Endodontiai izolálás, praeendodontiai felépítés. Trepanációs kavitás kialakítása

Krajczár Károly PTE KK Fogászati és Szájsebészeti Klinika QUALITY GUIDELINES

Quality guidelines for endodontic treatment: consensus report of the European Society of Endodontology

European Society of Endodontology

Isolation of tooth

Root can'al treatment procedures should be carried out only when the tooth is isolated by rubber dam to: prevent salivary and bacterial contamination, prevent inhalation and ingestion of instruments and prevent irrigating solutions escaping into the oral cavity.



AAE POSITION STATEMENT

The following statement was prepared by the AAE Clinical Practice Committee. AAE members may photocopy this position statement for distribution to patients or referring dentists.

DENTAL DAMS

The American Association of Endodontists is dedicated to excellence in the art and science of endodontics and to the highest standards of patient care. The accumulated clinical knowledge and judgment of the practitioner supported by evidence-based scientific research is the basis for endodontic treatment. Tooth isolation using the dental dam is the standard of care; it is integral and essential for any nonsurgical endodontic treatment.

A dental dam is a latex or nonlatex sheet with a hole punched in the material to allow placement around the tooth during the endodontic procedure. One of the primary objectives of endodontic treatment is disinfection of the root canal system. Only dental dam isolation minimizes the risk of contamination of the root canal system by indigenous oral bacteria. The dental dam also offers other benefits, such as aiding in visualization by providing a clean operating field and preventing ingestion or aspiration of dental materials, irrigants and instruments.

Guide to Clinical **Endodontics**

Sixth Edition

Indications for Treatment

Tooth isolation using the dank 1 Tooth isolation using the dental dam is the standard of care; it is integral and essential for any nonsurgical endodontic treatment. One of the primary objectives of endodontic treatment is disinfection of the root canal system. Only dental dam isolation minimizes the risk of contamination of the root canal system by indigenous oral bacteria. The dental dam also offers other benefits, such as aiding in visualization by providing a clean operating field and preventing ingestion or aspiration of dental materials, irrigants and instruments.



BMJ Open Discordance between presumed standard of care and actual clinical practice: the example of rubber dam use during root canal treatment in the National Dental Practice-Based Research Network

Gregg H Gilbert, 1 Joseph L Riley, 2 Paul D Eleazer, 3 Paul L Benjamin, 4 Ellen Funkhouser, 5 National Dental PBRN Collaborative Group

Conclusions: General dentists have substantial variation in attitudes about rubber dam use. Beliefs that rubber dam use is not effective, inconvenient, time-consuming, not easy to place or affected by patient factors, were independently and significantly associated with lower rubber dam use. These attitudes explain why there is substantial discordance between presumed standard of care and actual practice.

ASKS DENTIST IF



HE EVER WORKS WITH RUBBER DAM

memegenerator.net

BMC Oral Health

RESEARCH ARTICLE

Open Access

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Why dentists don't use rubber dam during endodontics and how to promote its usage?

Table 1 Frequency of rubber dam use

Use of rubber dam (%) Ahmad A. Madarati Respondents Total **Endodontists** 28 (84.8 %) 5 (15.2 %) 33 (100 %) Endodonti 9 (100 %) 0 (0 %) Students 33 (21.6 %) 120 (78.4 %) 153 (100 %) Other 8 (57.1 %) 6 (42.9 %) 14 (100 %) Total 78 (37.3 %) 131 (62.7 %) 209 (100 %)

"AIN'T NOBODY GOT TIME 4 THAT" memegenerator.net

Table 2 Reasons for not using rubber dam (%)

Respondent	s Difficult use	Time consuming	Not available at work	Others	Total
Endodontist	:s 0	0	80	20	100
GDPs	23.3	167 Ke	39.2	20.8	100
Others	0	7 16.7	33.3	50	100
Total	284	2 16	40.5	22.1	100

Table 7 Rubber dam use according to type (place) of work (%)

Respondents	Private	Academic	Government
GDP 20 20	60.8 (9.7)	0.6	38.3 <mark>(37.9)</mark>
Endodontists, 51	27.3 (55.6)	24.2 (100)	48.5 <mark>(93.8)</mark>
Endo Postgraduate students	0 (0)	0 (0)	37.5 <mark>(100)</mark>
Other	31.6 (33.3)	21.1 (66.7)	42.1 (80)
Total	51.5 (14.8)	5.6 (90)	40.3 (53.7)

The values in parentheses represent proportion of respondents who currently use RD

Attitudes and use of rubber dam by Irish general dental practitioners

C. D. Lynch¹ & R. J. McConnell²

¹Division of Adult Dental Health, School of Dentistry, Cardiff University, Cardiff, UK; University Dental School & Hospital, Wilton, Cork, Ireland

Reported use (percentage in brackets	s Anterior teeth,	Premolar teeth,	Molar teeth,
refers to number of cases)	(0 (%)-C	n (%)	n (%)
		84 (32)	51 (26)
Never (0%) Rarely (1–25%) Occasionally (26–50%) Often (51–75%)	51 (17)	36 (14)	24 (12)
Occasionally (26–50%)	6 (2)	18 (6)	15 (7)
Often (51–75%)	18 (6)	6 (2)	12 (6)
Mostly (76–99%)	27 (9)	36 (14)	18 (9)
Always (100%)	78 <mark>(27)</mark>	84 (32)	78 <mark>(40)</mark>
Total	294 (100)	264 (100)	198 (100)

THE USE OF RUBBER DAM AMONG CZECH DENTAL PRACTITIONERS

Martin Kapitán, Zdeňka Šustová

Charles University in Prague, Faculty of Medicine and University Hospital Hradec Králové Czech Republic: Department of Dentistry

Tab. 2: Reported use of rubber dam in different materials and treatment

Material/	Regularly	Occasion-	Never
treatment	n (%)	ally n (%)	n (%)
Amalgam	10(2)	43 (10)	392 (88)
Composite resin	39 (9)	100 (22)	309 (69)
Glassionomer cement	16 (4)	64 (14)	366 (82)
Root canal treatment	42(9)	76 <mark>(17)</mark>	329 (74)

Influence of rubber dam on objective and subjective parameters of stress during dental treatment of children and adolescents – a randomized controlled clinical pilot study

PATRICIA AMMANN¹, ANDREAS KOLB², ADRIAN LUSSI¹ & RAINER SEEMANN^{1,3}

¹Department of Preventive, Restorative and Pediatric Dentistry, University of Bern, Switzerland, ²Dental Practice Dr. Andreas Kolb, Heide (Holstein), Germany, and ³Universitätsmedizin Charlie, Berlin, Germany

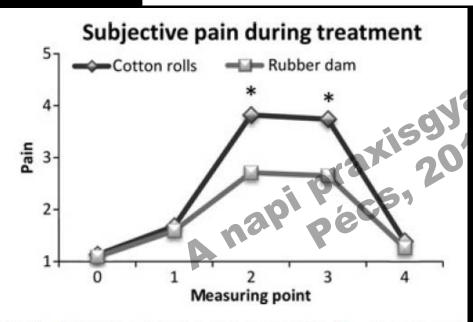


Fig. 1. Patient's subjective pain perception (1 = no pain and 10 = strong pain) (*P < 0.05). See Table 1 for explanation of measuring points.

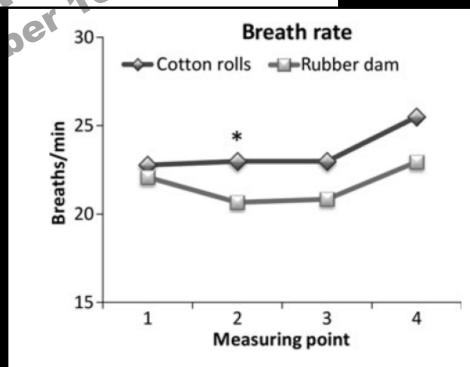
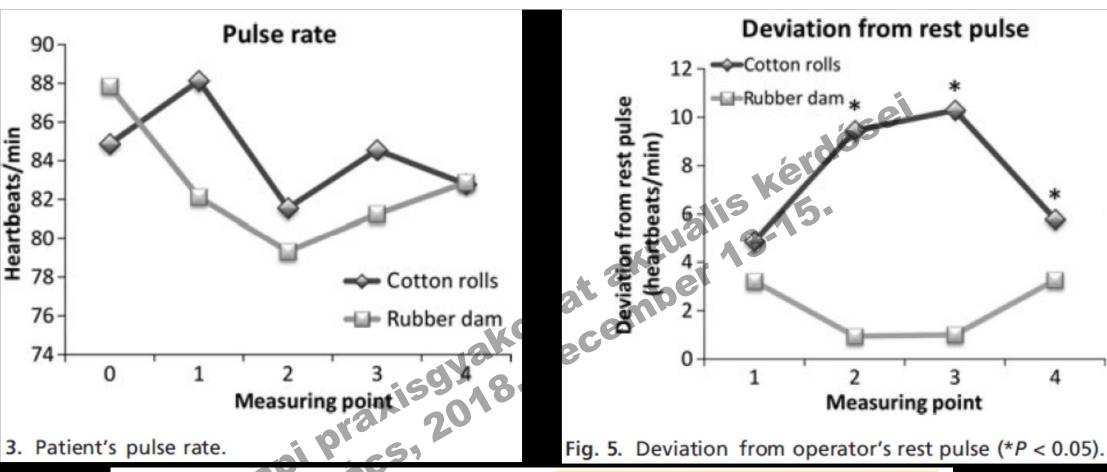
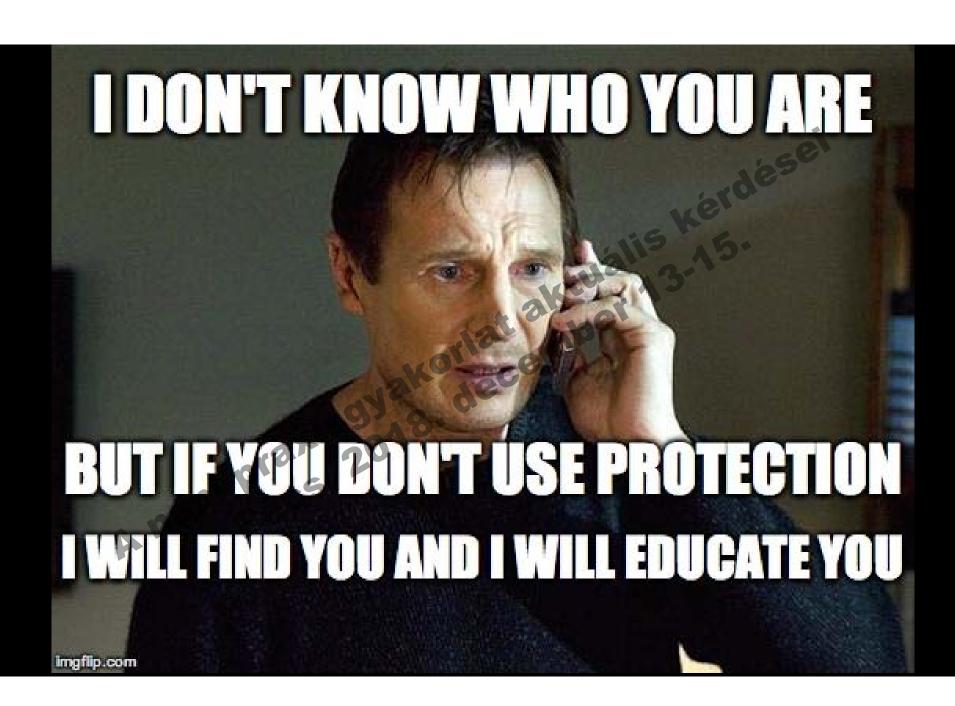


Fig. 2. Patient's breath rate (*P < 0.05).



Conclusion. Isolation with rubber dam caused less stress in children and adolescents compared to relative isolation with cotton rolls if applied by an experienced dentist.



Figyelembe venni:

Latex allergia: szilikon lepedő.

Szájlégzők: "elcsúsztatott" keret elhelyezés a szájnyílás részleges szabadonhagyásával

Biszfoszfonát terápia

Review

Bisphosphonates and their clinical implications in endodontic therapy International Endodontic Journal, 46, 391–398, 2013

A.-T. Moinzadeh¹, H. Shemesh¹, N. A. M. Neirynck², C. Aubert³ & P. R. Wesselink¹

Endodontic therapy has not been identified as a significant risk factor for promoting BRONJ and is therefore considered as the favoured alternative to extraction



A one minute mouth rinse with chlorhexidine prior to the start of the treatment would lower the bacterial load of the oral cavity (Cousido *et al.* 2010) and aim at decreasing the bacteremia caused by any soft tissue trauma.

