Endodontic treatment – from acces to the working length

Phases of the endodontic treatment

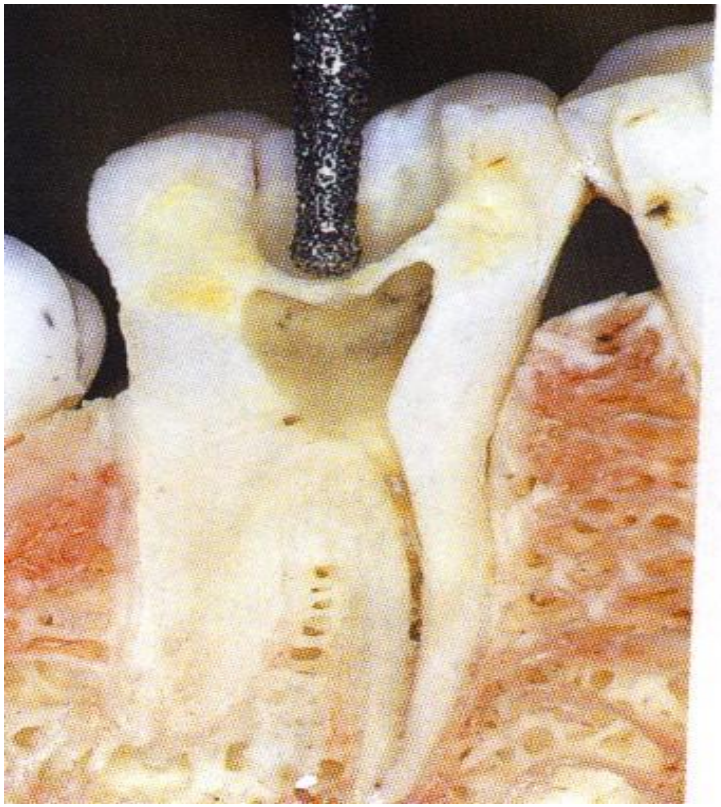
- **Investigation, diagnostic radiogram, consideration (local, regional, systemic factors)**
- **Removal of old fillings, carious dentin, temporary restoration - contours of treated tooth. Preendo.**
- **Dry operating field**

- **Preparation of the access (endodontic cavity)**

Phases of the endodontic treatment

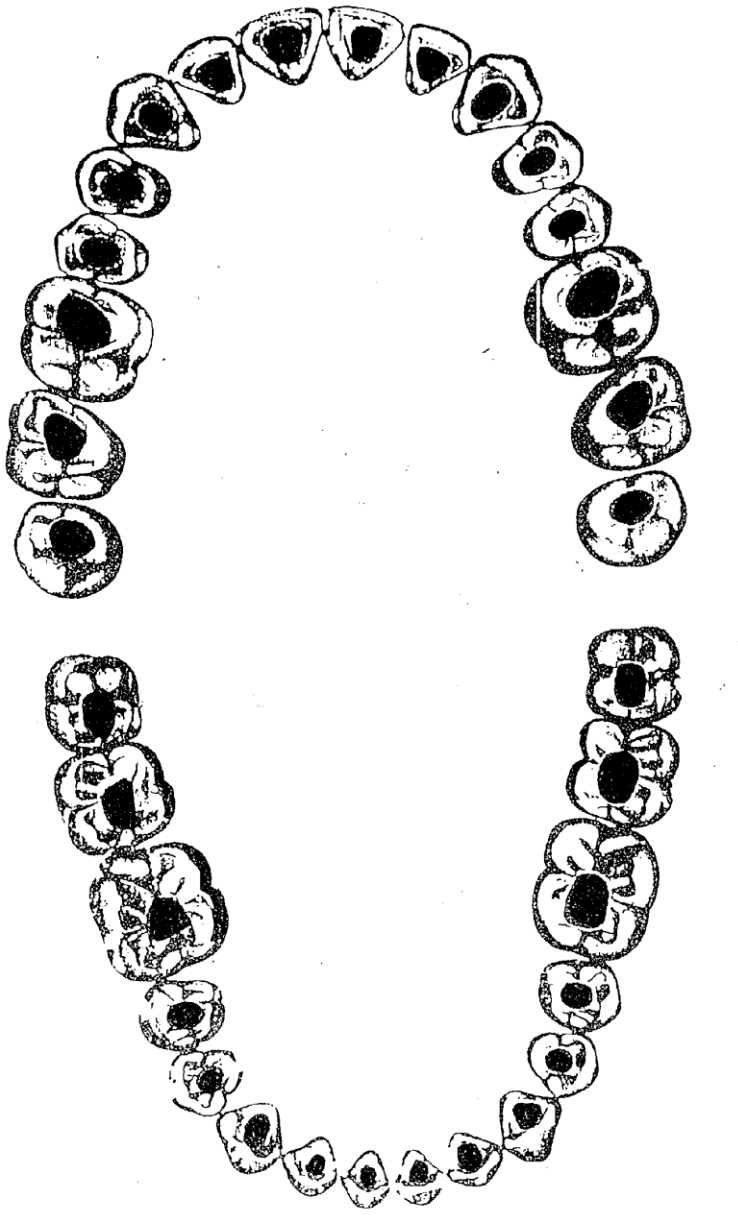
- Opening of root canals
- Initial flaring and removal of content of root canal
- WL (working length)
- Root canal shaping and cleaning (irrigation)
- Rekapitulation
- Drying
- Filling
- Radiogram
- Postendodontic treatment

