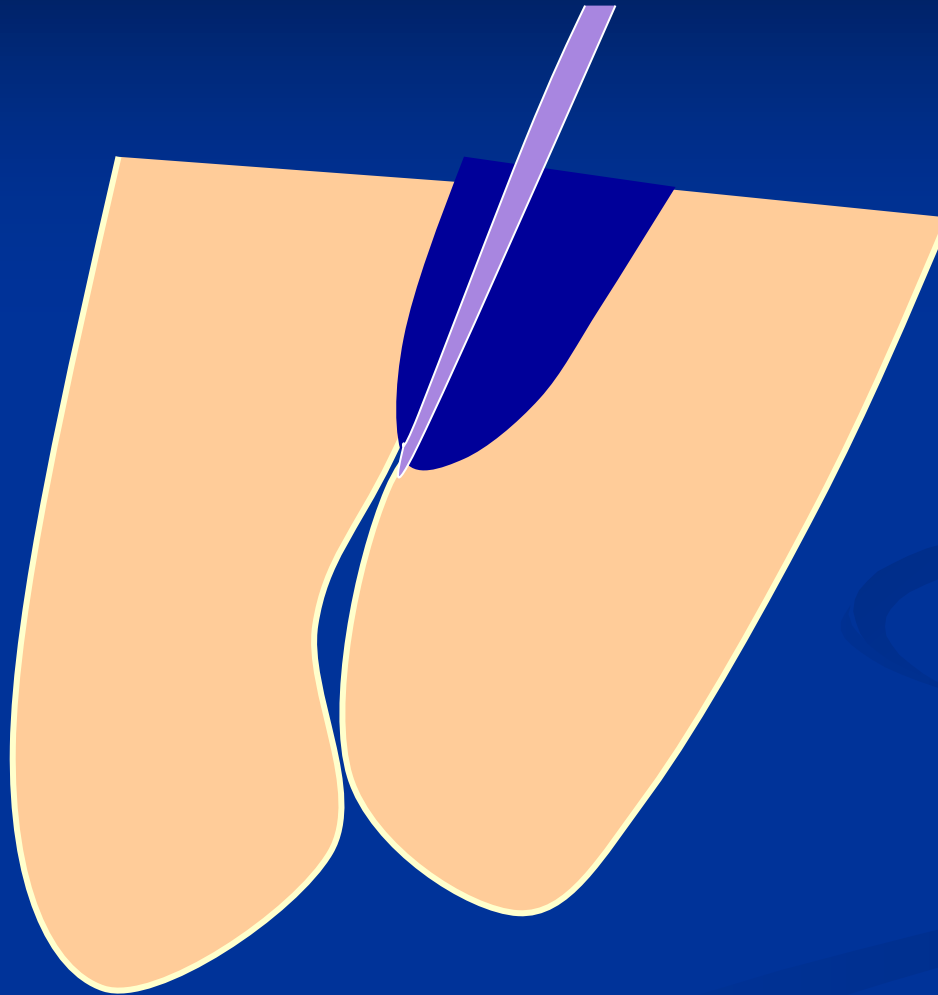


Obliteration



Partial

Obliterate



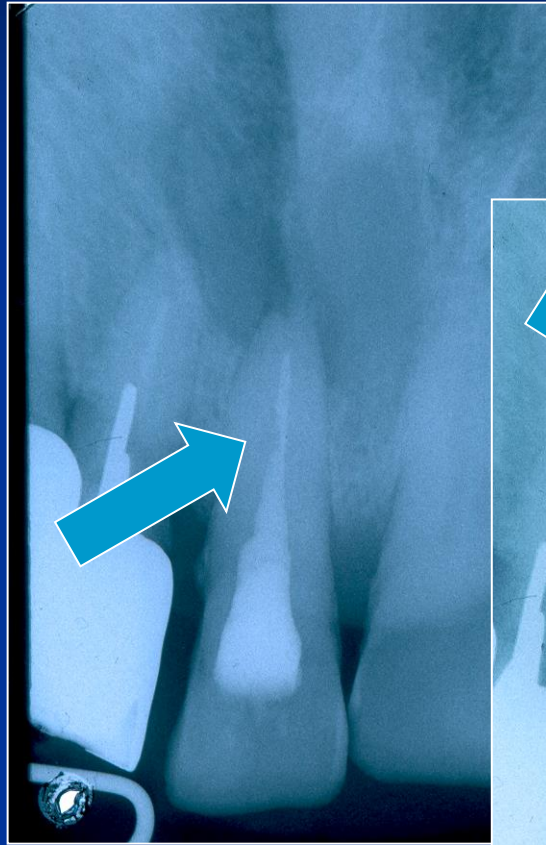
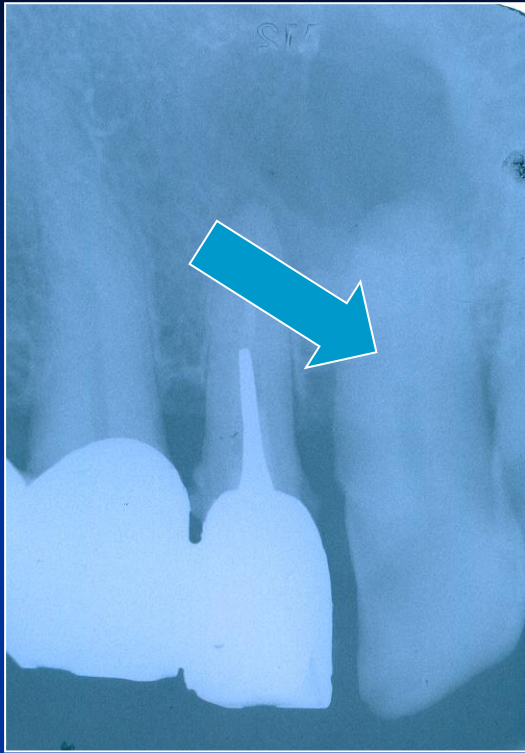
Access!!!