Working under aseptic conditions is mandatory. This includes steps such as the removal of caries and leaking restorations, the cleaning of the tooth and the placement of a rubber dam prior to the start of the intracanal procedures. The proper adapparticular care should be given to avoid any damage to the gingival tissues during the placement of a rubber dam clamp (Kyogidis 2009). An alterna-

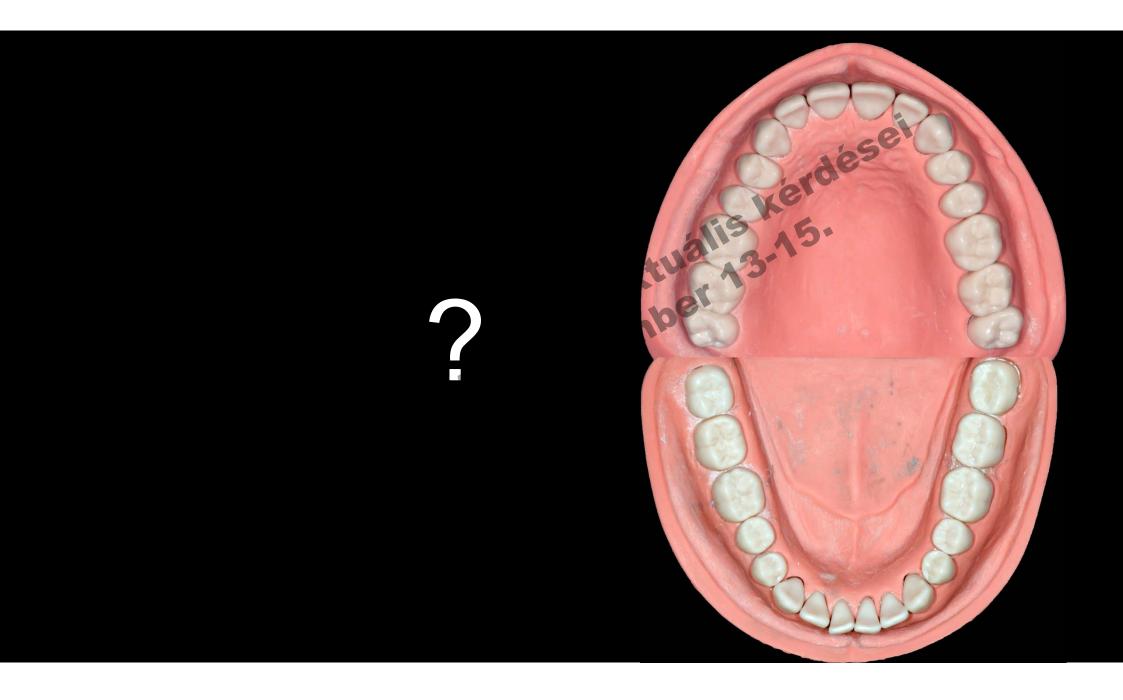


Kofferdam felhelyezése Szárnyas technika

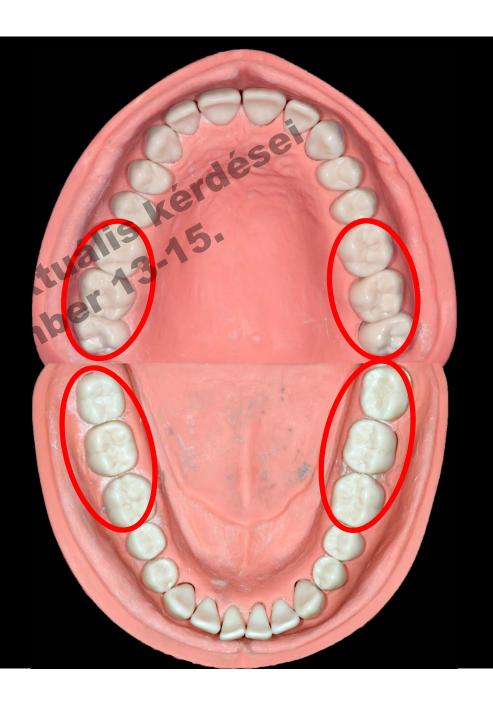




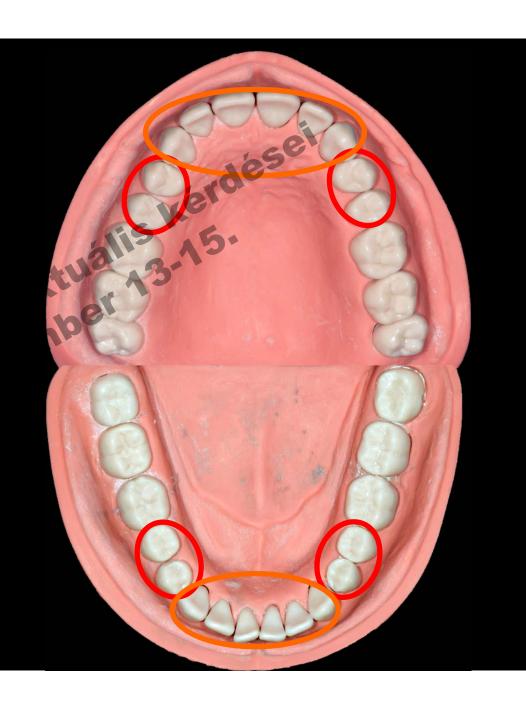