Access

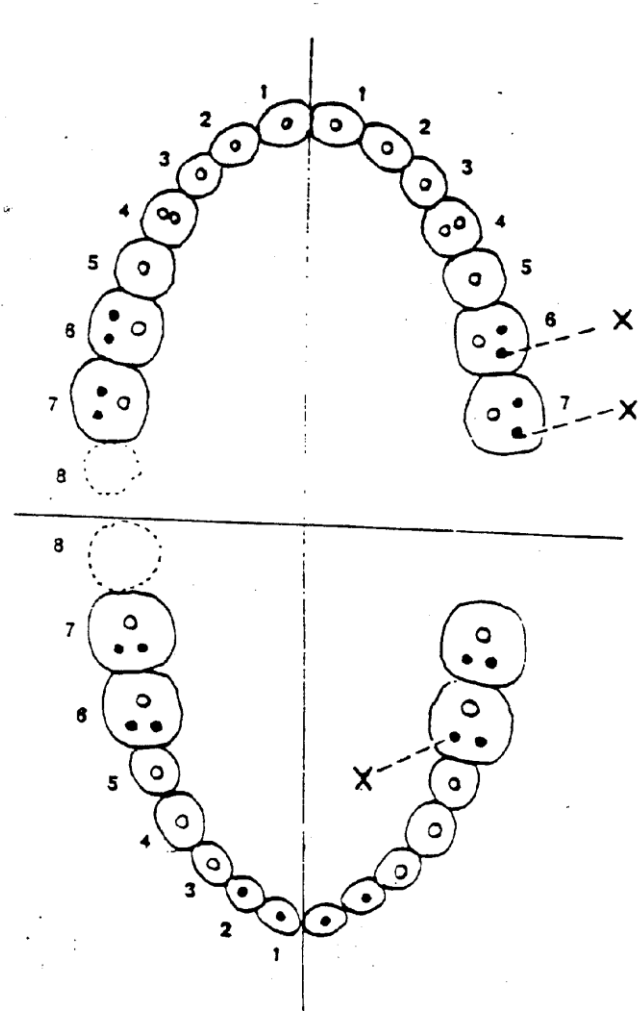


Shapes of endo cavities

See special material on is



Number of root canals
First upper molar – 4 root canals



Instruments

Dia trepan

Dia balls

Ball burs

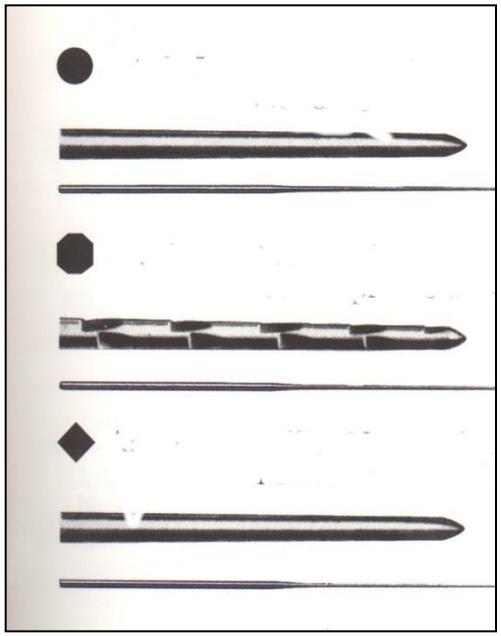
Preparation of the endodontic cavity

