

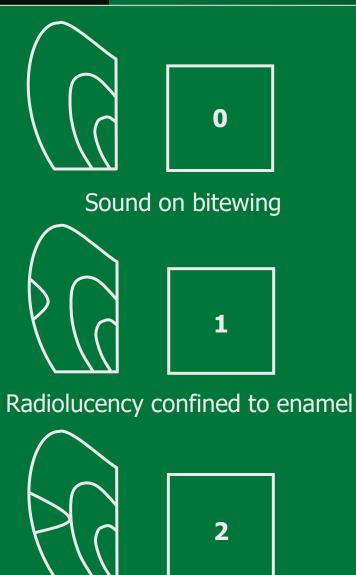
Cariology I

Source:

Fejerskov O., Kidd E., Dental Caries, The Disease and its Clinical Management, Blackwell Munksgaard 2003

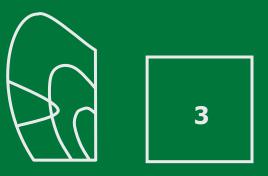






Radiolucency in enamel up to

enamel-dentine junction



Radiolucency in enamel and outer half of dentine

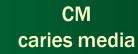


Radiolucency in enamel and reaching to inner half of dentine

Diagrammatic representations of caries on bitewing radiographs.



CS caries superficialis



caries pulpae proxima caries in ½ of dentine thickness no changes in the dental pulp no pain

CPP I







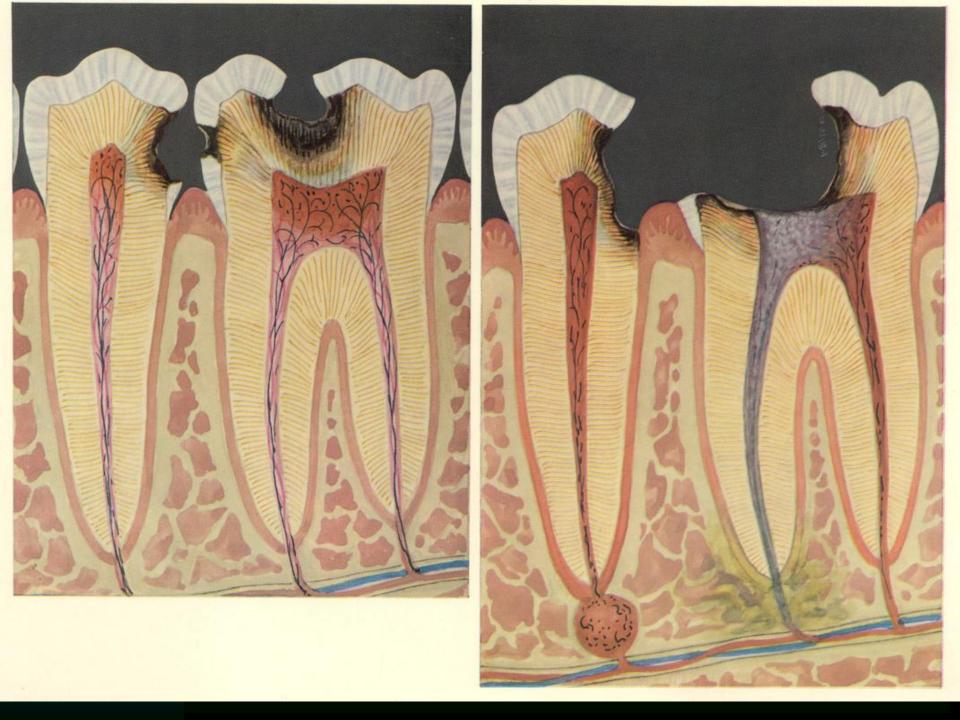
CPP II
caries pulpae proxima
dentin – continuous,
but thin
microbs present
pain on stimuli, no
spontaneous