Hand thion
Instrument!

Steel or NiTi

EDTA

Patience

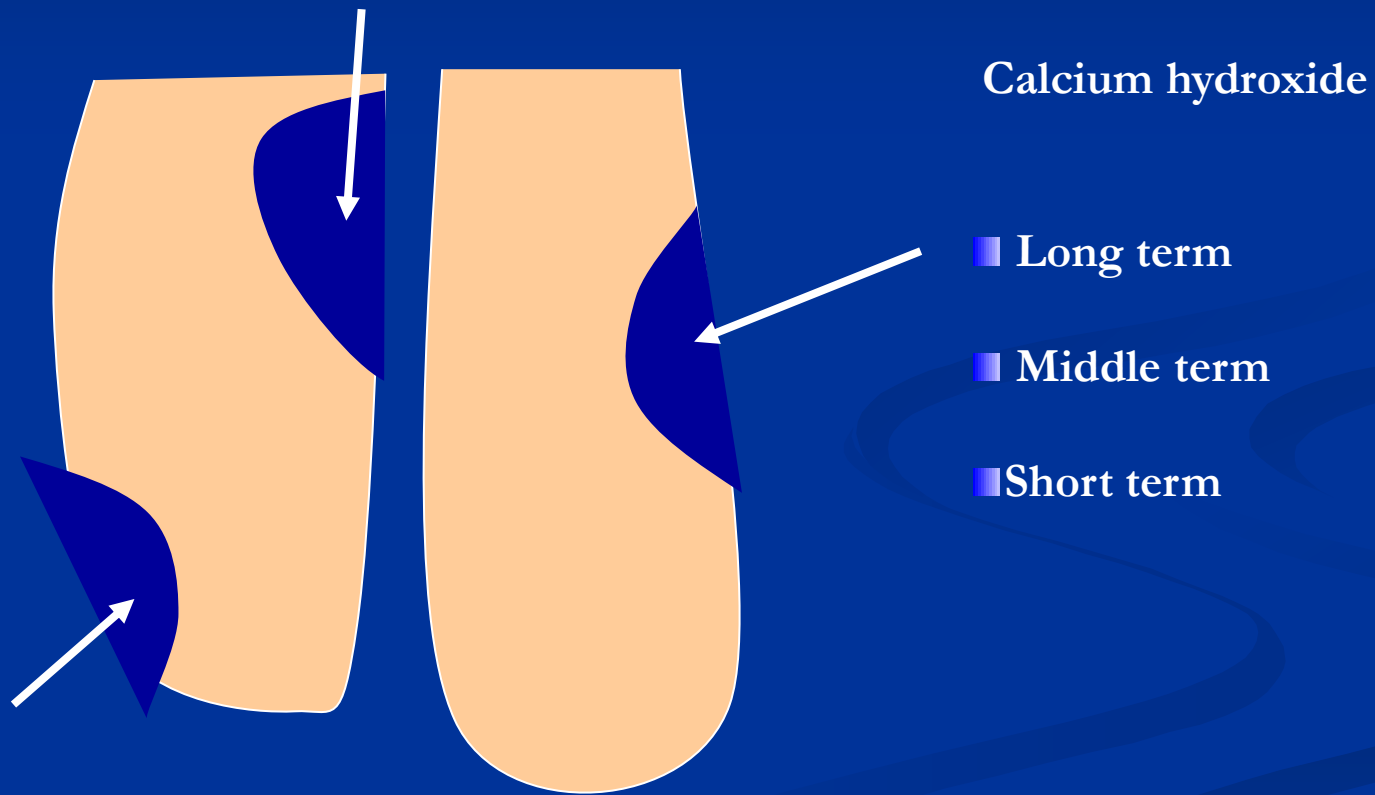


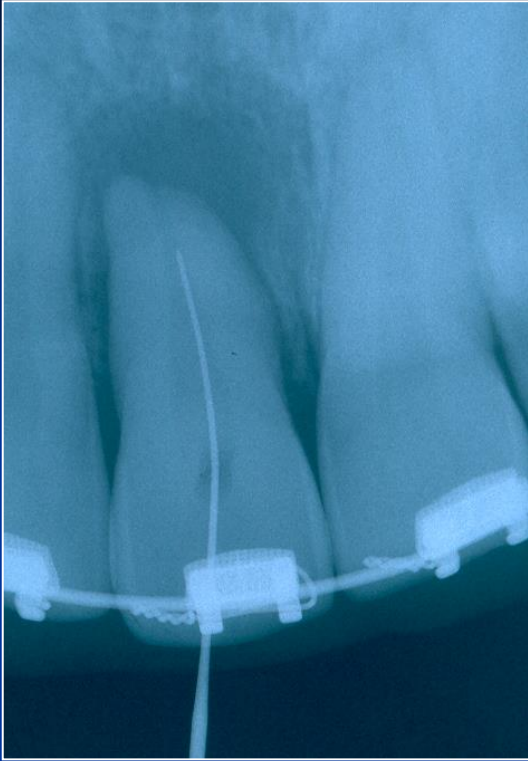
Obliterace

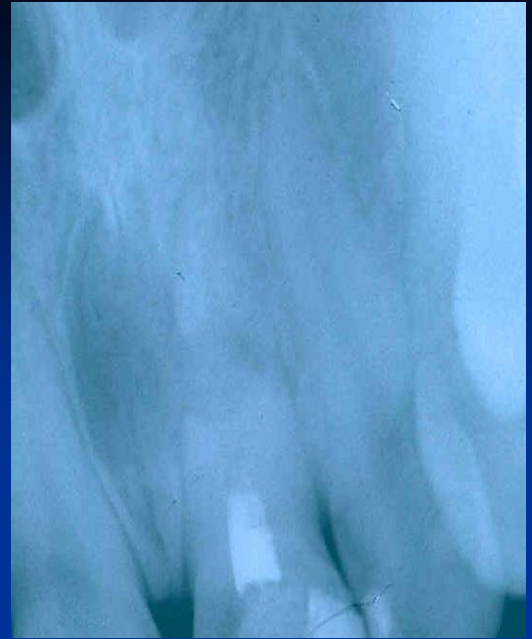
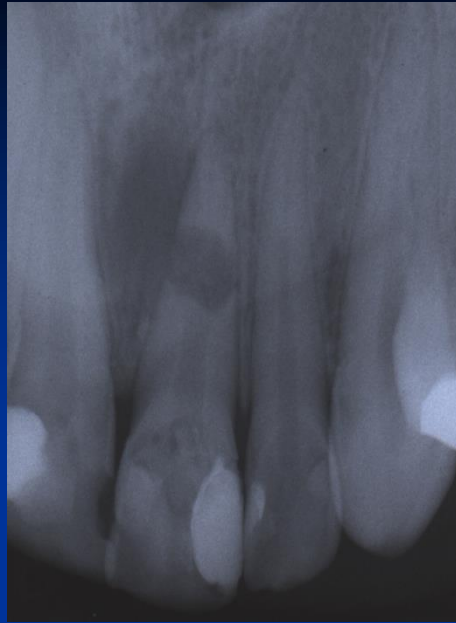


Úplná -
ponechat.