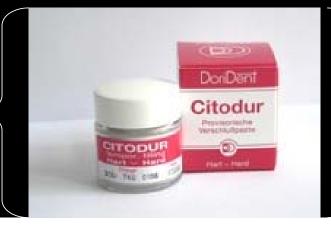


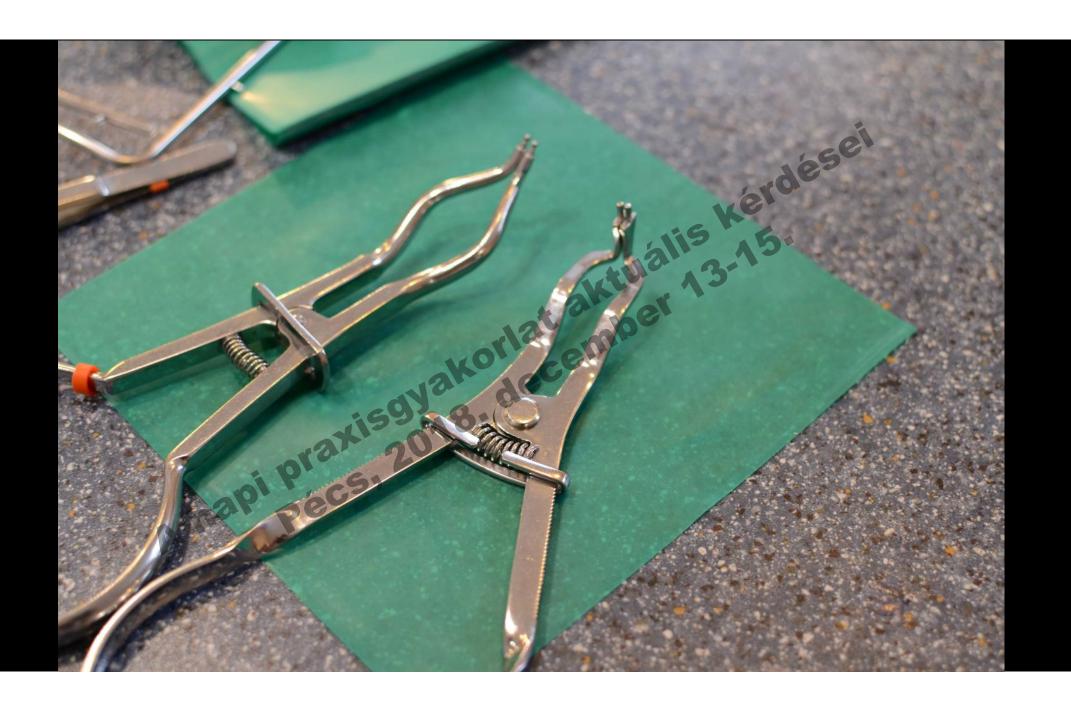


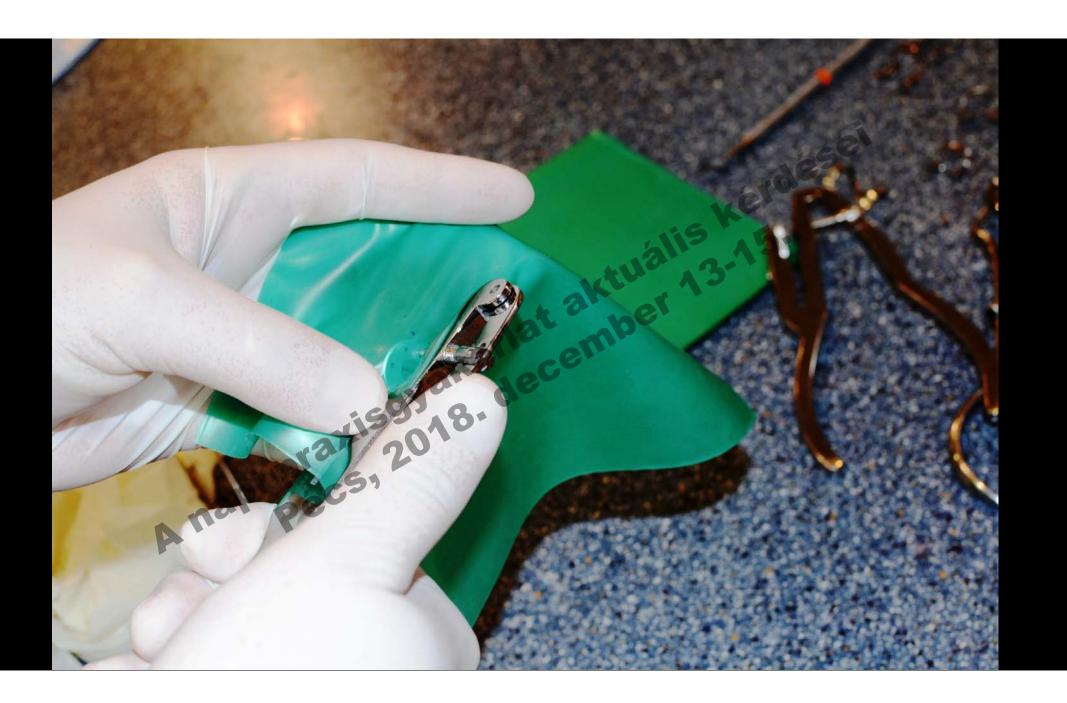
Tömítő anyagok



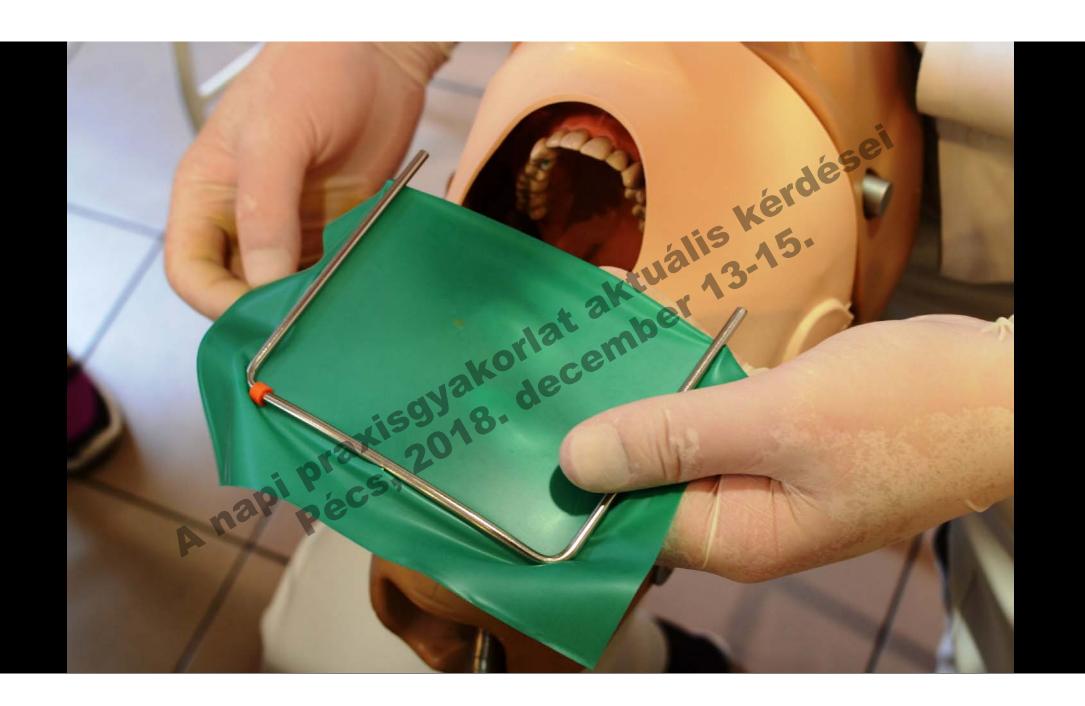


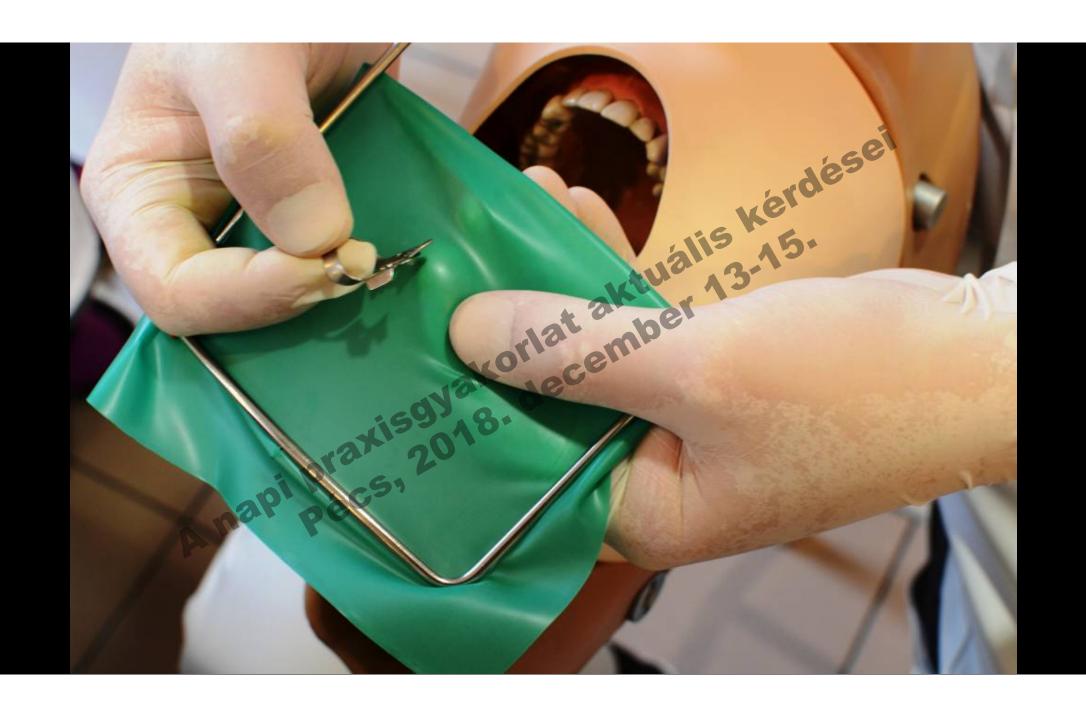






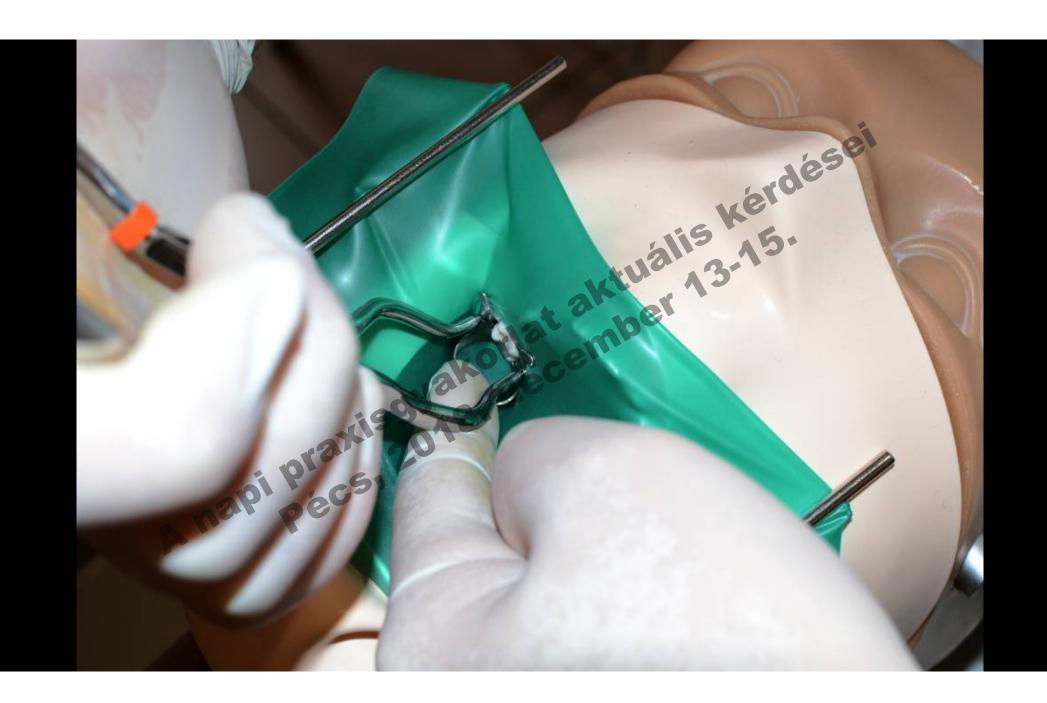


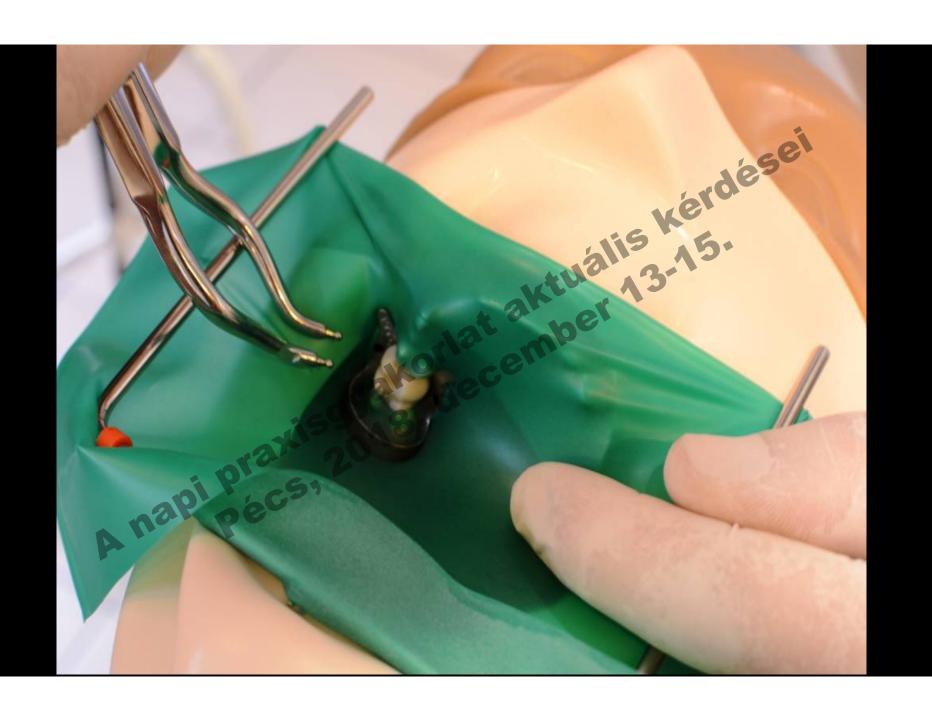


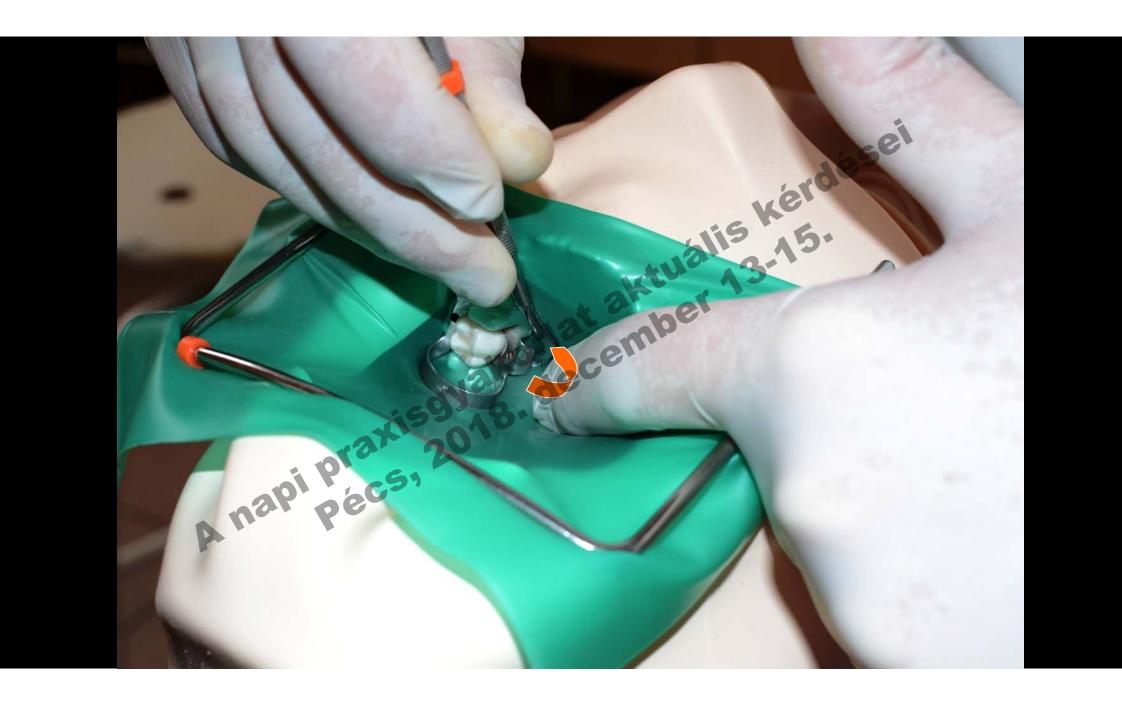




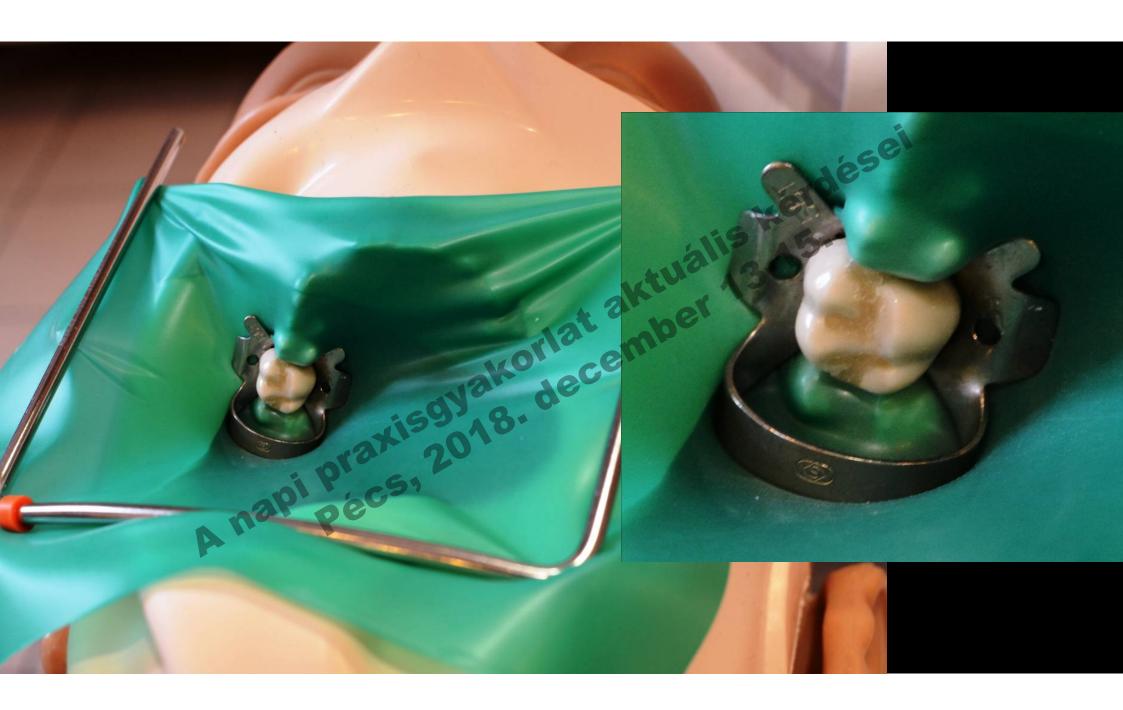


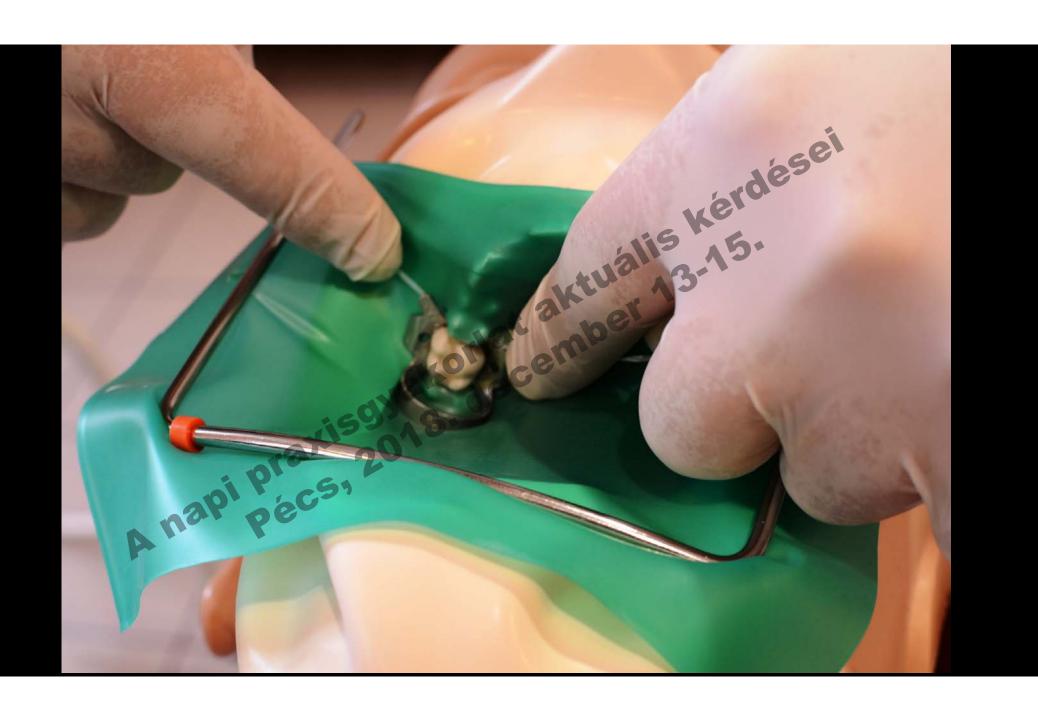










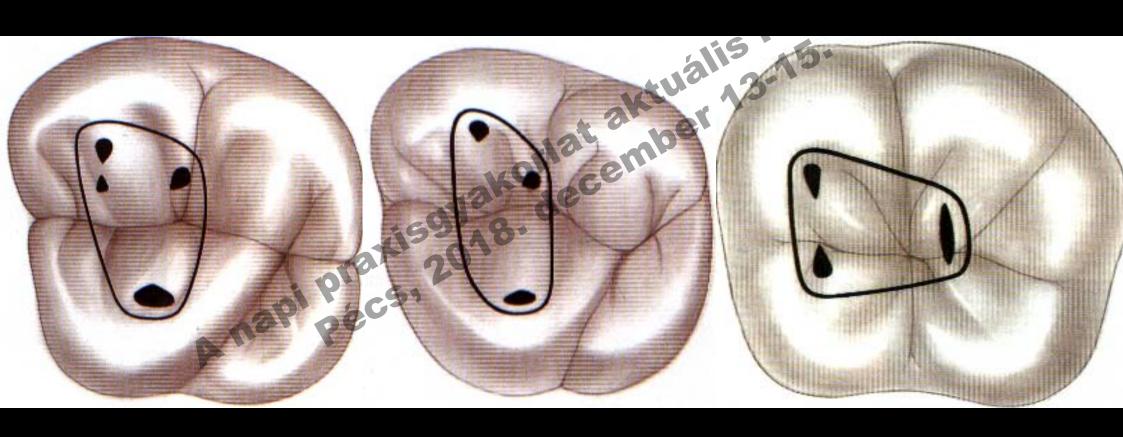


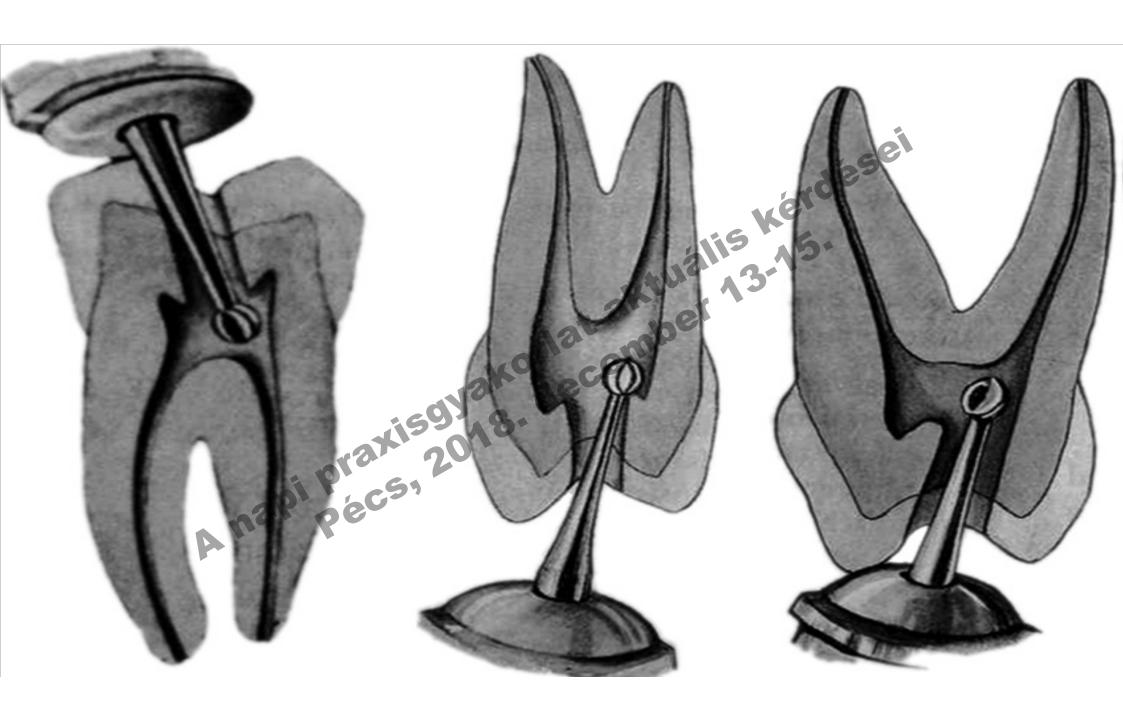




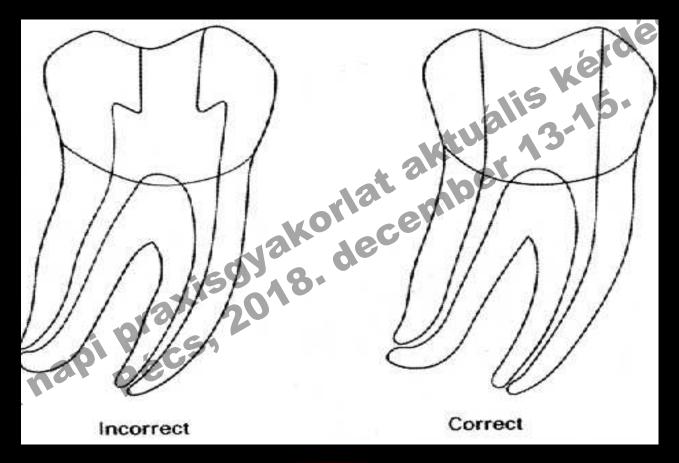