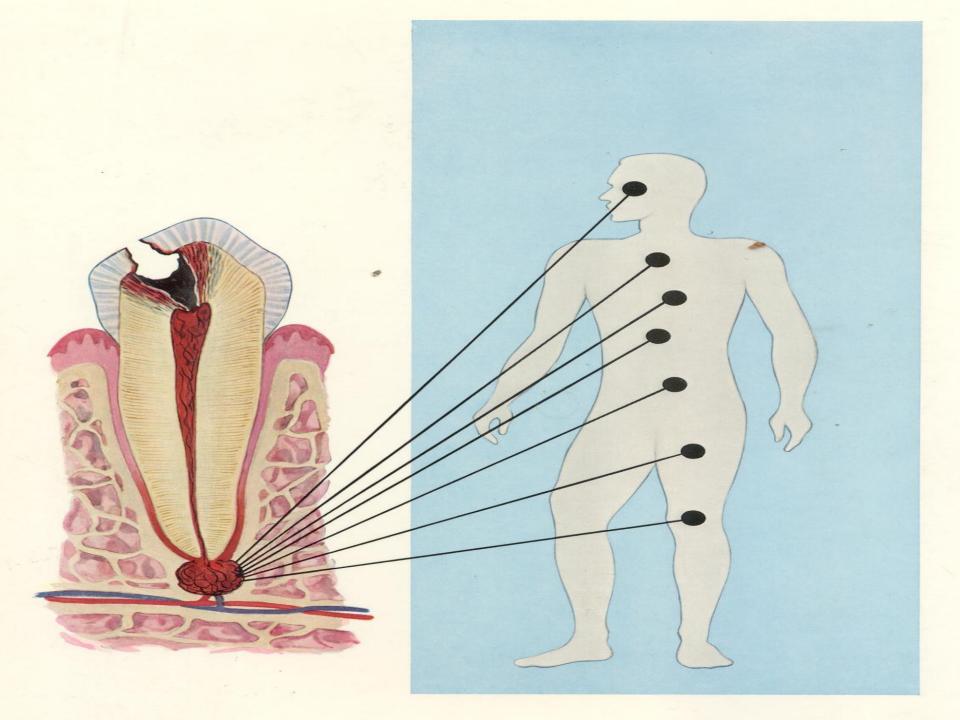




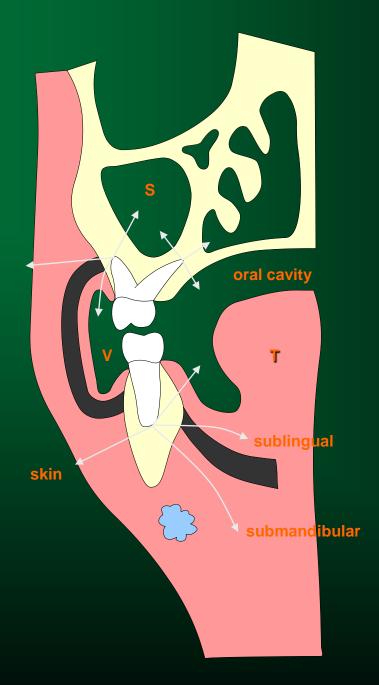
Pulp exposure
pain - spontaneous
Inflammation of the dental
pulp
(pulpitis)











This coronal section shows the directions that may be taken by pus from an apical abscess.

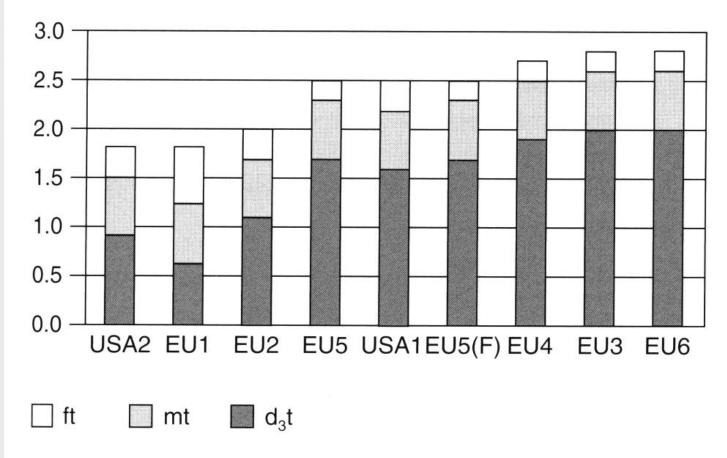


Figure 9.3 Number of decayed, missing, and filled teeth recorded in the same 10 6-year-old children by nine dentists from five countries using their own standard methodology and criteria at the d_3 threshold (Pitts *et al.*, 2000).