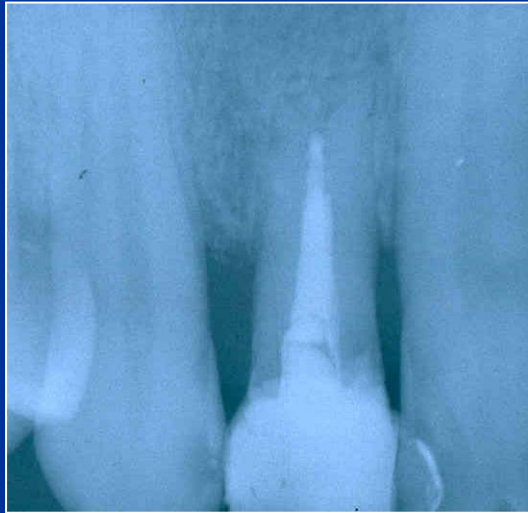
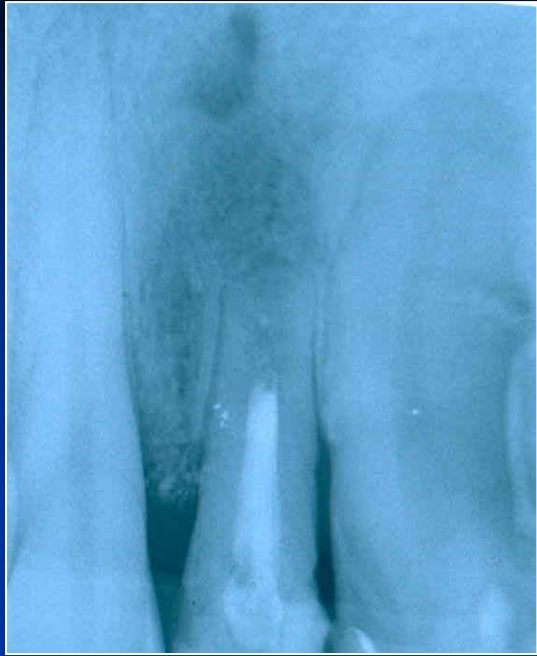
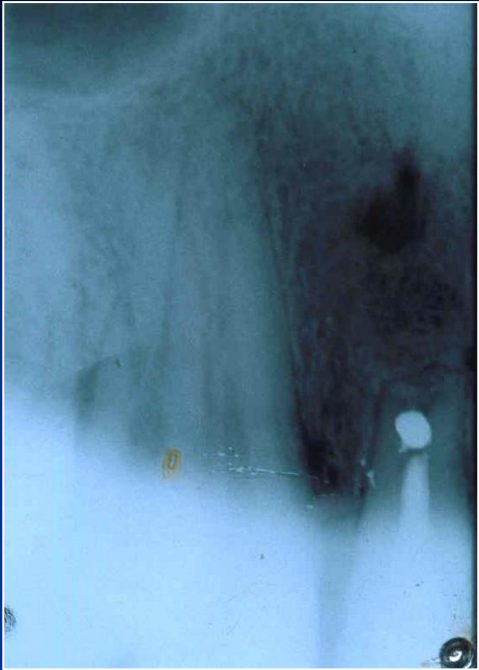
Resorption











Via falsa

- Perforation of the bottom of the pulp chamber or the coronal part of the root canal
- Perforation in the middle part of the root canal
- Apical perforation

LOT 000724 EXP 0507

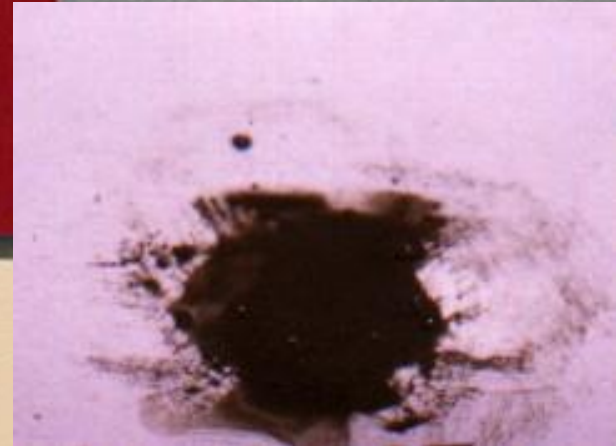
DENTSPLY

PRO ROOT™

*MTA (Mineral Trioxide Aggregate)
Root Canal Repair Material*

Contents: 1 gram (1 treatment)

CE
0120



MTA composition

- Dicalcium silicate
 - Trikalcium silicate
 - Trikalcium aluminate
 - Tetrakalcium aluminate
 - Cuprum sulphate
 - Bismuthum trioxide
- = Portland cement