Trepanációs üreg kialakítása

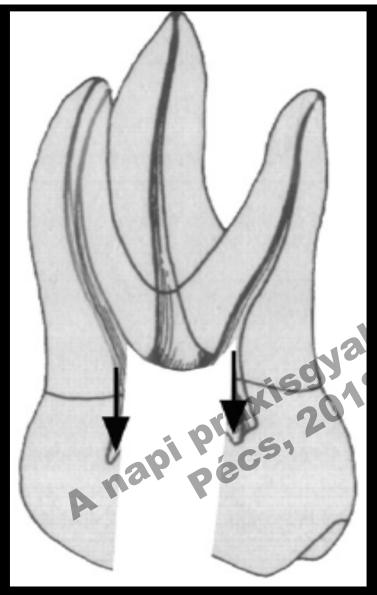


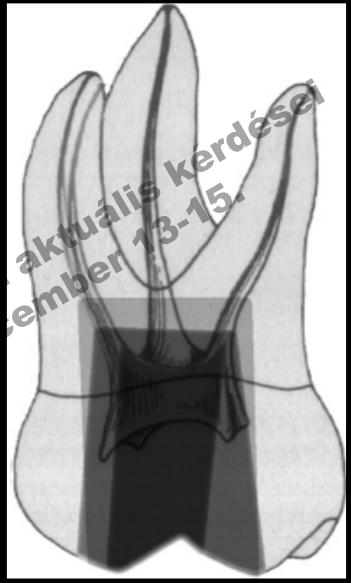


Trepanációs nyílás klasszikus kialakítása

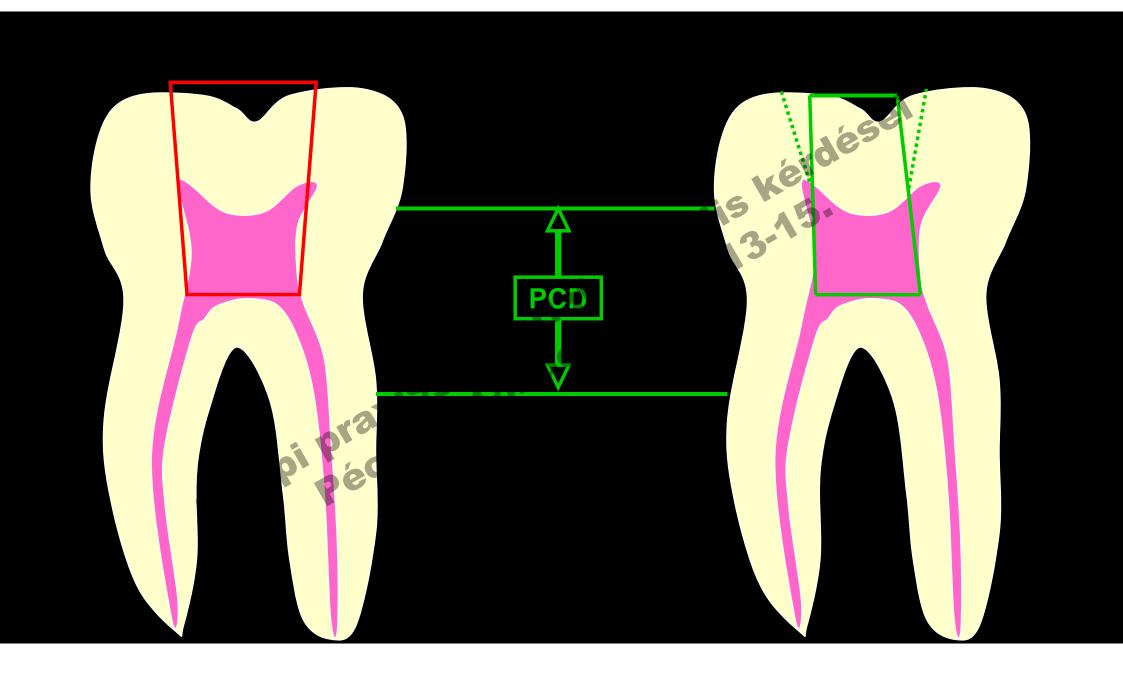


Trepanációs nyílás szövetkímélő kialakítása





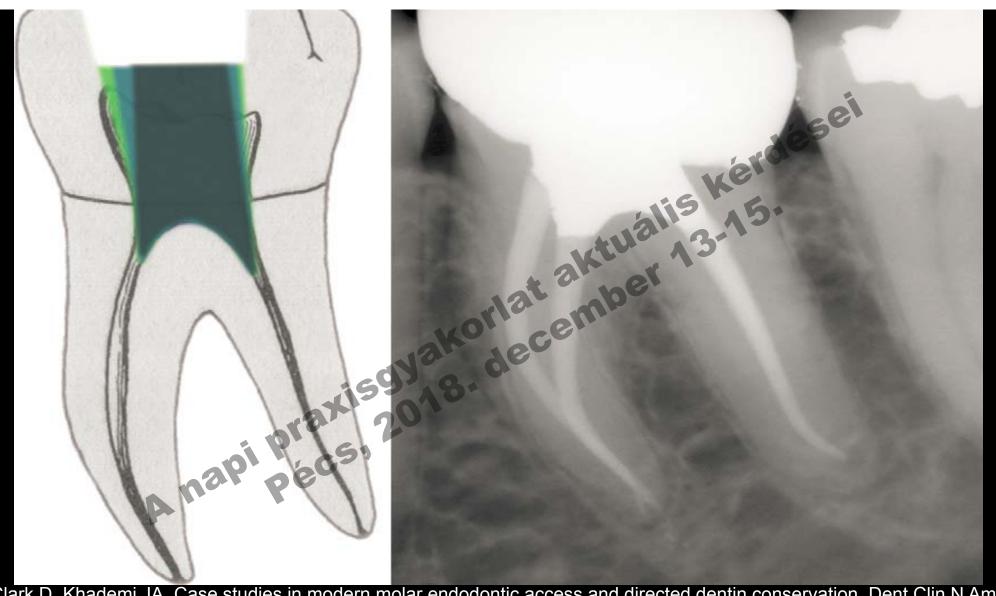
Clark D, Khademi JA. Modern molar endodontic access and directed dentin conservation. Dent Clin N Am 2010;54: 249-53.











Clark D, Khademi JA. Case studies in modern molar endodontic access and directed dentin conservation. Dent Clin N Am 2010;54:275-89.