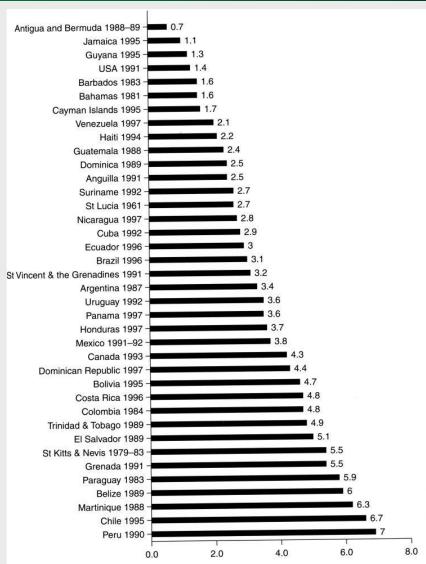


Figure 9.6 Mean caries prevalence results for children aged 12 years from different countries listed in the World Health Organization Global Oral Health Databank in the American (AMRO) region, 1979–1997.



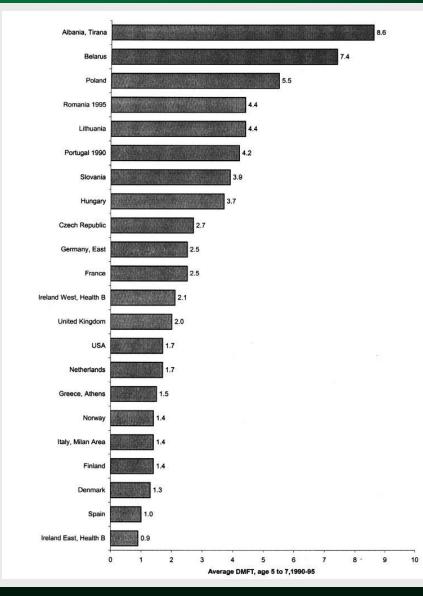


Figure 9.7 Caries prevalence in Europe: average d₃mft at the age of 5–7 years (1991–1995 if not indicated otherwise). From Marthaler (1996).

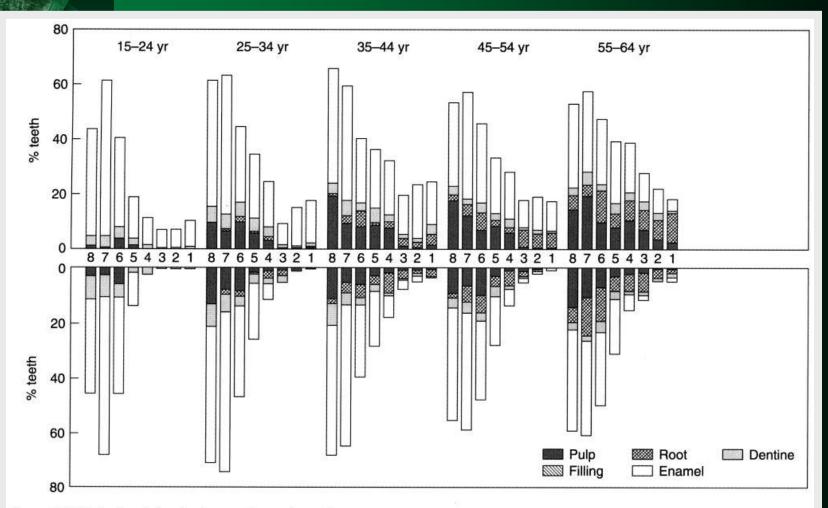


Figure 9.9 Distribution of dental caries according to the tooth types in various age groups in a rural Kenyan population. From Manji et al. (1991).

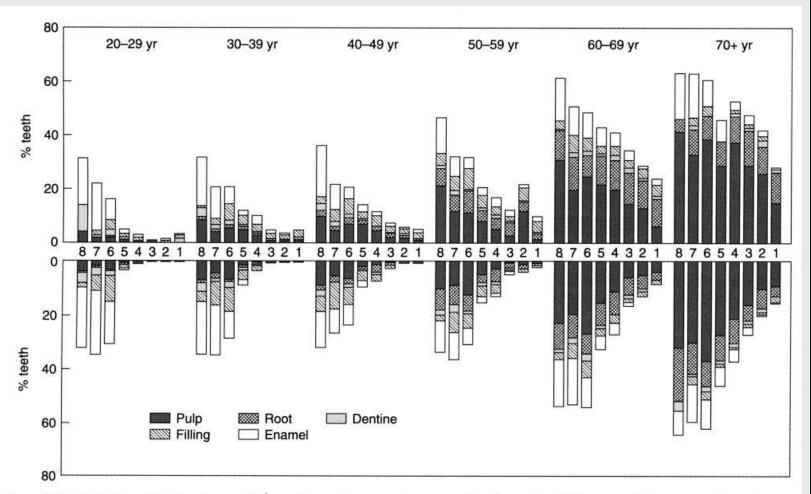


Figure 9.10 Distribution of dental caries according to various tooth types and age groups in urban and rural Chinese populations, presented together. From Manji *et al.* (1991).