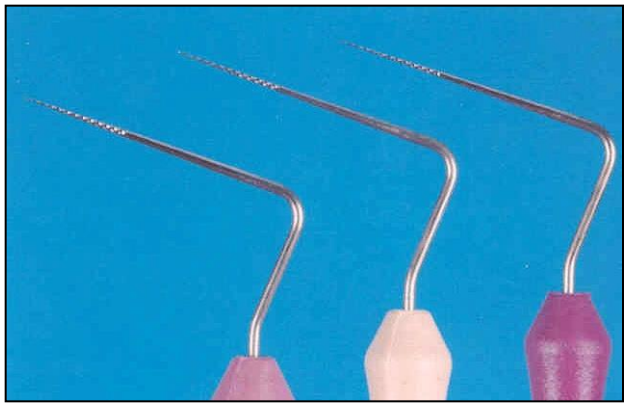
Dia trepan

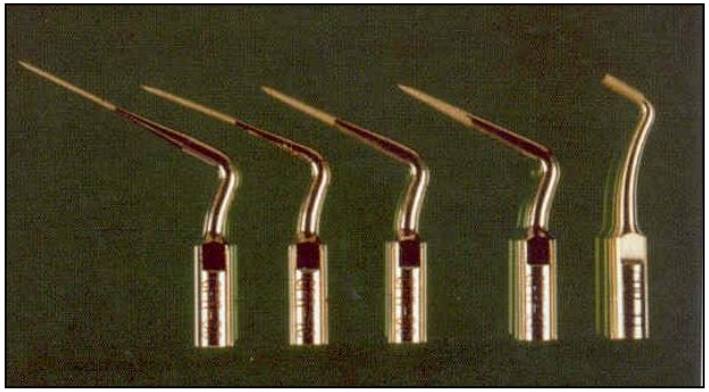
Safe ended tips
Batt´s instruments

Fissure bur

Find of root canals



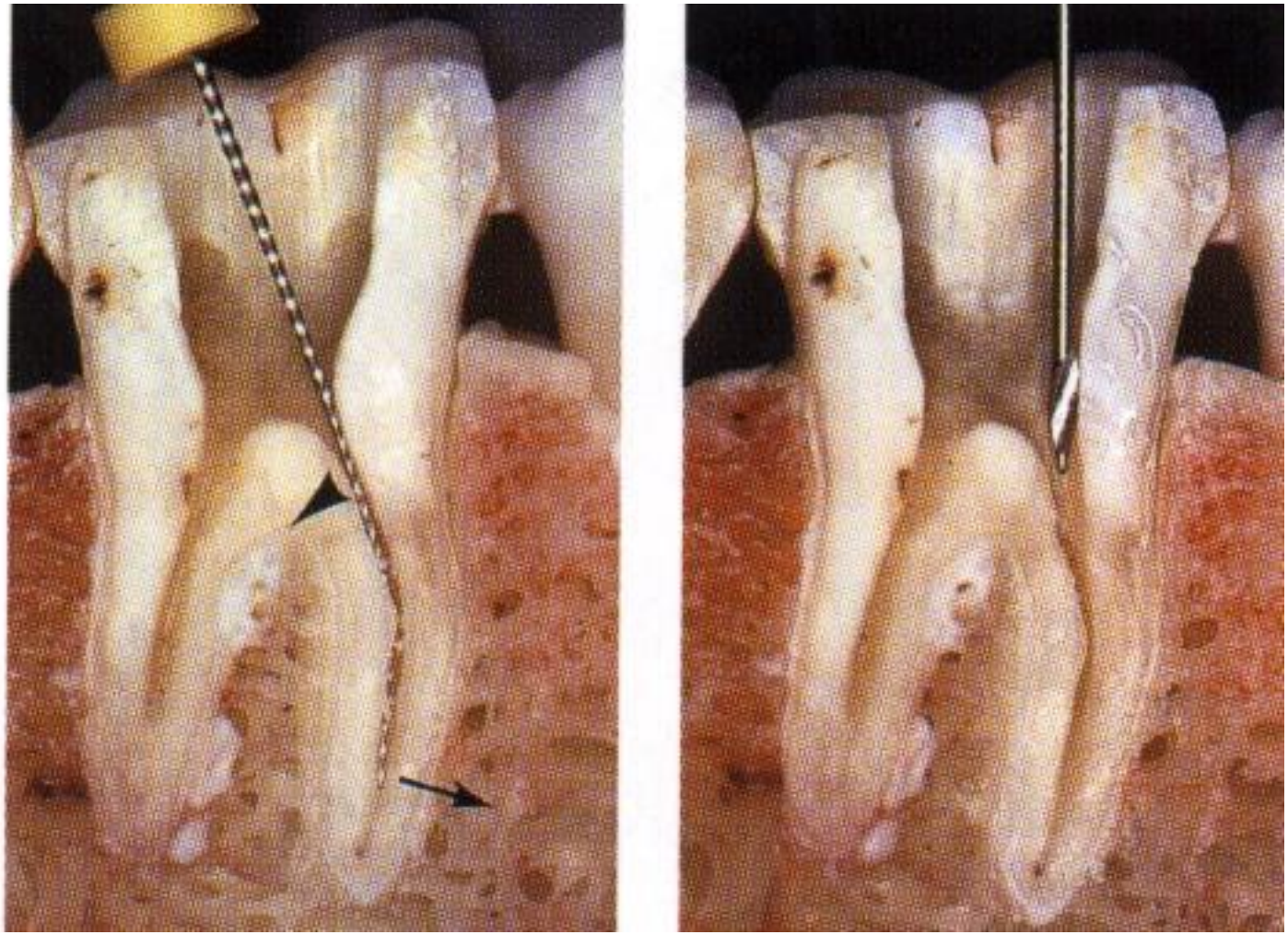




Endodontic probes, microopeners

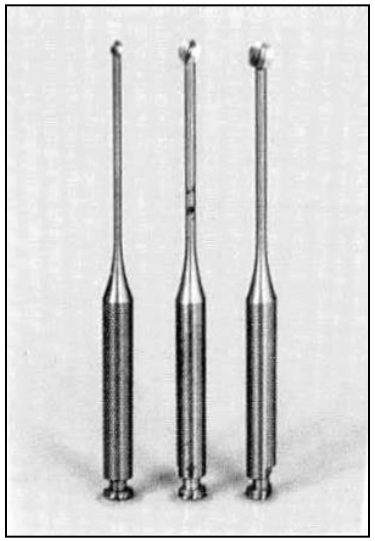