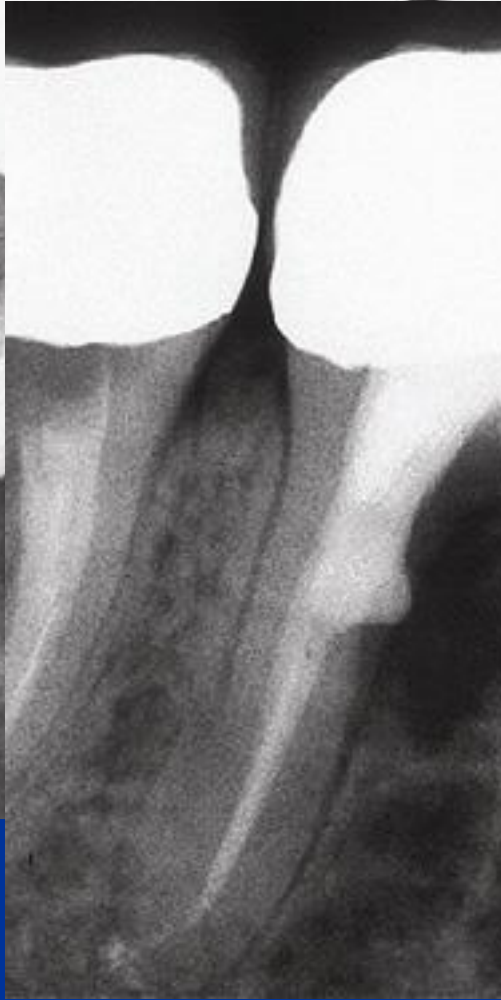


MTA

- Umožňuje hojení – dobrý okrajový uzávěr !
Zabraňuje přístupu mikroorganismům,
umožňuje hojení dřeně a periodoncia tvrdou tkání.







Via falsa - treatment

- No bleeding
- Desinfection
- MTA – moisture (wet cotton pellet)
- Calcium hydroxide
- Filling







Via falsa

- Perforace apikálně

Hydroxid kalcia, kořenová výplň.



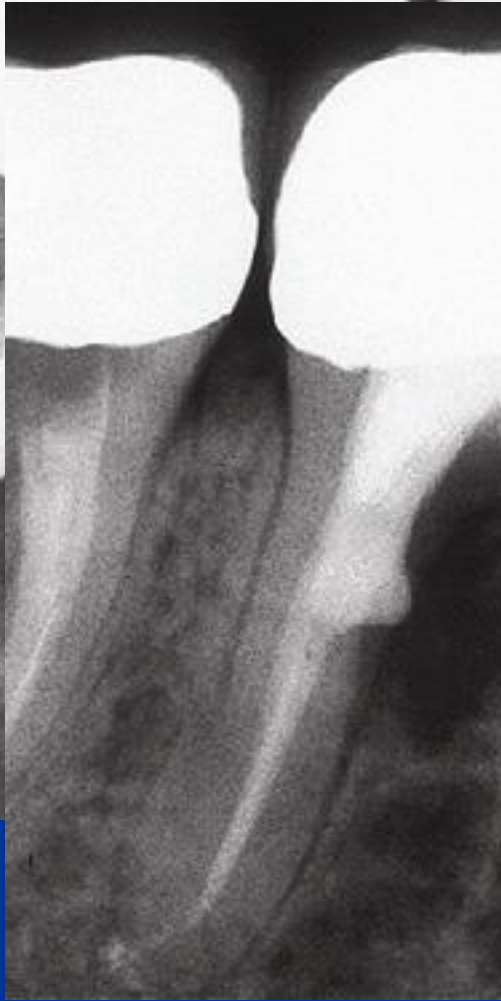
MTA

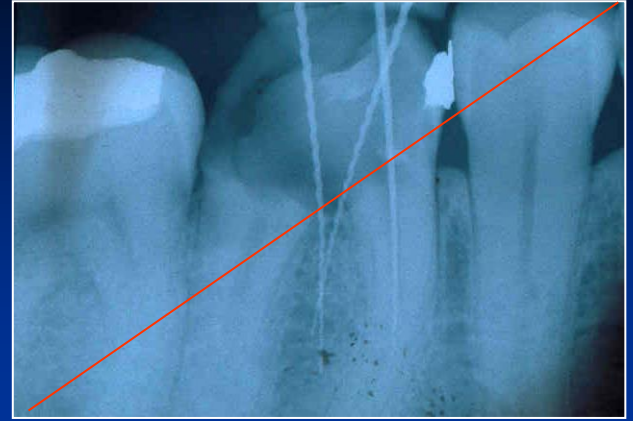
- Umožňuje hojení – dobrý okrajový uzávěr !
Zabraňuje přístupu mikroorganismům,
umožňuje hojení dřeně a periodoncia tvrdou tkání.