Caries of dentine

Conical lesion
Base-towards the surface of the tooth
Apex-towards the dental pulp

7 zones

Zone 1 – tertiary dentine formation

Zone 2 – dentine is normal-in the dental pulp-changes in odontoblasts(degeneration)

Zone 3 – sclerotic dentine (translucent dentine)

Zone 4 – dead tracts

Zone 5 – demineralized dentine (zone of demineralization)

Zone 6 – zone of bacterial invasion

Zone 7 – area of totally decomposed dentine



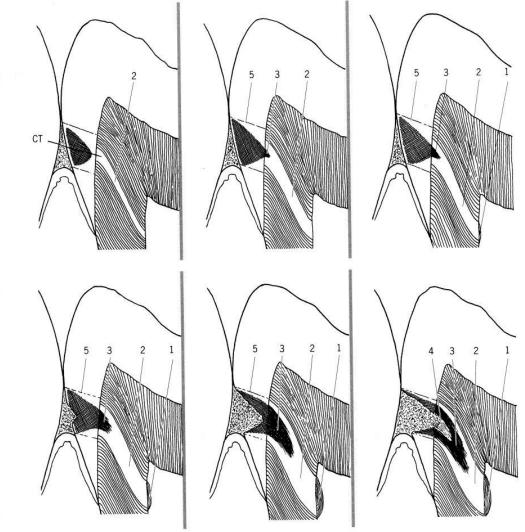


Figure 5.32 Schematic illustration of progressive stages of lesion formation. 1: Reactive dentin; 2: sclerotic reaction or translucent (transparent) zone; 3: zone of demineralization; 4: zone of bacterial invasion and destruction; 5: indication of enamel rod direction. (Modified from Bjørndal, 1911.)



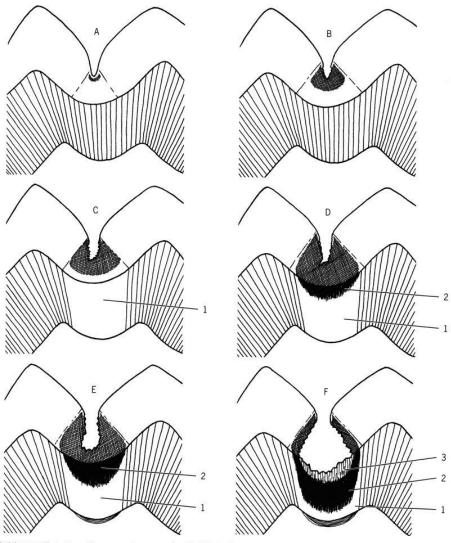
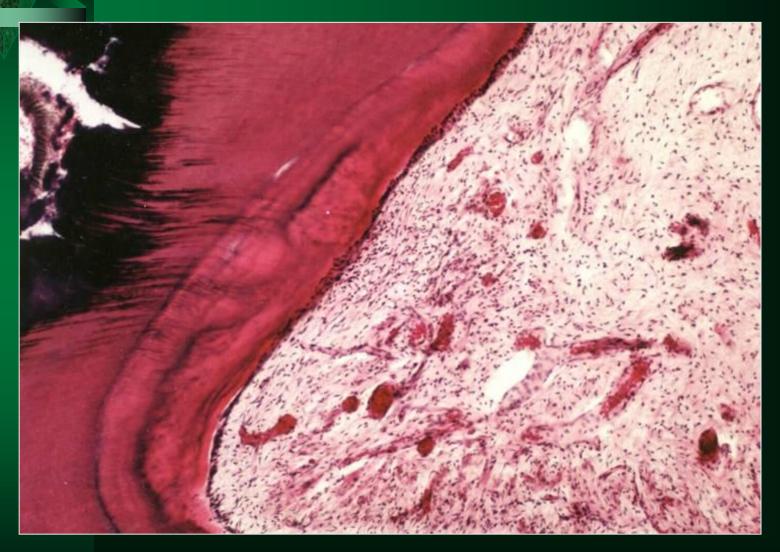


Figure 5.33 Schematic illustration of the progressive stages of occlusal lesion formation in an occlusal fossa. 1: Sclerotic reaction or translucent (transparent zone; 2: zone of demineralization; 3: zone of bacterial invasion and destruction. (Modified from Ekstrand *et al.*, 1991.)



