

YOUR GUIDE TO

Treatment Options for the Diseased Tooth



FOR MORE INFORMATION

If you would like further information about endodontic treatment from a specialist, your endodontist will be happy to talk with you:

SAMPLE NOT

To find a root canal specialist in your area, ask your dentist for a referral, or contact the American Association of Endodontists directly at 800/872-3636 (North America) or 312/266-7255 (International) or info@aae.org, or visit www.aae.org.

AAE MISSION

The American Association of Endodontists is dedicated to excellence in the art and science of endodontics and to the highest standard of patient care. The Association inspires its members to pursue professional advancement and personal fulfillment through education, research, advocacy, leadership, communication and service.



This brochure explains the wide range of treatment options available for compromised teeth, including endodontic procedures, retreatment, endodontic surgery and implants.



American Association
of Endodontists

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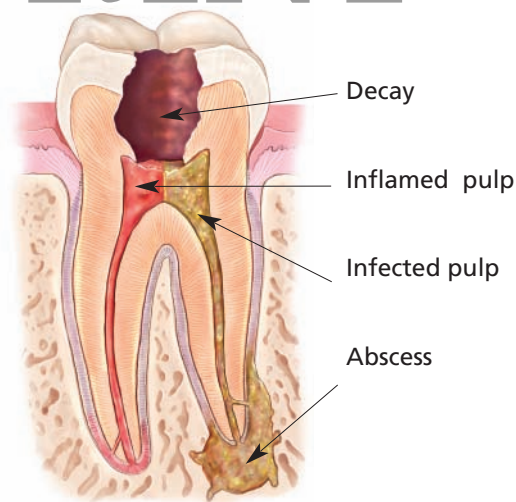
YOUR GUIDE TO Treatment Options for the Diseased Tooth

You're probably reading this booklet because your dentist or endodontist has said you have a diseased or injured tooth. If so, rest assured that in the majority of cases, your tooth can be saved with endodontic treatment. Sometimes, however, a tooth cannot be saved, and will need to be extracted and replaced with a prosthetic, or artificial, tooth. This pamphlet explains the treatment options available to you, so that you can discuss them with your dentist or endodontist and make the best choice for your needs.

WHAT'S HAPPENING TO YOUR TOOTH?

To understand treatment options for your diseased tooth, it helps to know about the anatomy of the tooth. Inside the tooth, under the white enamel and a hard layer called the dentin, is a soft tissue called the pulp. The pulp contains blood vessels, nerves and connective tissue, and helps to grow the root of your tooth during development. In a fully developed tooth, the tooth can survive without the pulp because the tooth continues to be nourished by the tissues surrounding it.

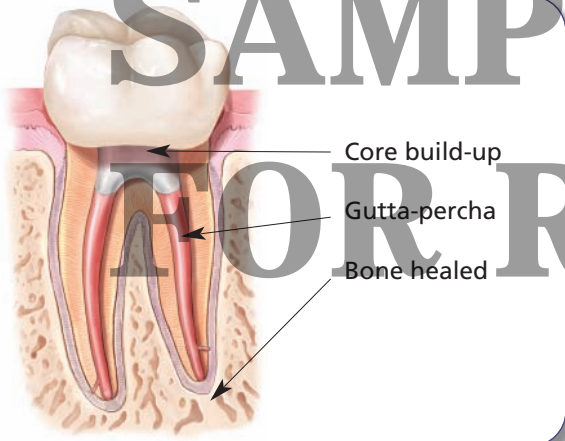
Endodontic treatment—also known as a root canal—treats the inside of the tooth. Endodontic treatment is necessary when the pulp becomes inflamed or infected. The inflammation or infection can have a variety of causes: deep decay, repeated dental procedures on the tooth, faulty crowns, or a crack or chip in the tooth. In addition, trauma to a tooth may cause pulp damage even if the tooth has no visible chips or cracks. If pulp inflammation or infection is left untreated, it can cause pain or lead to an abscess.