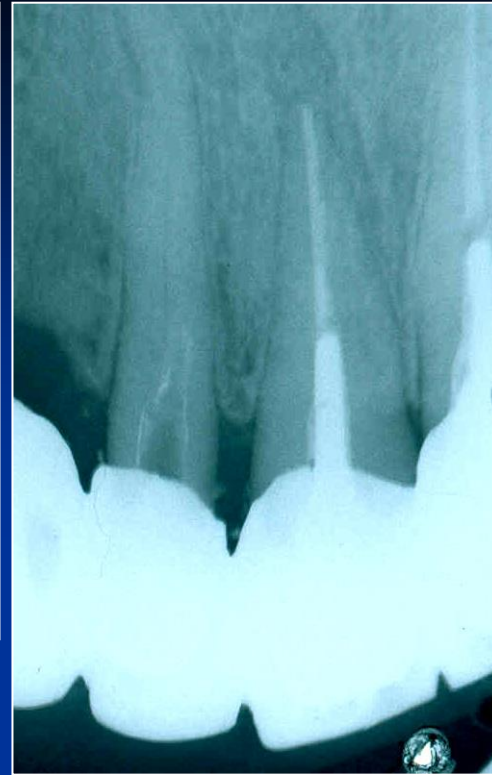
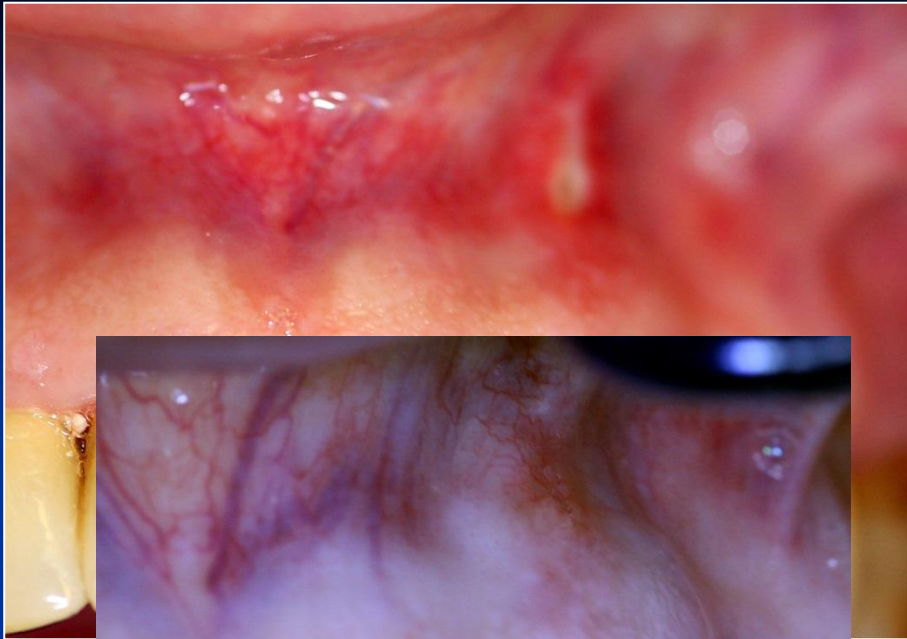