Composition of the bacterial community in carious dentin

Bacterial genera and groups	Necrotic dentin	Decalcified dentin
Streptococcus	+++	+to++
Mutans, streptococcii	+++	+
Anaerobic gram +coccii	+++	+to++
Actinomyces	++to+++	+to++
Lactobacillus	+++	+++
Eubacterium	+++	+++
Propionibacterium	+++	+++
Arachnia(Propionibacterium)	+++	+++
Bifidobacterium	+++	+++
Veillonella	++to+++	+
Prevotella	+	+
Bacteroides	+	+
Fusobacterium	+	+
Motile gram negative rods	+	+



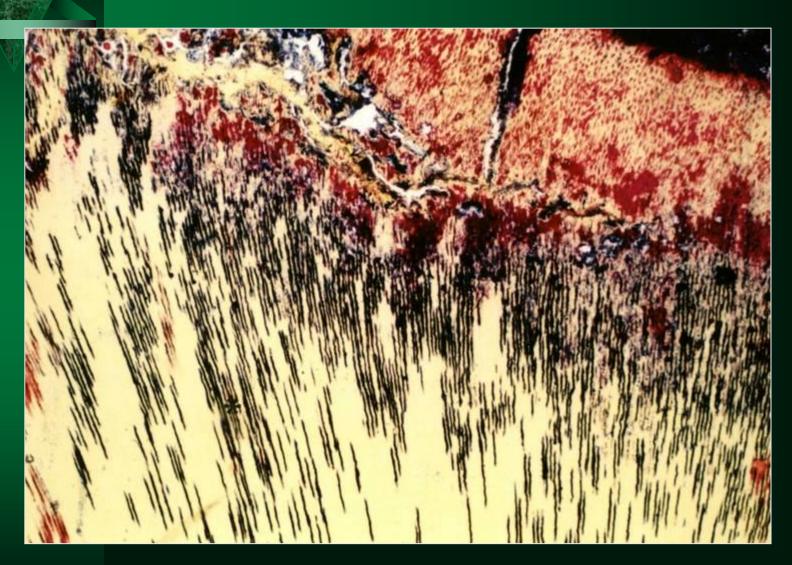