Ultrasound tips

Opening of root canal orifices

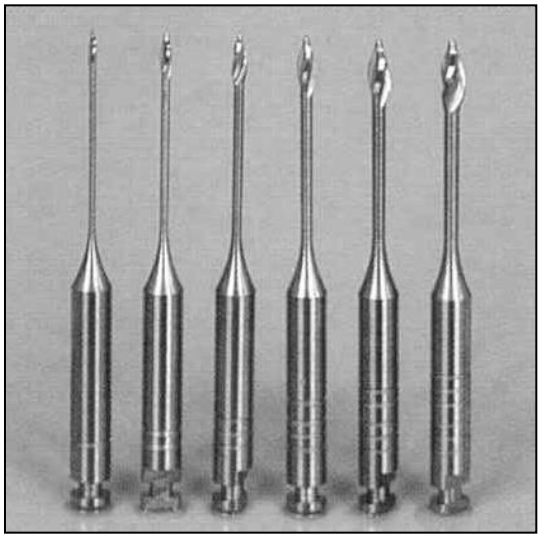


Opening of root canals

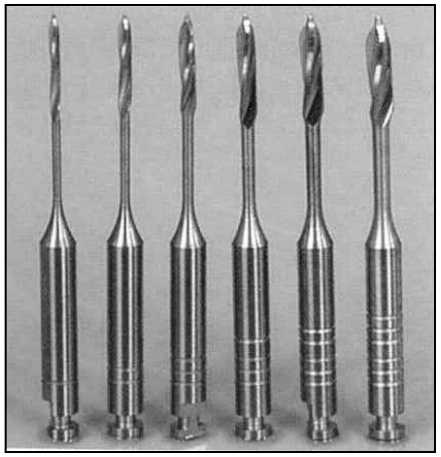
Ball burs



Miller‘s burs



Gates Glidden‘s burs



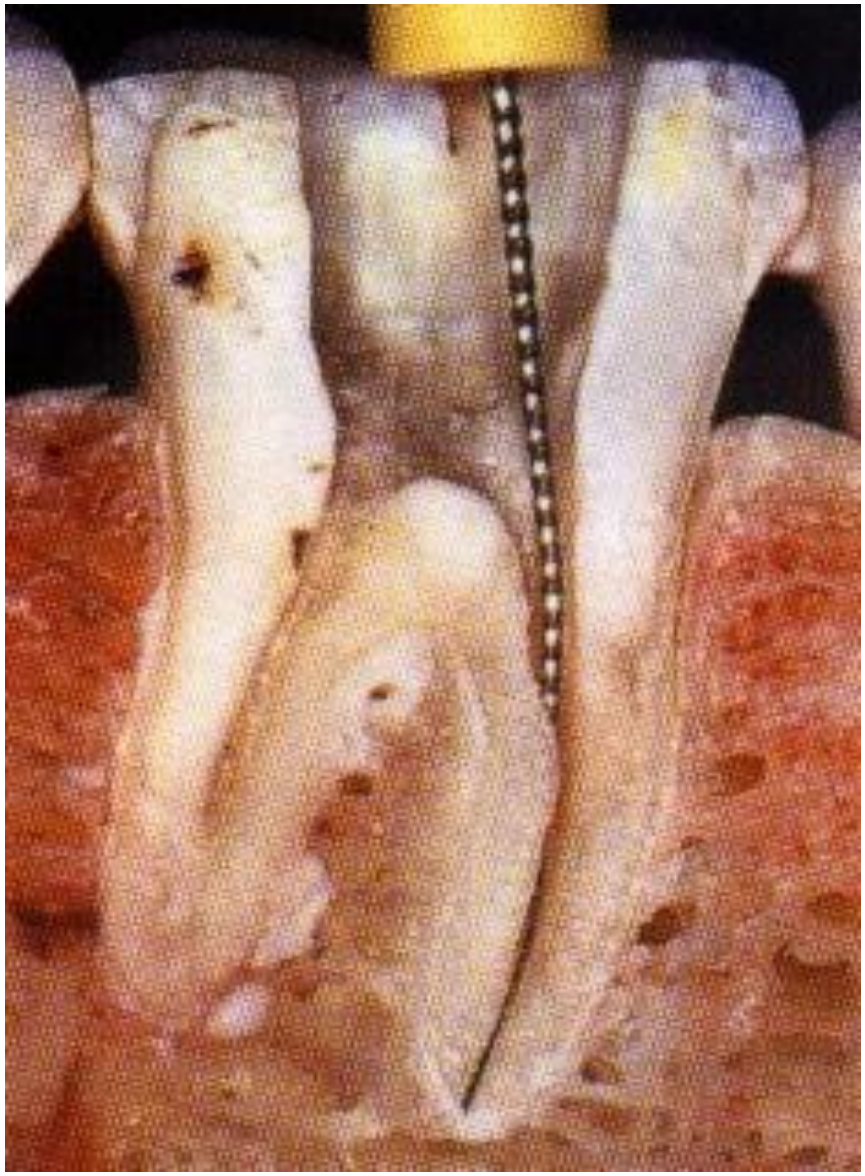
Peeso – Largo


