

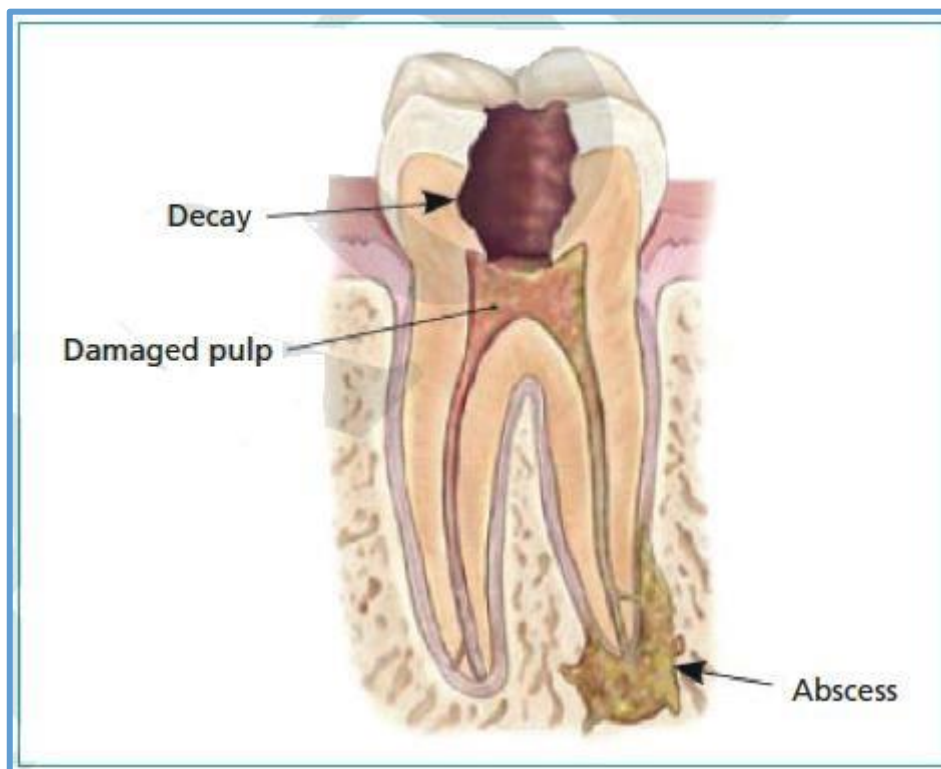
Peninsula Dental Social Enterprise (PDSE)

Information for Patients

Endodontics (Root Canal Treatment)

Why would I need an endodontic procedure?

Endodontic treatment is necessary when the pulp (the soft tissue inside the root canal) becomes inflamed or infected. The inflammation or infection can be as result of a number of causes, such as: deep decay, repeated dental procedures on the tooth (for example a large filling or a crown) or a crack or chip in the tooth. In addition, an injury (such as a sporting injury) 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.



What are the signs that a tooth requires endodontic treatment?

- Prolonged sensitivity to hot or cold stimuli
- Tenderness to touch and chewing
- Discolouration of the tooth
- Facial swelling as a result of infection from a tooth.

The swelling could also be localized and appear as a 'gum boil'. Sometimes there are no symptoms and changes on routine radiographs indicating the need for root canal treatment.

How does endodontic treatment save the tooth?

The inflamed or infected pulp is removed, the clinician (student or dentist) carefully cleans and shapes the inside of the canal, then fills and seals the space. Afterwards you may need a large filling or a crown to protect the remaining tooth and restore it to full function.

Although endodontic treatment does have a high success rate it is very difficult to give you an exact value, as this depends very much on individual factors specific to your tooth such as:

- The number of roots of the tooth
- The amount of tooth left
- The extent of infection prior to treatment
- Experience of the operator

What are the alternatives?

The purpose of endodontic treatment is to retain a tooth which may otherwise require extraction. There are alternatives such as doing nothing, waiting for more definitive symptoms to develop, or extracting the tooth. As with all dental procedures each of these has associated risks and benefits and you should discuss this with the dental student and their Clinical Supervisor prior to making a decision on how you wish to proceed.