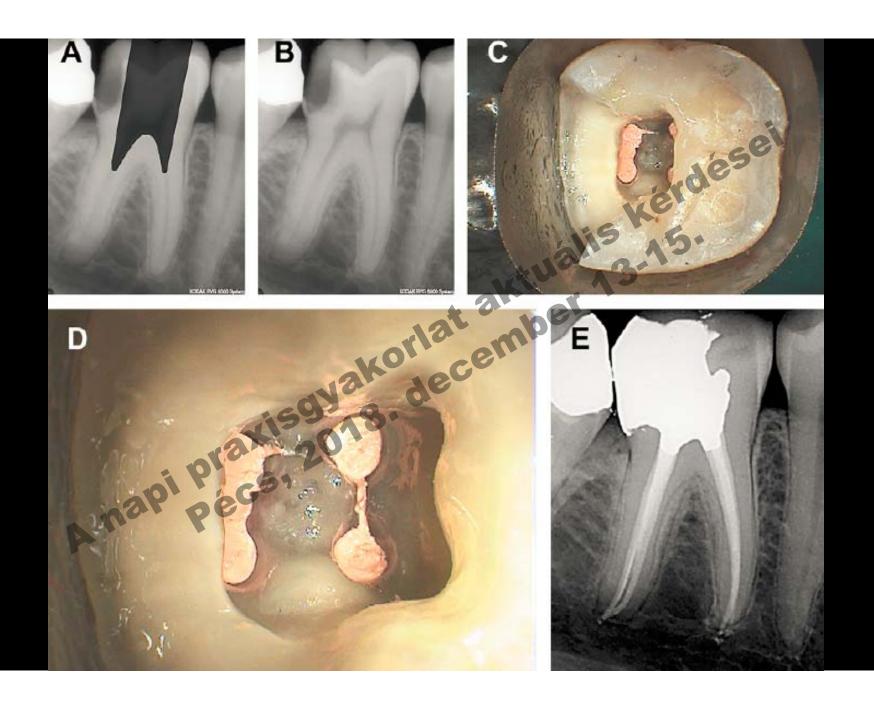


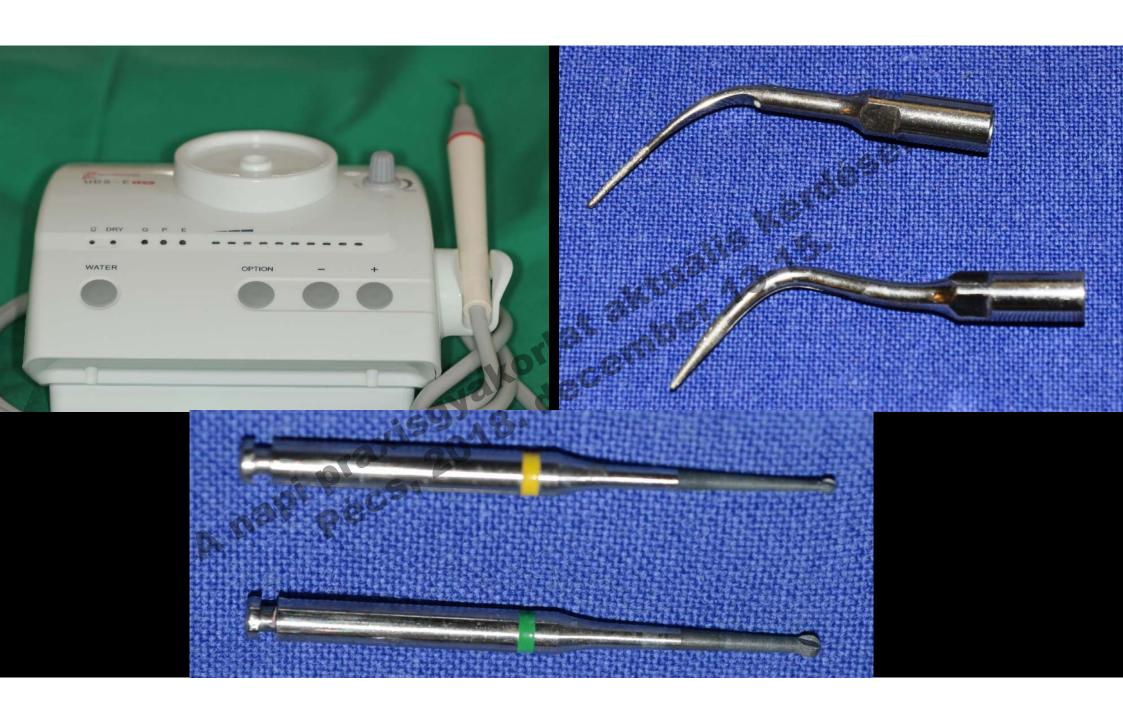


 Clark D, Khademi JA. Case studies in modern molar endodontic access and directed dentin conservation. Dent Clin N Am 2010;54: 275-89.