DENTSPLY
MAILLEFER
F 0001 016
E 0153 012
E 0123 010
E 0123 014
F 0199 016
X-Gates

Access kits


DENTSPLY
MAILLEFER
F 0001 016
E 0153 012
E 0123 010
E 0123 014
Endo Z
X-Gates

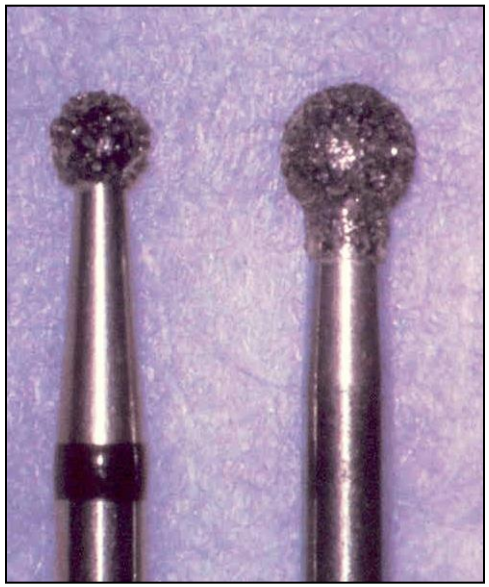
After opening of the access and shaping of the root canal orifice