HOW DOES ENDODONTIC TREATMENT SAVE THE TOOTH?

During root canal treatment, the inflamed or infected pulp is removed and the inside of the tooth is carefully cleaned and disinfected, then filled and sealed with a rubber-like material called "gutta-percha." Afterwards, the tooth is restored with a crown or filling for protection. After restoration, the tooth continues to function like any other tooth.

Contrary to jokes about the matter, modern root canal treatment is very similar to having a routine filling and usually can be completed in one or two appointments, depending on the condition of your tooth and your personal circumstances. You can expect a comfortable experience during and after your appointment.



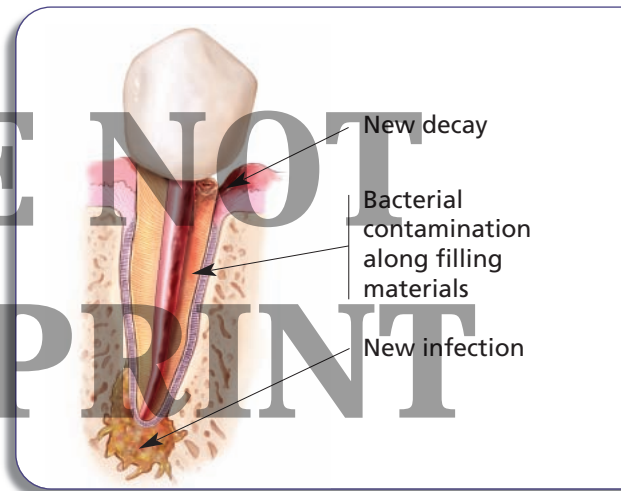
Saving the natural tooth with root canal treatment has many advantages:

- Efficient chewing
- Normal biting force and sensation
- Natural appearance
- Protects other teeth from excessive wear or strain

Endodontic treatment helps you maintain your natural smile, continue eating the foods you love and limits the need for ongoing dental work. With proper care, most teeth that have had root canal treatment can last as long as other natural teeth and often for a lifetime.

WHAT IS RETREATMENT?

As occasionally happens with any dental or medical procedure, a tooth may not heal as expected after initial endodontic treatment for a variety of reasons. These could include complicated canal anatomy that was undetected in the first root canal procedure, the delay in placement of a crown or other restoration, or an insufficient restoration. Sometimes new problems may jeopardize a tooth that was already treated, such as new decay, a loose, cracked or broken filling, or a tooth fracture. Often, when this happens, revision of the previous treatment may be performed to save the tooth.



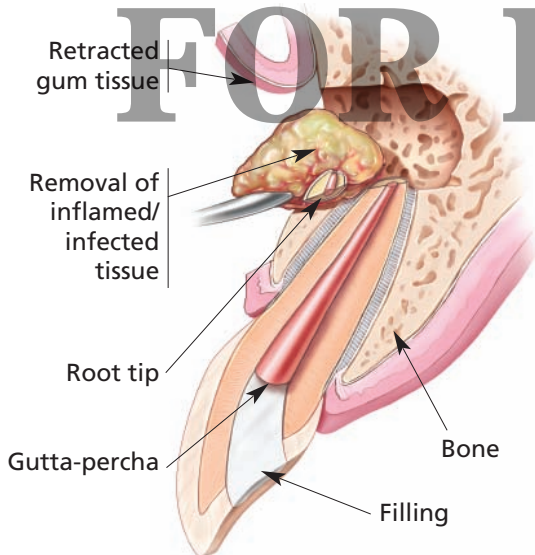
During endodontic retreatment, the endodontist will regain access to the root canal filling material. After removing the canal filling, the endodontist can clean the canals and carefully examine the inside of the tooth, searching for any hidden canals or unusual anatomy that requires treatment.