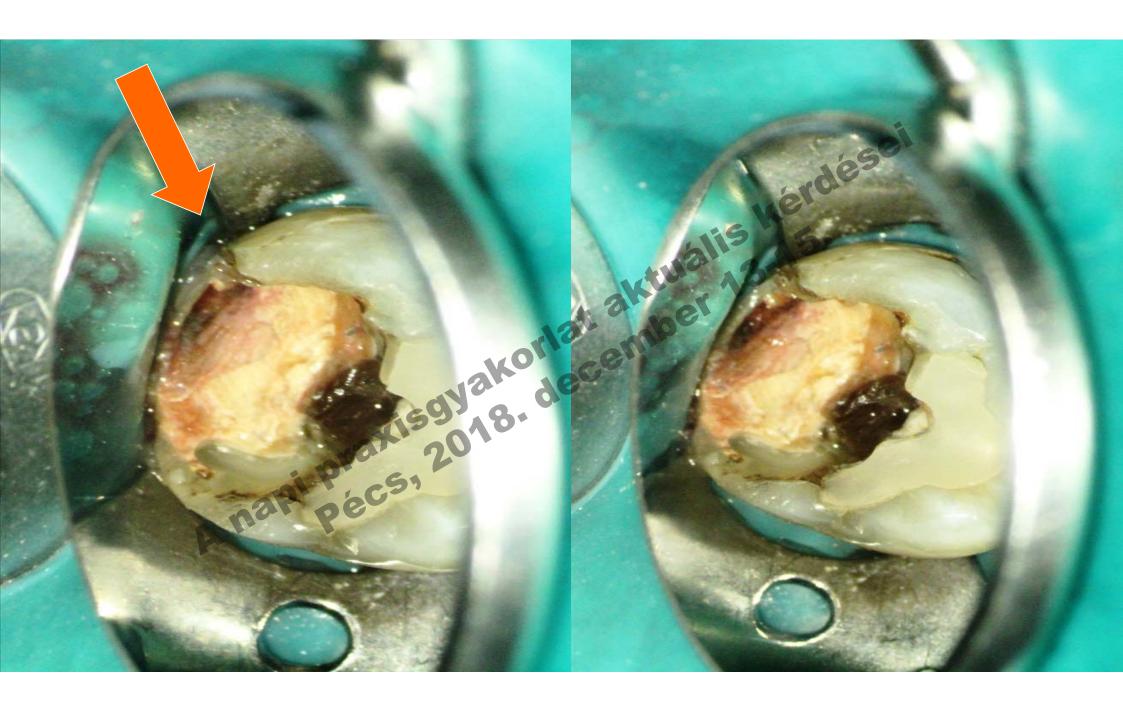




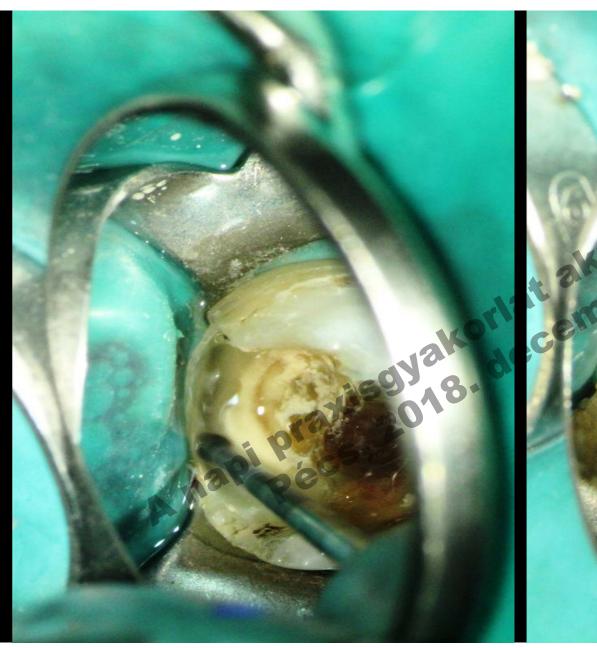


Izolálás kiegészítő felépítés nélkül













Marginális szivárgás







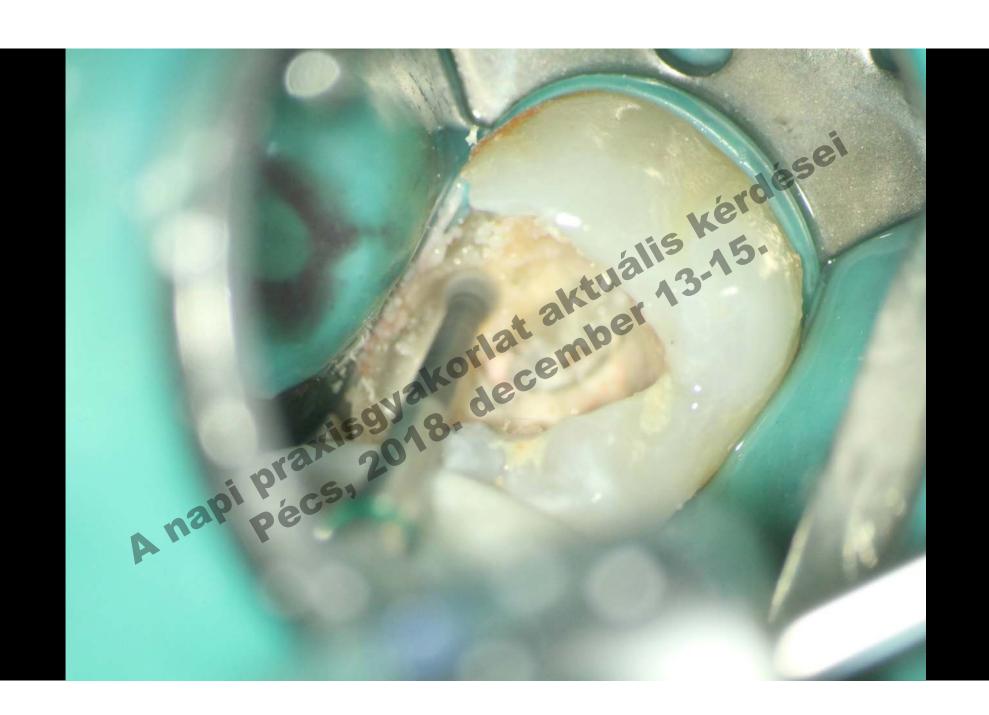


Preendodontiai felépítés

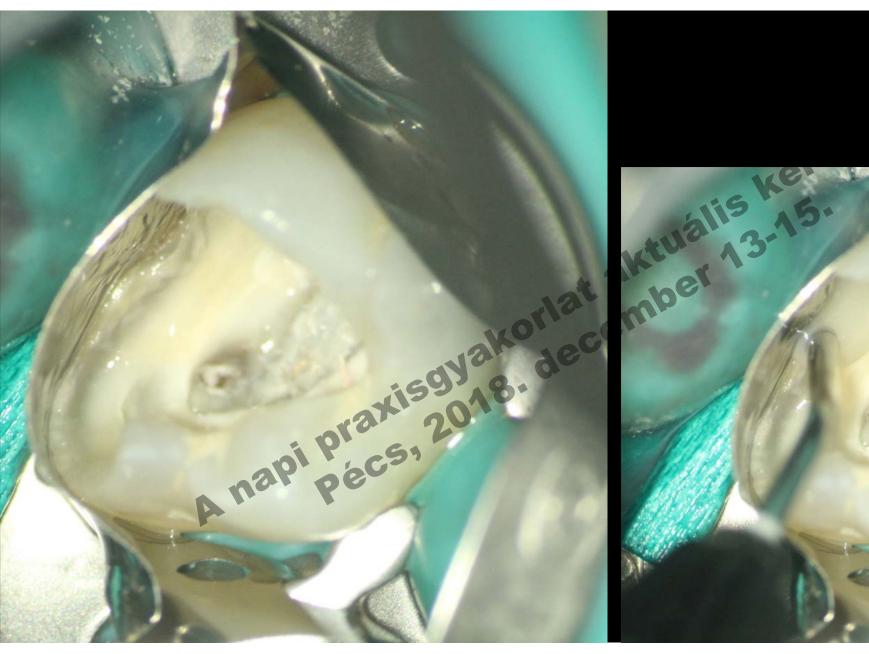






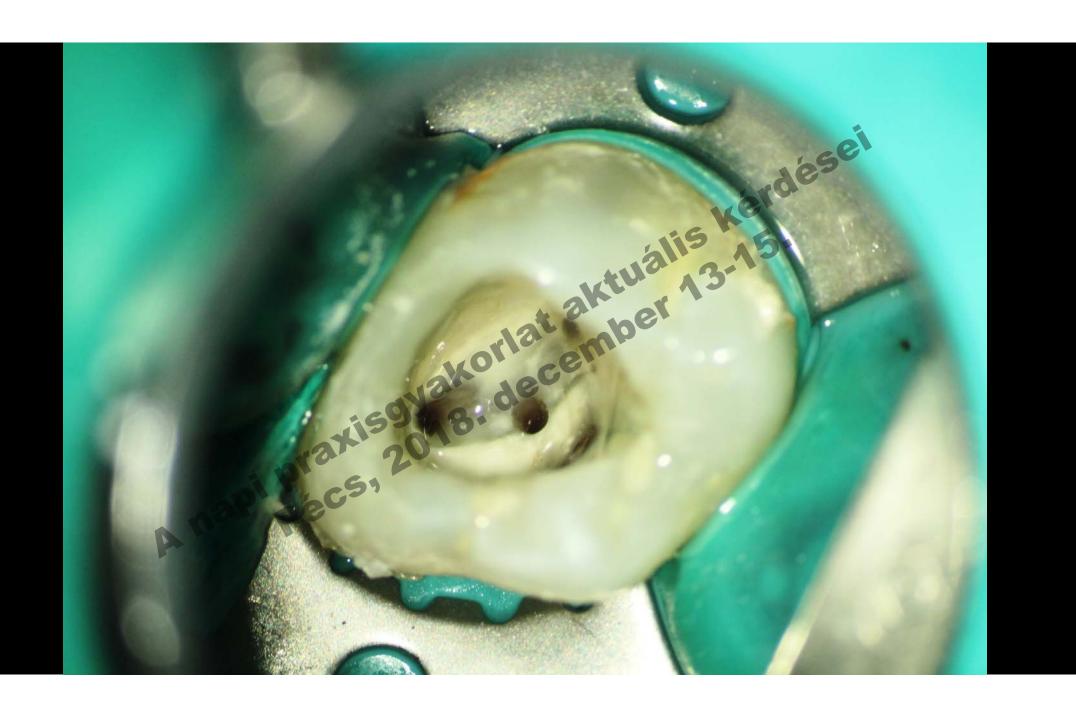














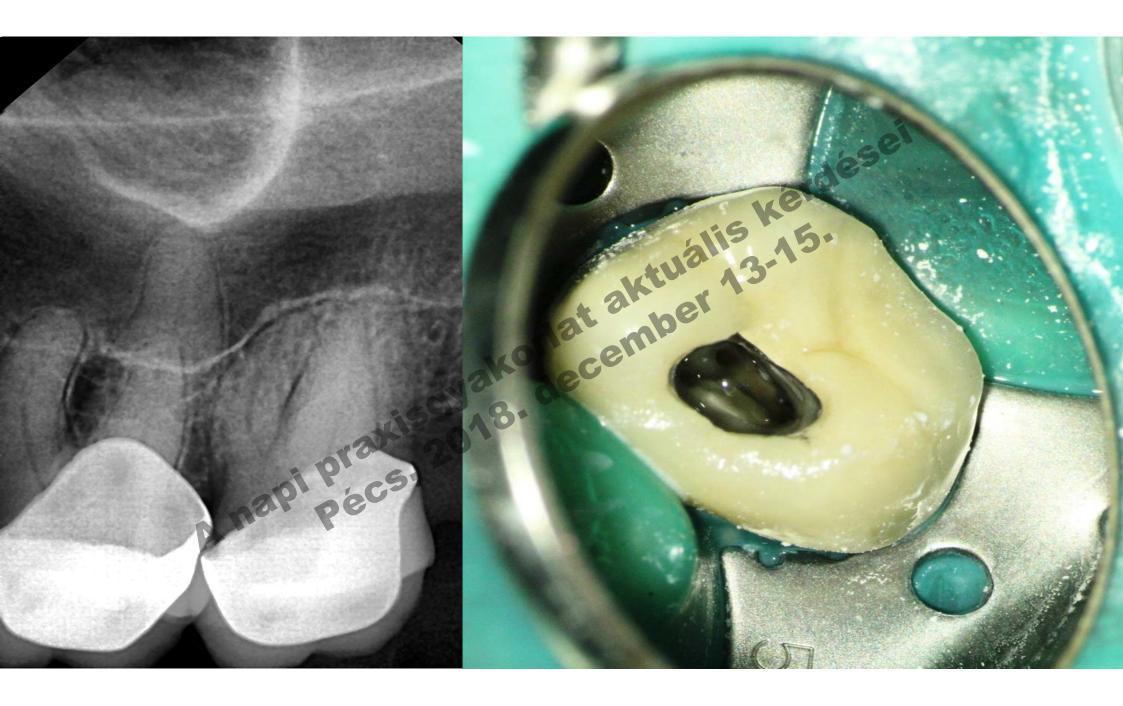
Koronális restauráció megtartása

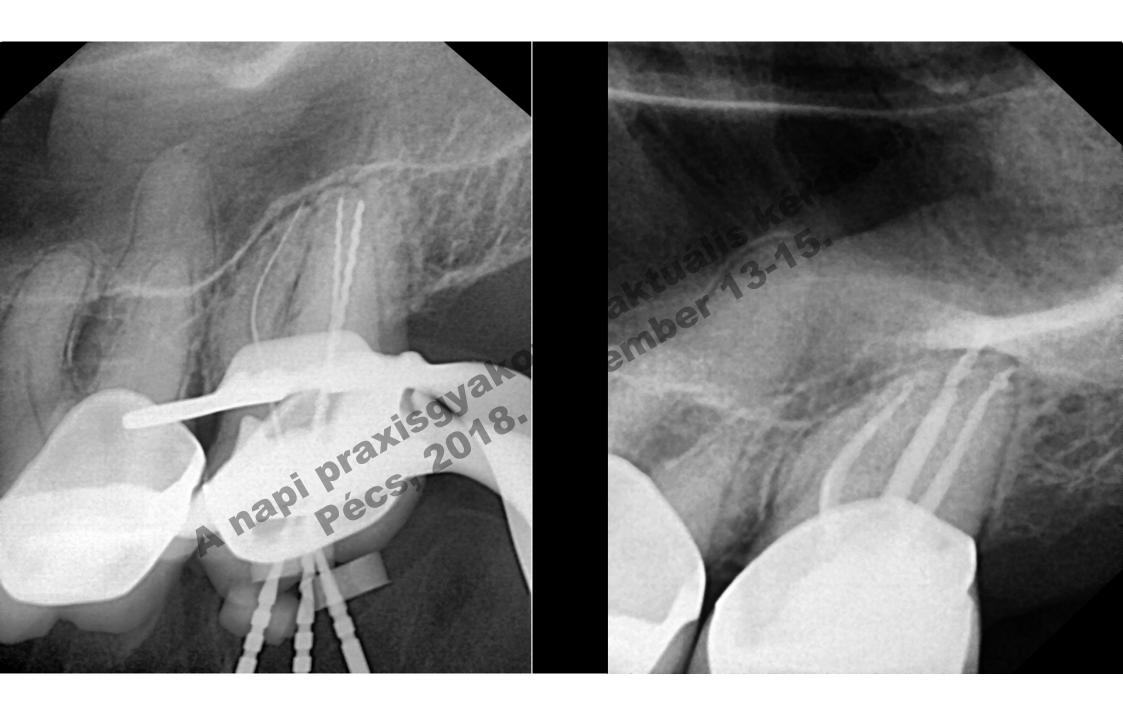


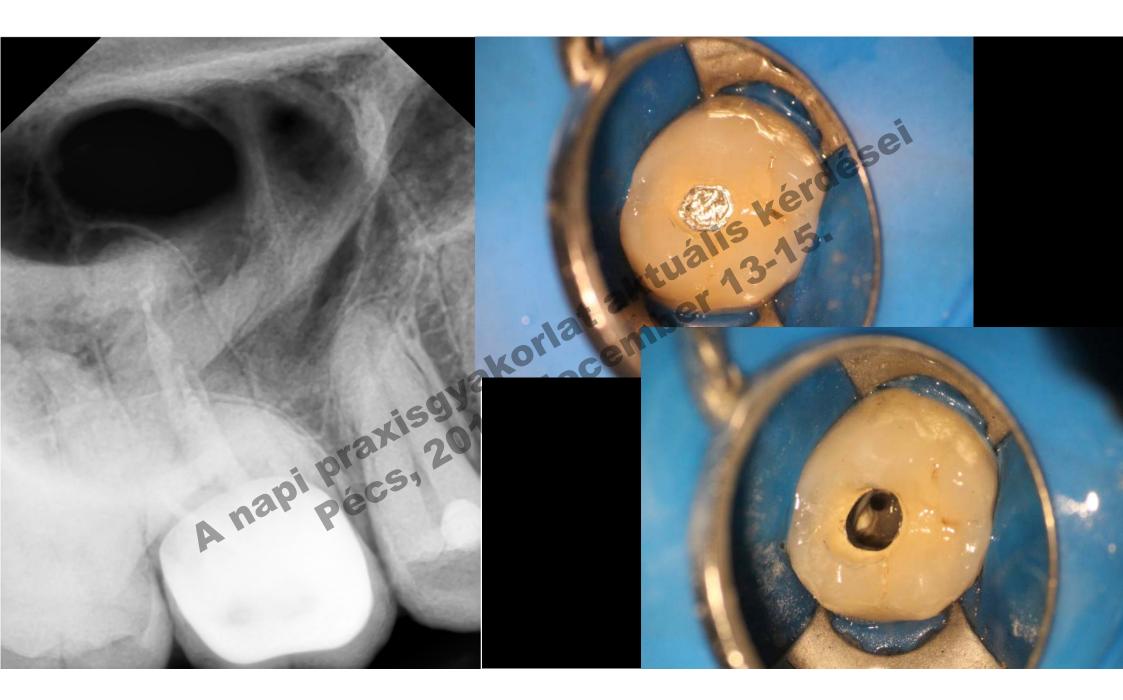












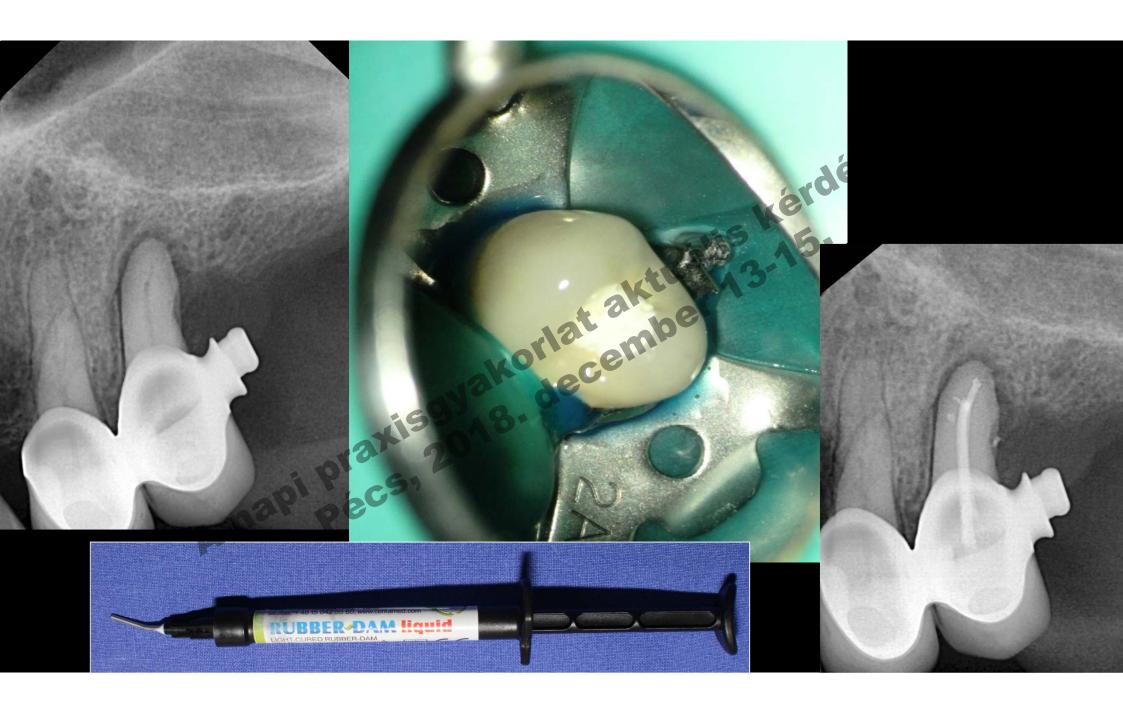






Hídhorgony korona izolálása

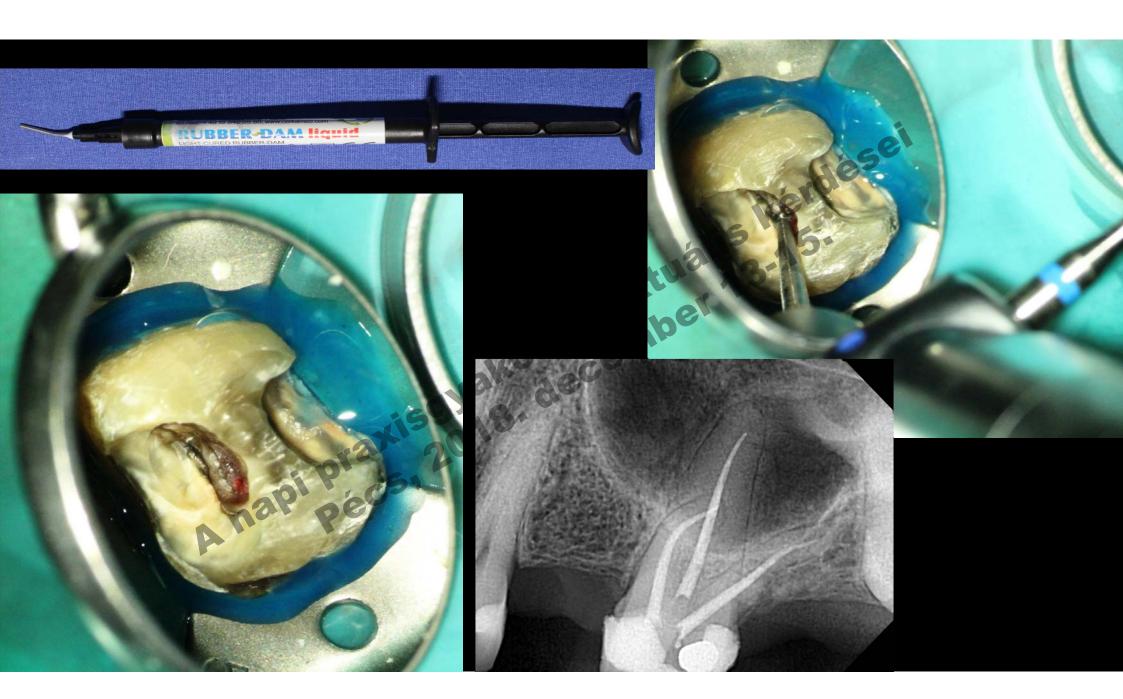




Előkészített csonk izolálása