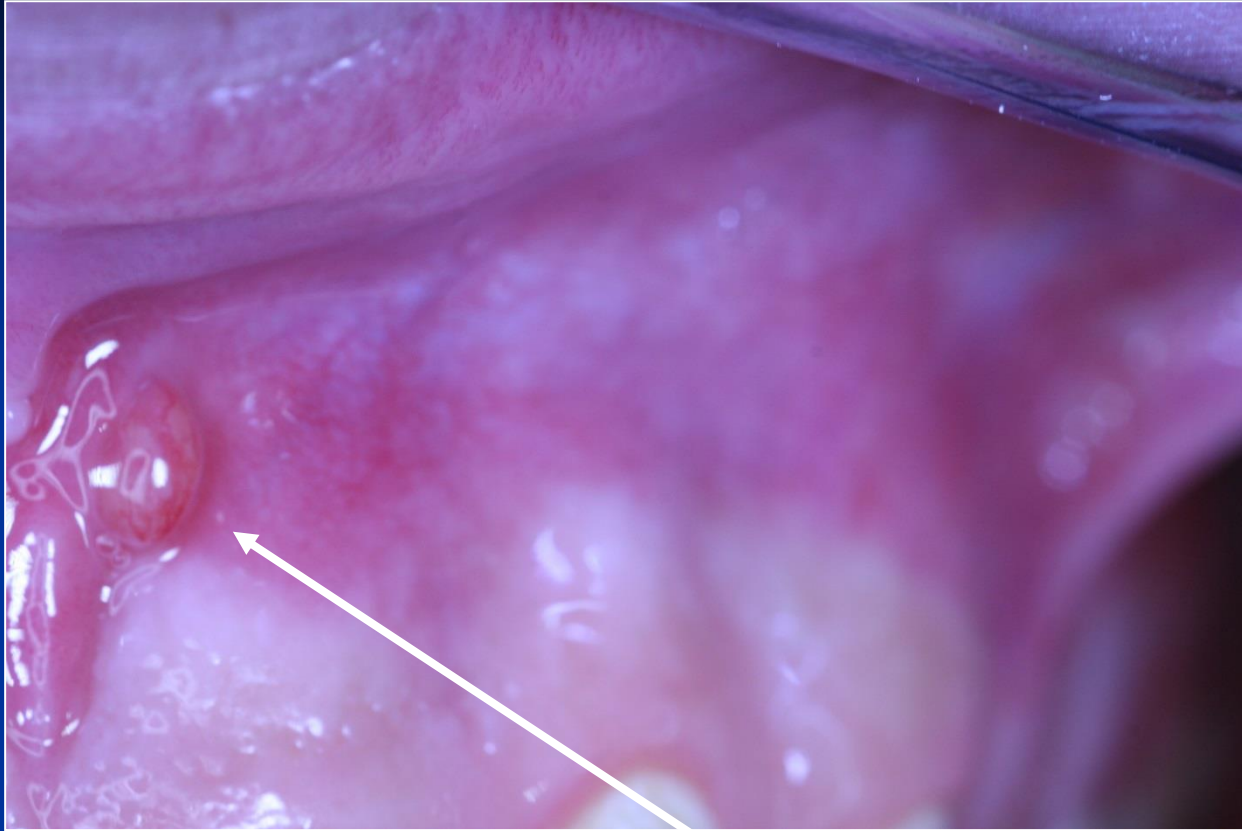
Zdroj: Manuál firmy Maillefer





Regional complications





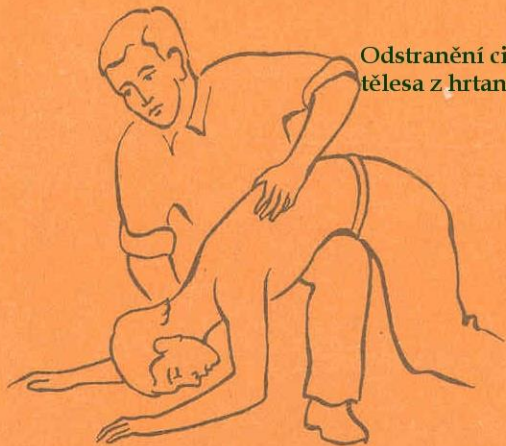
Píštěl

Systemic complications

Systemic complications

- Periostitis
- Inflammation of soft tissues (face, neck)