After cleaning the canals, the endodontist will fill and seal the canals and place a temporary filling in the tooth. As with the original root canal, you will need to return to your dentist as soon as possible to have a new crown or other restoration placed on the tooth to protect it.

If retreatment is not an option, endodontic surgery should be considered to save the natural tooth.

WHAT IS ENDODONTIC SURGERY?

There are many surgical procedures that can be performed to save a tooth. The most common is called an apicoectomy, or root-end resection, which is occasionally needed when inflammation or infection persists in the bony area around the end of your tooth after a root canal procedure. In this microsurgical procedure, the endodontist opens the gum tissue near the tooth to see the underlying bone and to remove any inflamed or infected tissue. The very end of the root is also removed. A small filling may be placed to seal the end of the root canal and a few stitches or sutures are placed to help the tissue heal. Over a period of months, the bone heals around the end of the root. Local anesthetics make the procedure comfortable, and most patients return to their normal activities the next day. Postsurgical discomfort is generally mild.

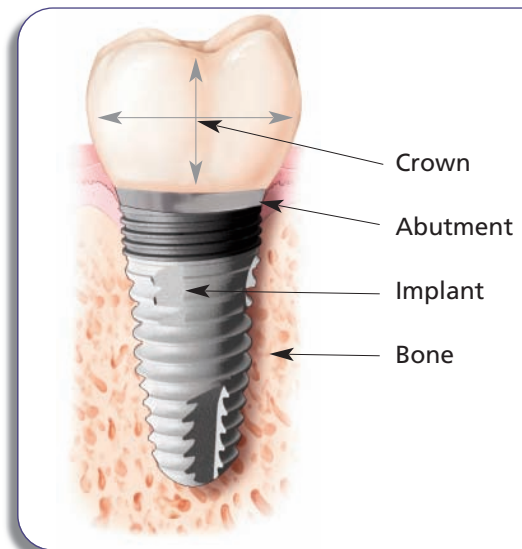


WHAT ARE THE ALTERNATIVES TO ENDODONTIC TREATMENT?

Though endodontic procedures are intended to help save your tooth, this is not always possible. Often, the only alternative to endodontic treatment is extraction of the tooth. Missing teeth can make you self-conscious, affect your ability to bite and chew, cause other healthy teeth to shift and have a negative impact on your overall health. For these reasons, the extracted tooth should be replaced with an artificial one.

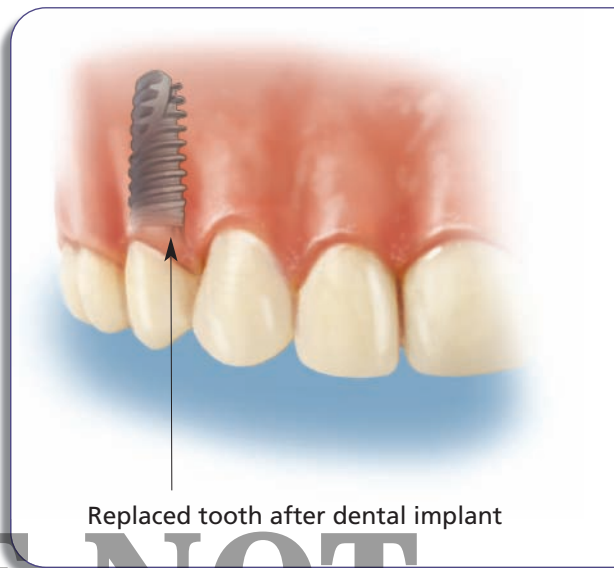
WHAT IS A DENTAL IMPLANT?

Implants are a state-of-the-art replacement for missing teeth. A dental implant is an artificial tooth root placed into your jaw to hold a replacement tooth—the crown—in place. The implant emulates the shape of the root and is usually made of titanium and other materials that are well-suited to the human body. The implant is surgically placed into the jaw and incorporates into the bone over time to become a stable base for crowns. Dental implants have been used for several decades by patients of all ages. They can replace a single tooth, several teeth or support partial or full dentures.