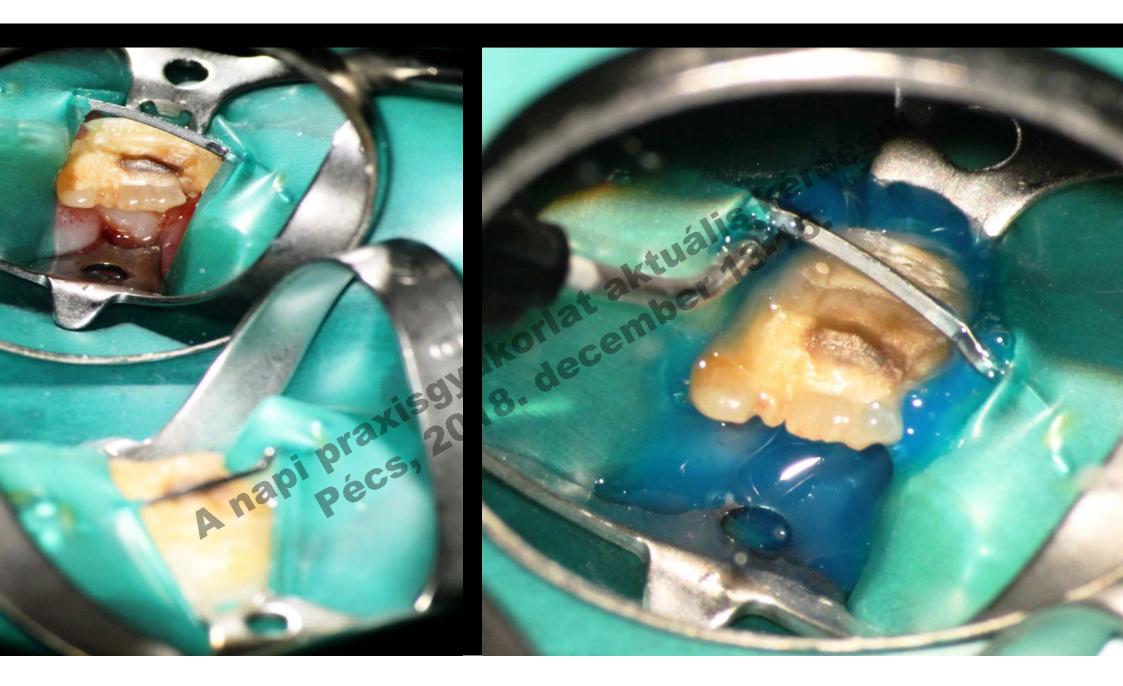


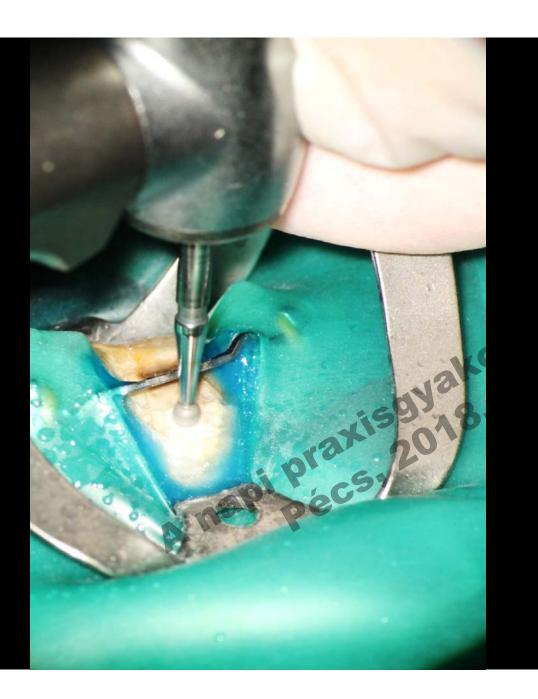


Fogszabályozó készülék





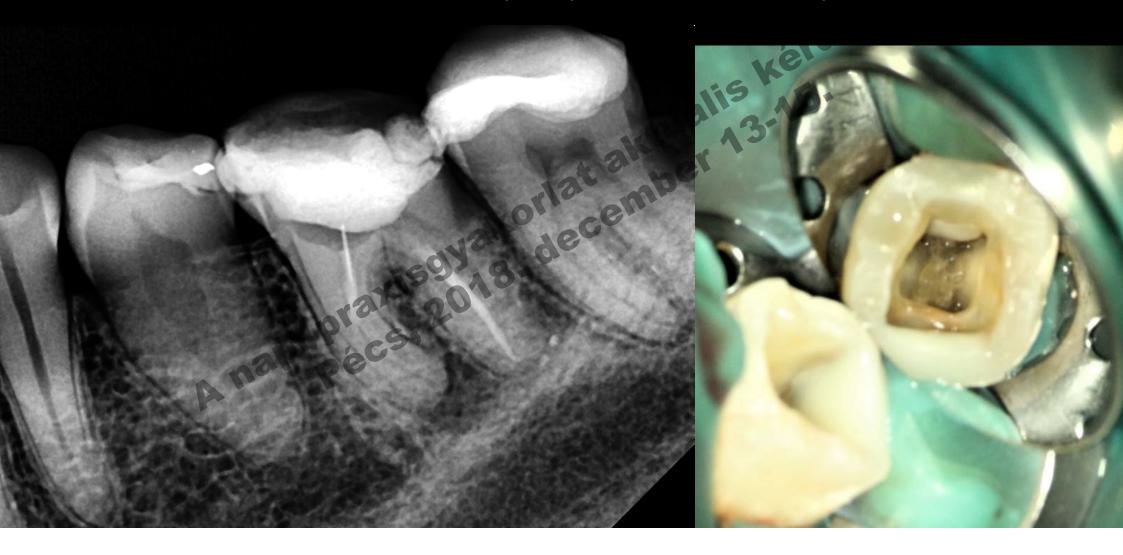




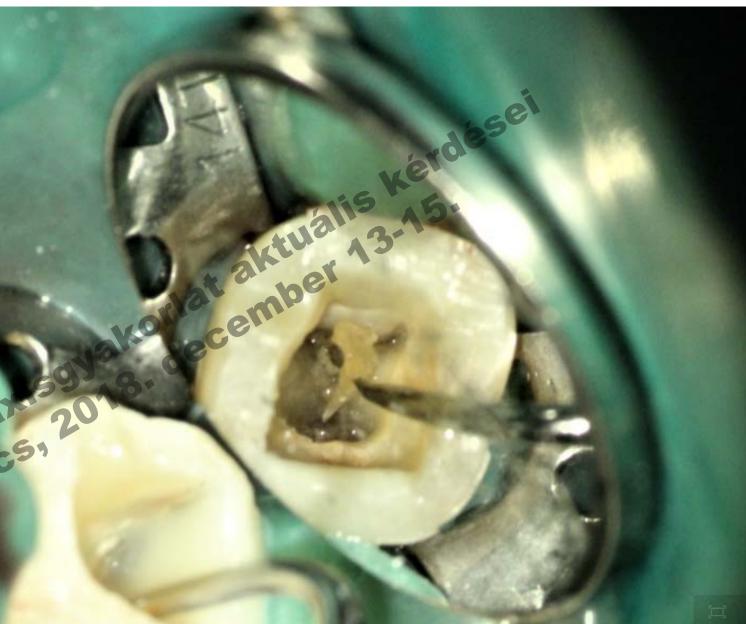




Kalcifikáció a pulpakamra alapon

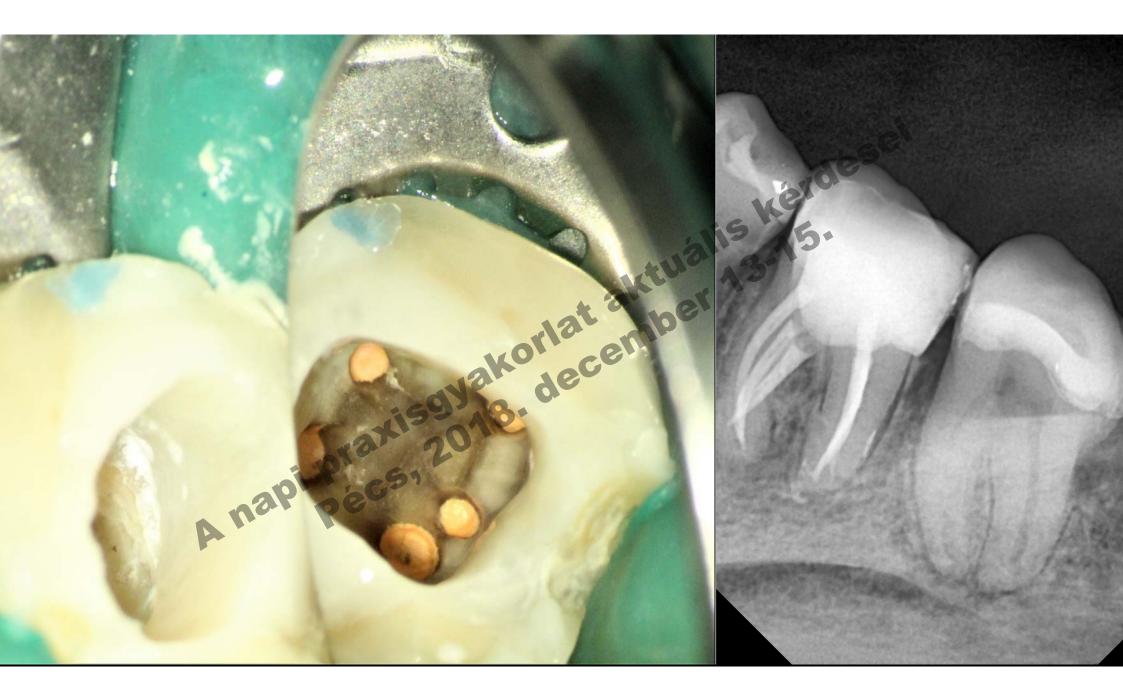








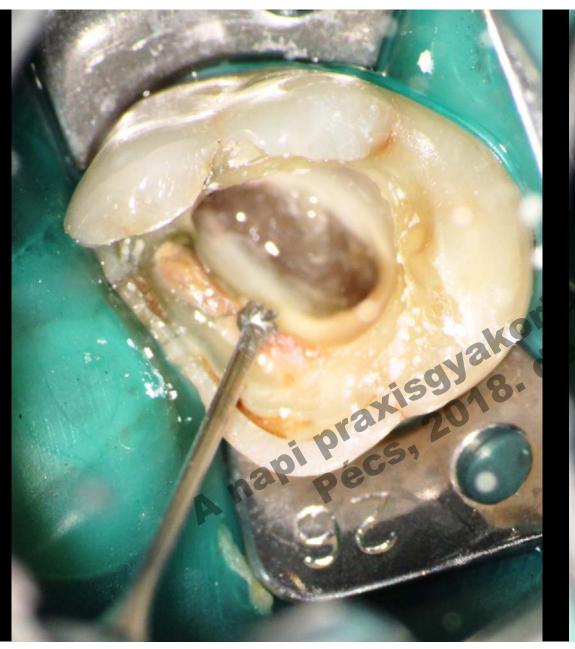


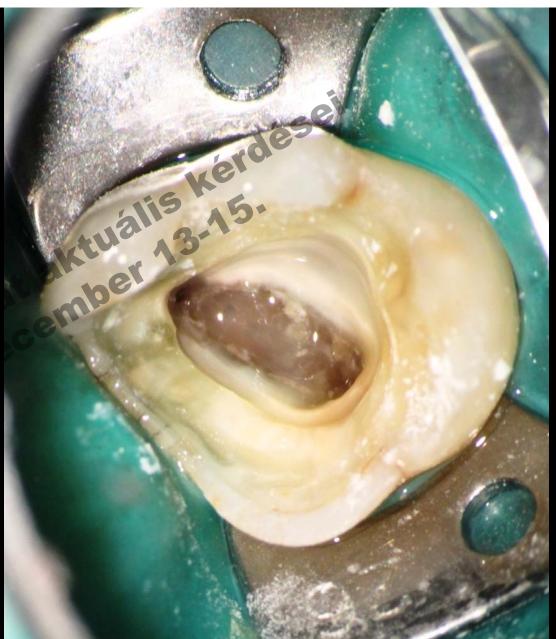


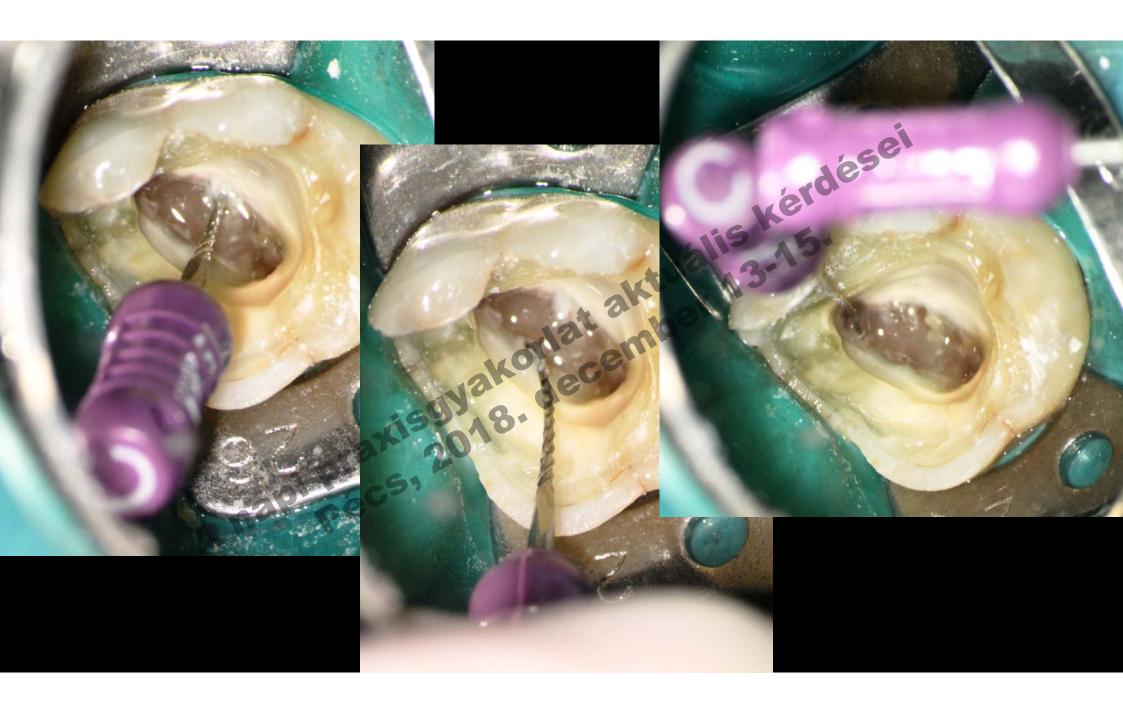
"Nehezen lokalizálható" csatornák



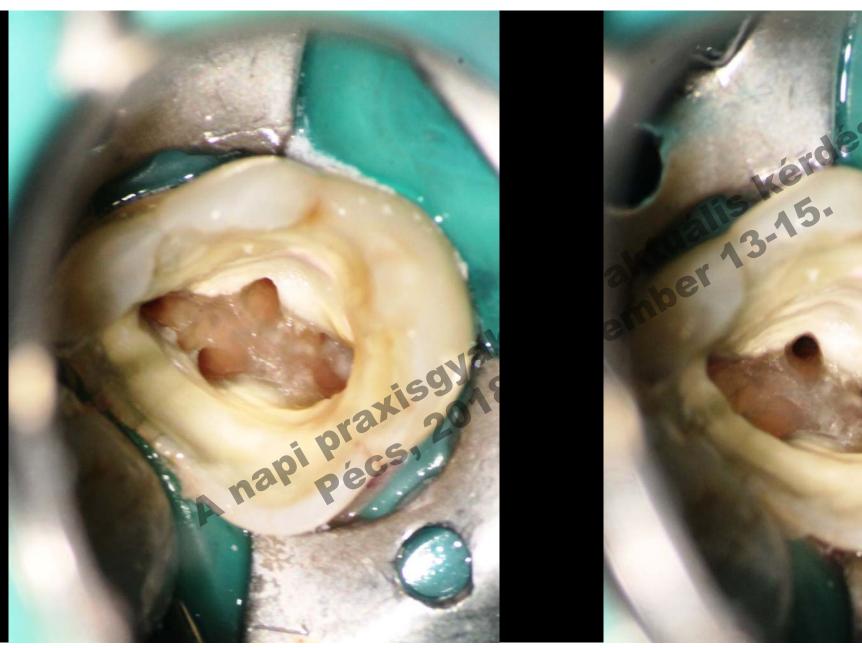










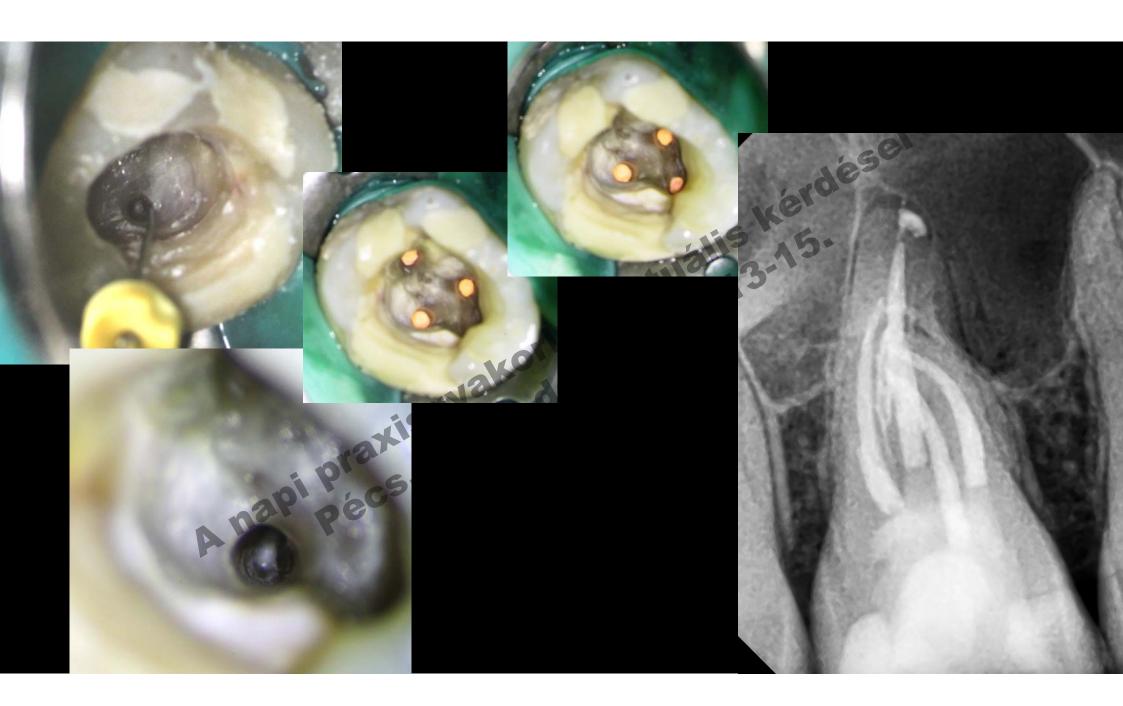












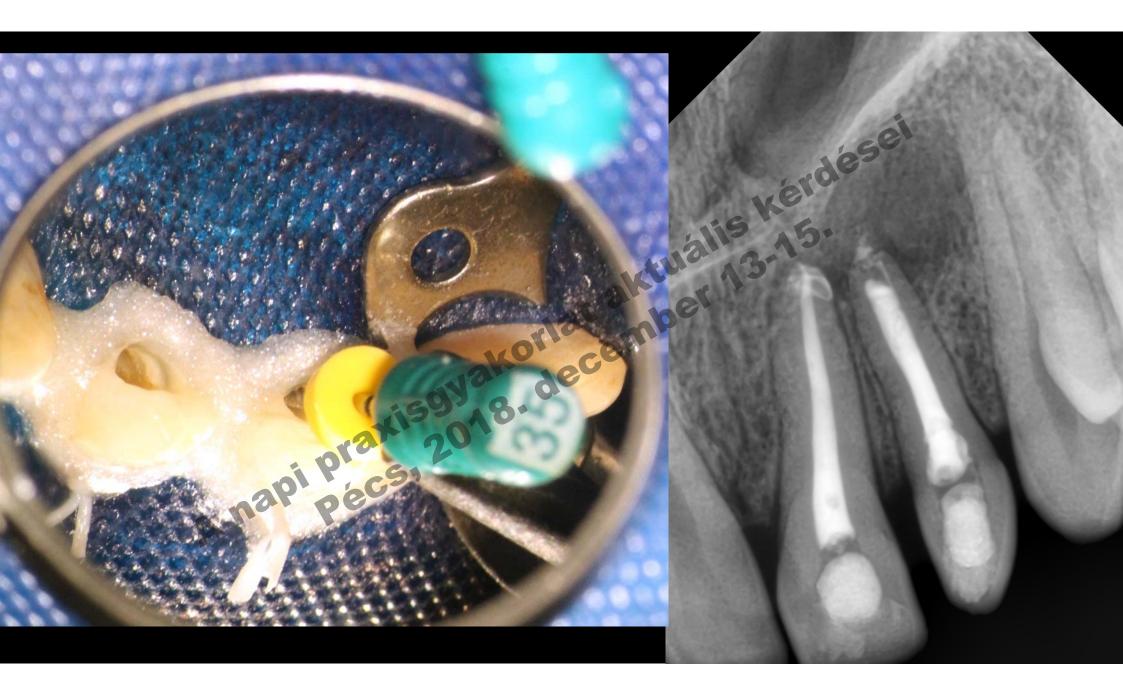
Több fog izolálása



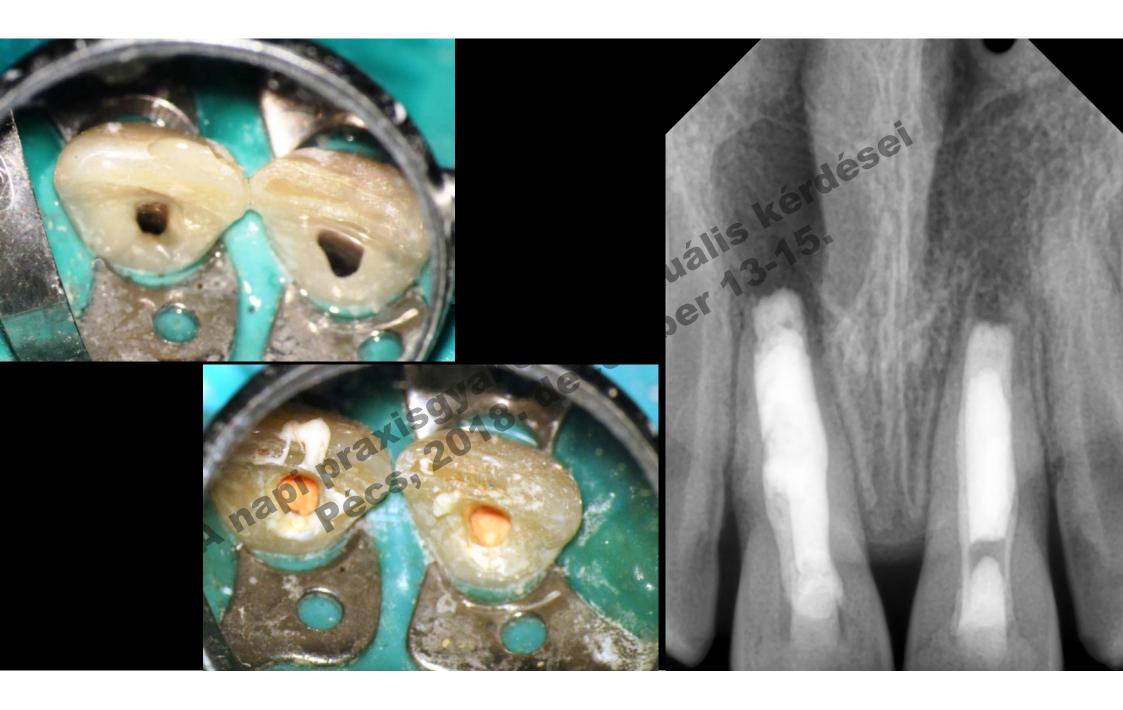












Nehéz kapocsrögzítés



Összefoglalás

Kofferdam izolálás kötelező.

Sokan mégsem alkalmazzák.

Egyszerű alaptechnika (szárnyas).

Előfordul izolálási nehézség.

Destruált fog helyreállíthatósága kérdéses.

Quality guidelines for endodontic treatment: consensus report of the European Society of Endodontology

Contra-indications for root canal treatment

- 1 Teeth that cannot be made functional nor restored.
- 2 Teeth with insufficient periodontal support.
- **3** Teeth with poor prognosis, uncooperative patients or patients where dental treatment procedures cannot be undertaken.
- **4** Teeth of patients with poor oral condition that cannot be improved within a reasonable period.