- Gulp of the instrument (X ray, remnant diet, information)- cough
- Aspiration of the instrument -emesis

**Odstranění cizího
tělesa z hrtanu**



**Stlačení hrudníku
ze stran**



Caution!

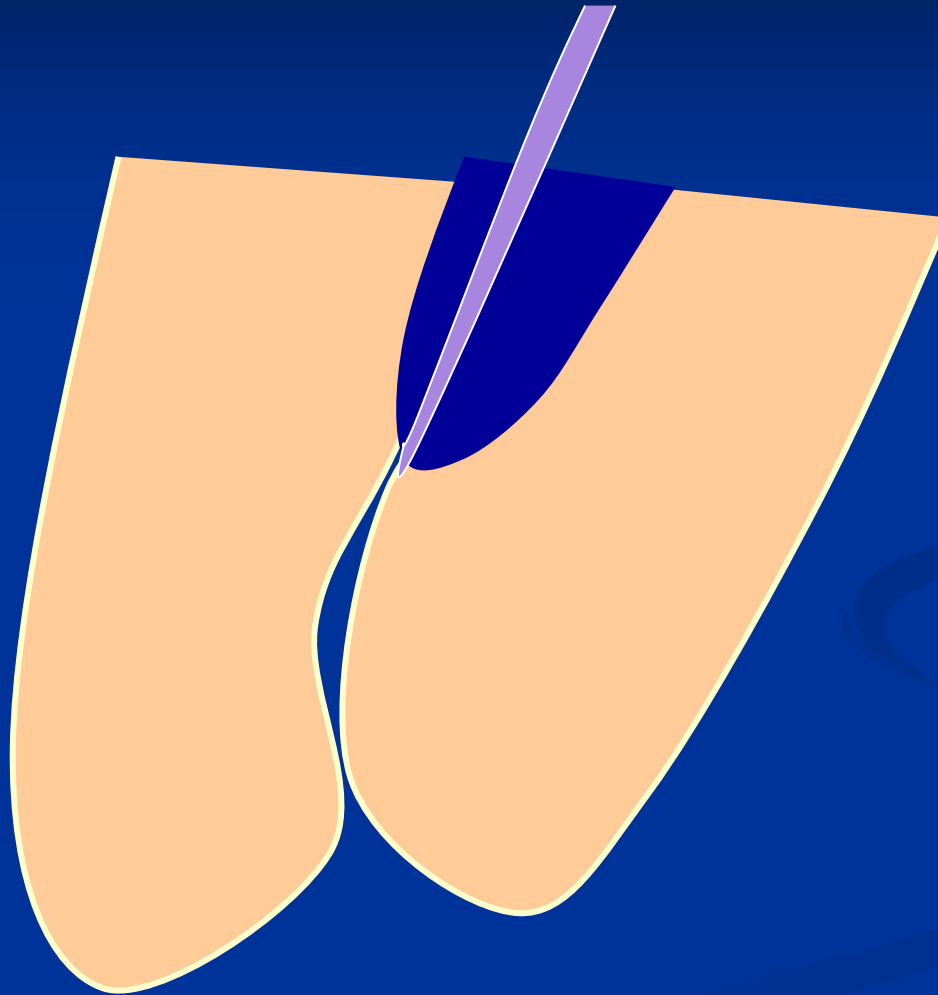
Always find the loss instrument !!!!!