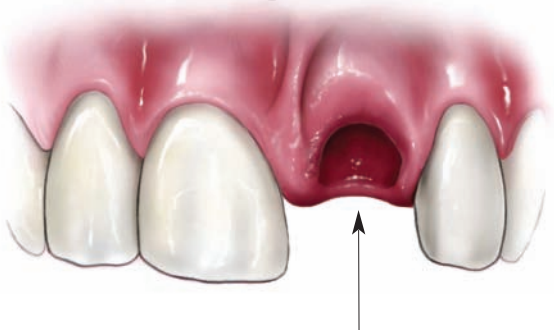


WHAT'S INVOLVED IN PLACING AN IMPLANT?

The way implants are placed depends on the patient, the type of implant and the tooth being replaced. Some implants can be fully placed in one day. Most implants involve two or three steps. First, the implant is placed into the jaw and the gum is secured over the implant. Over the next three to six months the implant will fuse with the jaw bone. Once the implant and bone have bonded together, the dentist or specialist may attach an extension, called an abutment, to the implant. In some cases, the implant and abutment are a single unit placed during the initial surgery. In others, a second surgery may be needed to attach the abutment to the replacement teeth. Once healed, the implant and abutment act as the foundation for the new tooth. In the final step, the dentist or specialist makes a crown in the right size, shape and color to match your natural teeth. The crown is attached to the implant post.



Replaced tooth after dental implant



Missing central incisor

SAMPLE NOT FOR RE

Dental implants provide a good alternative for the natural tooth when it must be extracted. Candidates for implants should have good general and oral health, adequate bone support in the jaw and healthy gum tissues. Chronic illnesses, such as diabetes or leukemia, may interfere with healing after surgery and prevent successful placement of an implant. Other risk factors for implant placement can include smoking, poor bone quality, long-term use of bisphosphonate medications, and low estrogen levels.

Replacing a missing or diseased tooth with an implant has several advantages:

- Natural appearance
- Doesn't require dental procedures on neighboring teeth
- Reliable

Though nothing looks, feels or functions exactly like your natural tooth, dental implants are a viable alternative to help you maintain a beautiful smile.

ARE THERE ANY OTHER OPTIONS?

For replacement of an extracted tooth, you may also consider a bridge or removable partial denture. These options require additional dental procedures on adjacent healthy teeth, and should be discussed with your dentist or specialist.

WHO PERFORMS THE PROCEDURES?

All dentists, including your general dentist, received training in endodontic treatment and dental implants in dental school. General dentists can perform these procedures, but often they refer patients with diseased teeth to endodontists for evaluation and treatment.

Endodontists are dentists with special training in endodontic procedures. They focus on endodontics in their practices because they are specialists. To become specialists, they complete dental school and an additional two or more years of advanced training in endodontics. They perform routine as well as difficult and very complex endodontic procedures, including endodontic surgery. Many endodontists have also received additional training in the placement of dental implants, and can perform this procedure for patients whose teeth cannot be saved.

Your dentist may have referred you to an endodontic specialist because of a personal concern about your medical conditions, treatment preferences, pain tolerance and/or the overall high quality of your dental care. The endodontist is a valuable partner on your general dentist's team of trusted caregivers, and is no different than medical specialists who provide expert advice for heart, bone or other health problems. Endodontists are uniquely qualified to evaluate whether your tooth can be saved, and which option is best for you.



HOW DO I MAKE A CHOICE?

Research has proven that endodontic treatment and dental implants are equally successful. Therefore, it makes sense to start by trying to save your natural tooth—nothing looks, feels or functions like it. If, for whatever reason, healing does not occur, then treatment with a dental implant is an excellent backup plan.

Ultimately, your treatment decision should be based on a strategy you have discussed with your dental team (your dentist, endodontist and/or other specialists), and that you agree is best for your overall health.