The pulp chamber correctly open

Opening of the pulp chamber Access

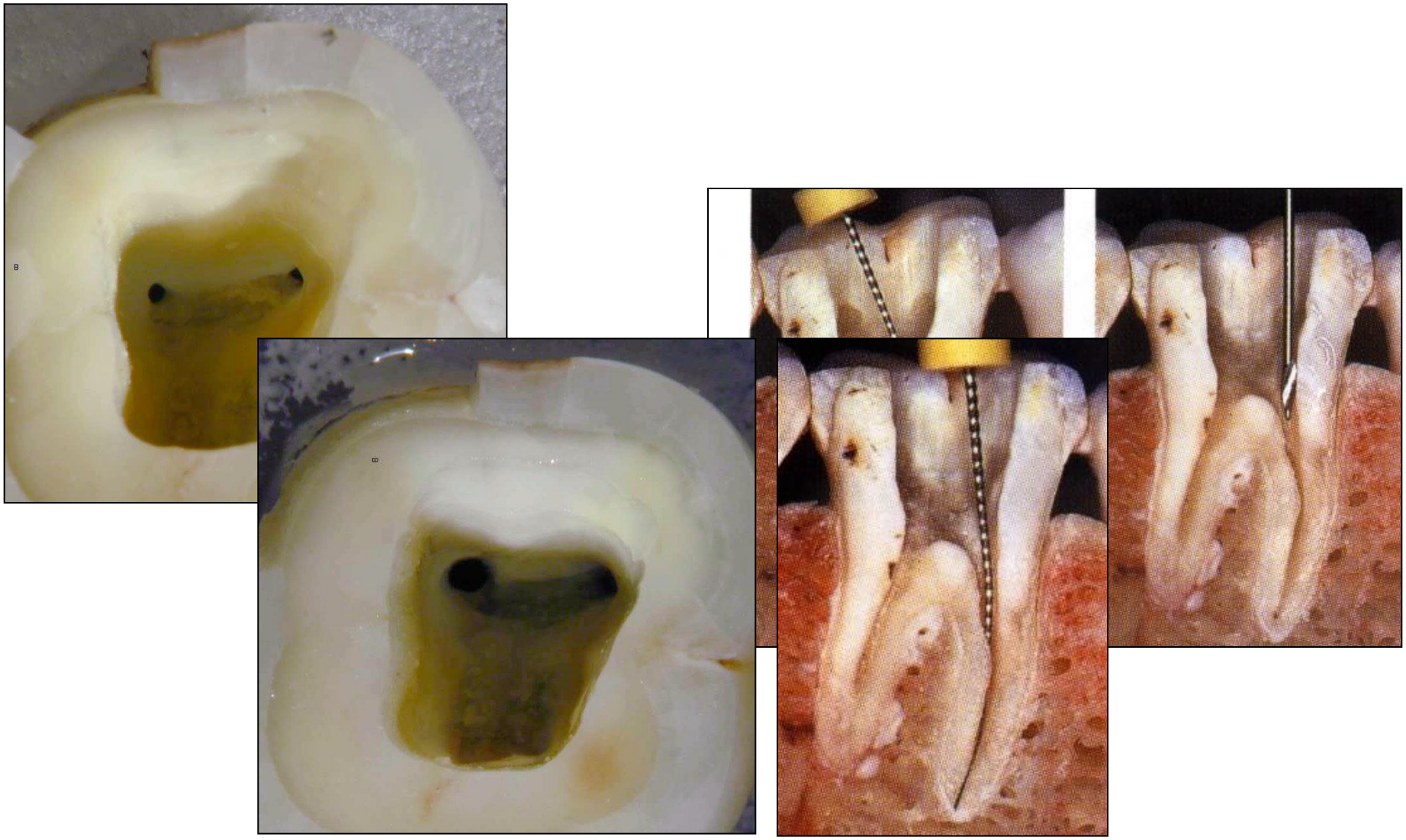
Dia trepan



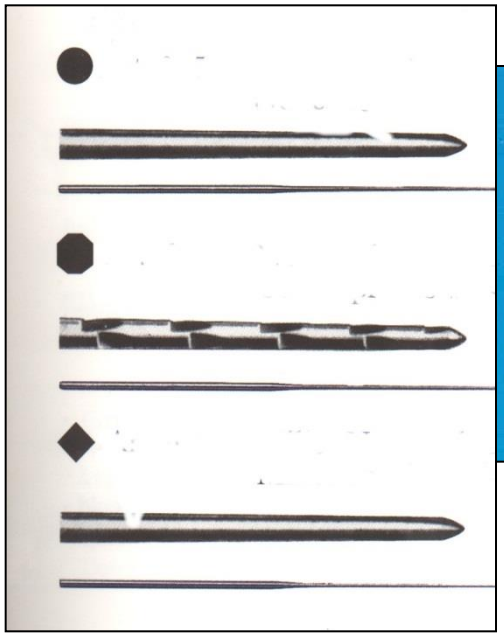
Dia round burs – balls

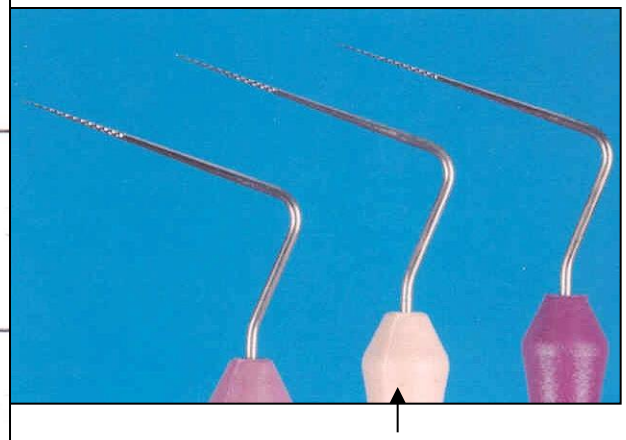
Steel round burs

Finding of the root canal orifice