Obliteration



Partial

Obliterate



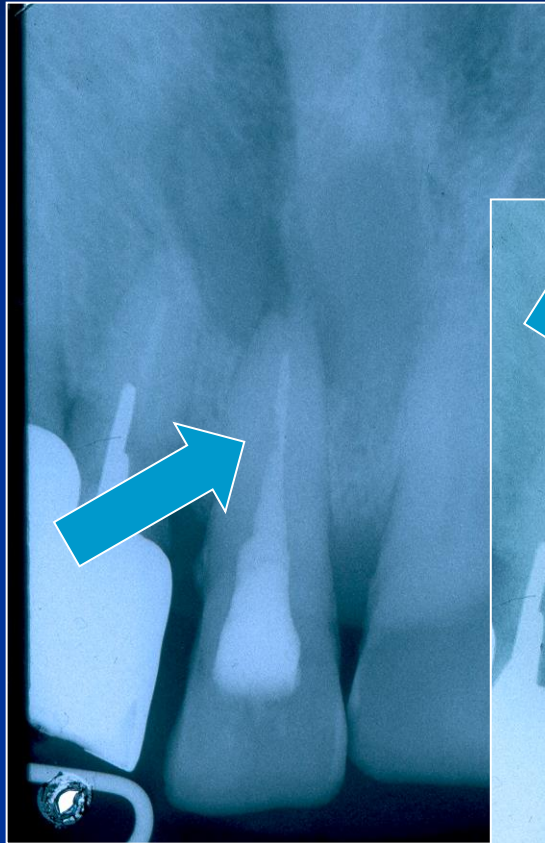
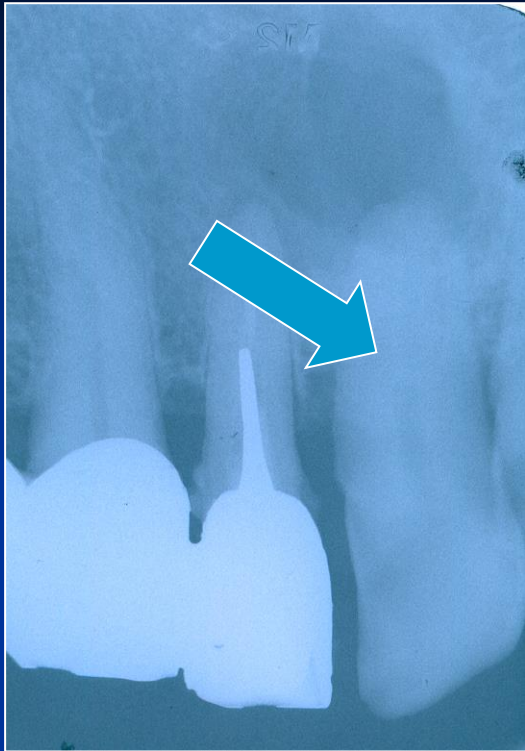
Access!!!

Hand thion
Instrument!

Steel or NiTi

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Obliterace



Úplná -
ponechat.

Resorption