Light microscopy –dental pulp



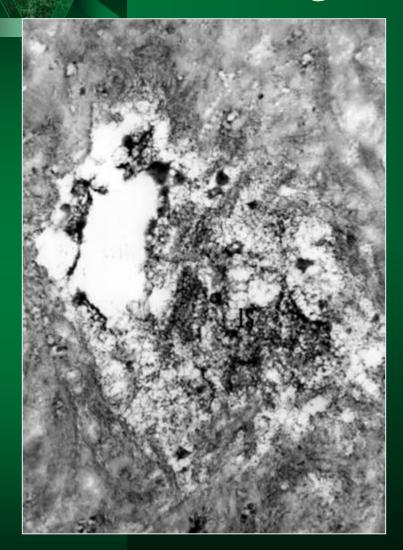


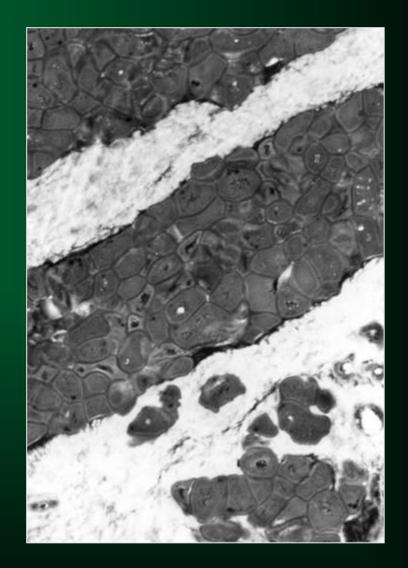
Dental pulp – penetration of microbs



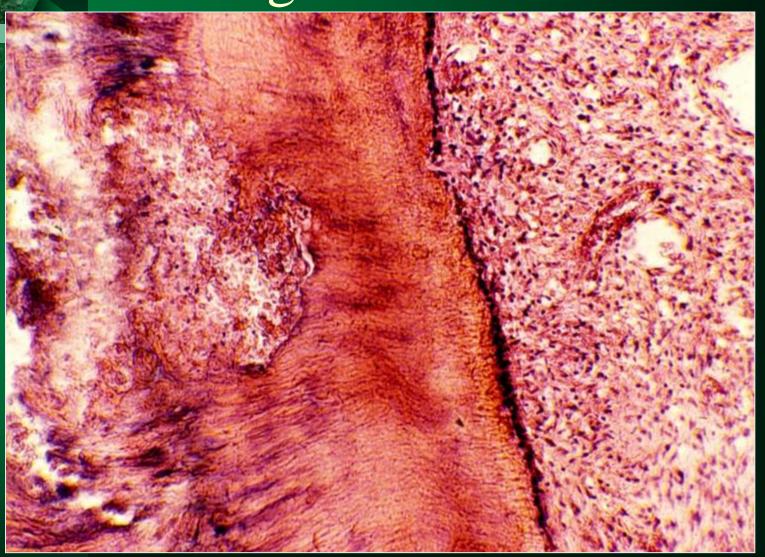


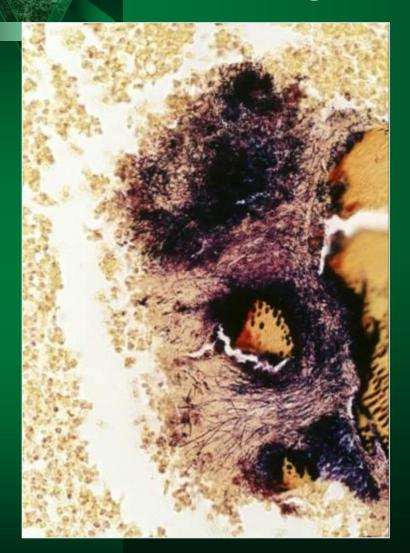
Brown-Brenn staining

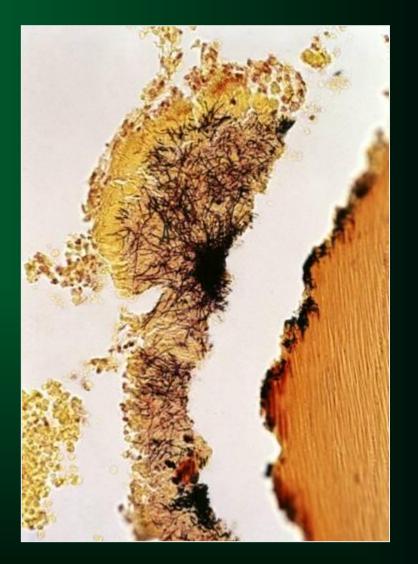




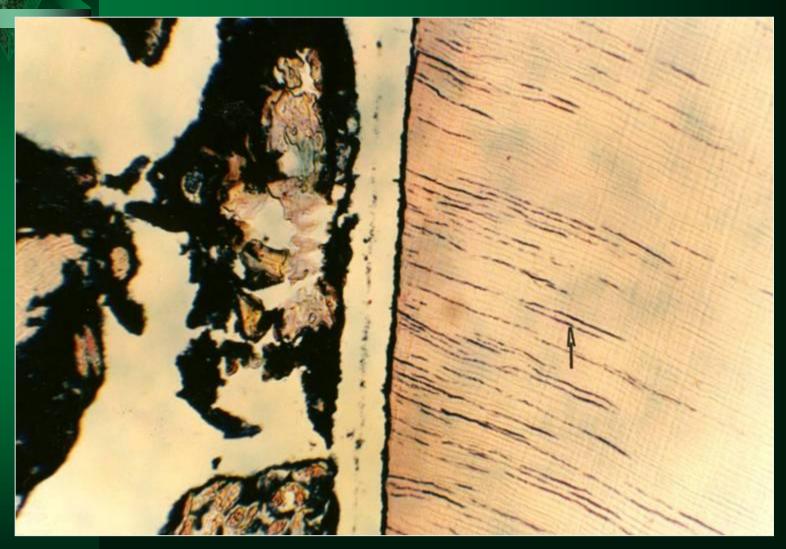
TEM- penetration of microbs, defense, obturation of tubules







Exposed dental pulp – actinomycosis



microbes in dentine tubules