What risks are involved?

- Risk of post-operative pain, swelling, sensitivity, infection for which you may need to be prescribed antibiotics

- Infection that may continue requiring further endodontic treatment or extractions
- Inability to fill the root canal because the canal is calcified or has a unique curvature (this may require endodontic surgery or extraction of the tooth)
- Fracture or breakage of the root or crown portion of the tooth during or after treatment as the tooth will become more brittle during and after this treatment
- Inadvertent breakage of files or instruments within the root canal system that are unable to be retrieved
- Perforation of the tooth during treatment
- Despite our best efforts the tooth may still require extraction
- Damage to existing fillings, crowns or veneers in order to access the root canal of your tooth

In certain circumstances unforeseen conditions may arise that require a procedure that is different to that planned. If this occurs we will advise you of any changes.

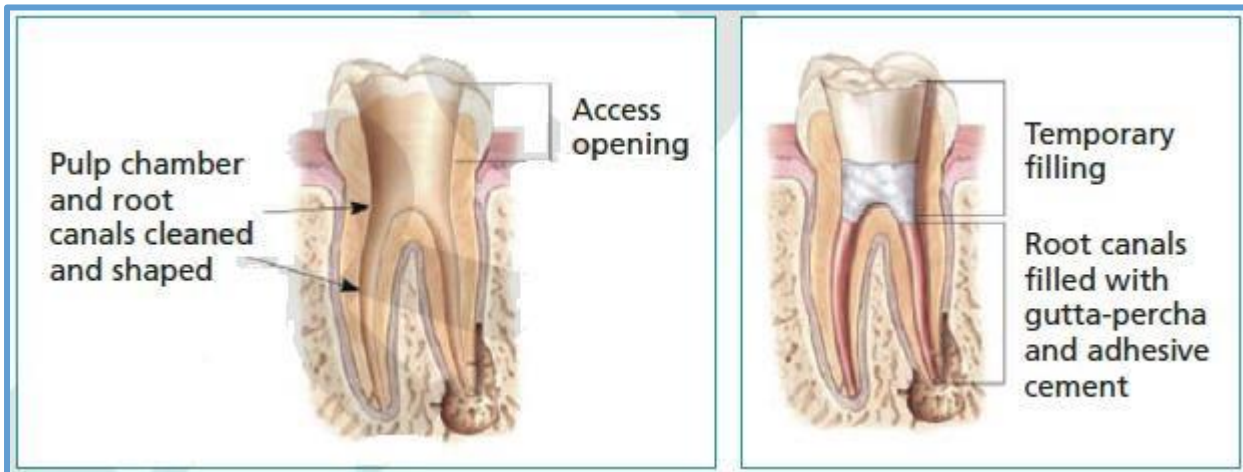
Will I feel pain during or after the procedure?

With modern techniques and anaesthetics, most patients report that they are comfortable during the procedure. For the first few days after treatment, your tooth may feel sensitive, especially if there was pain or infection before the procedure. This discomfort can be relieved with over-the-counter or prescription medications. Your tooth may continue to feel slightly different from your other teeth for some time after your endodontic treatment is completed. However, if you have severe pain or pain that lasts more than a few days, you should call the Dental Education Facility where you had your appointment.

Endodontic procedure

Endodontic treatment can often be performed in one or two visits and generally involves the following steps:

1. The Dentist examines and takes a radiograph of the tooth
2. Local anaesthetic is administered
3. A protective sheet called a 'rubber dam' is used to isolate the tooth from saliva
4. The infected pulp is accessed by drilling the top of the tooth
5. Small instruments (files) are used to carefully clean and shape the canal system
6. The canal system is filled with a rubber like material called 'gutta-percha'



If you have further questions please discuss them with the student treating you and the Clinical Supervisor who will be happy to provide you with any further information you require prior to making a decision.