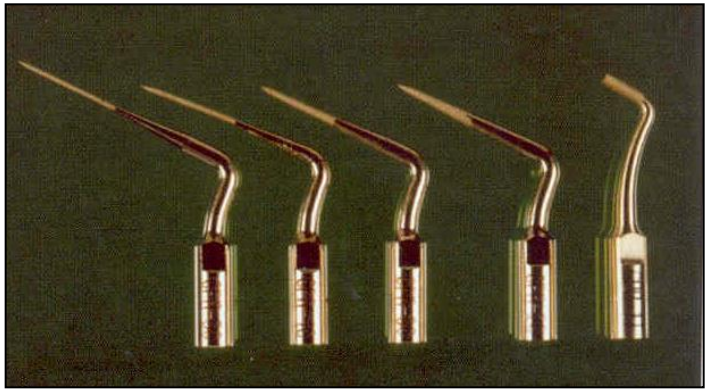


Finding and opeing of rot canal orifices





Endodontic probes
Microopeners

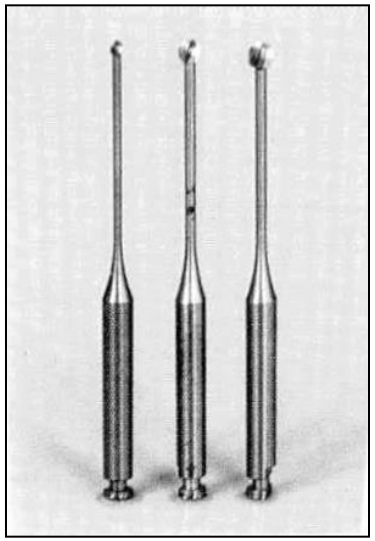


Ultrasound tips

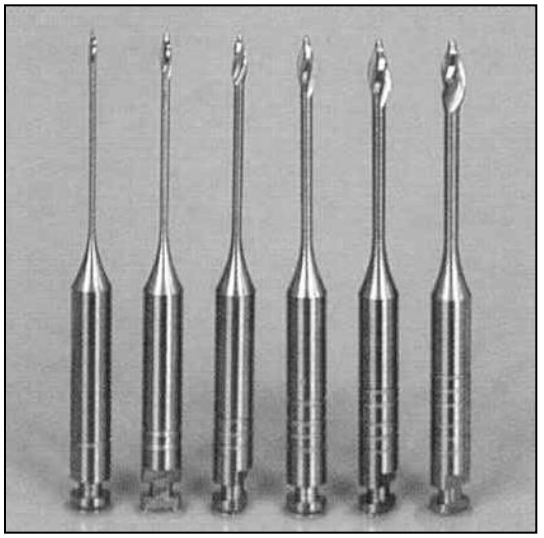
Dye

Finding and opening of root canal orifices

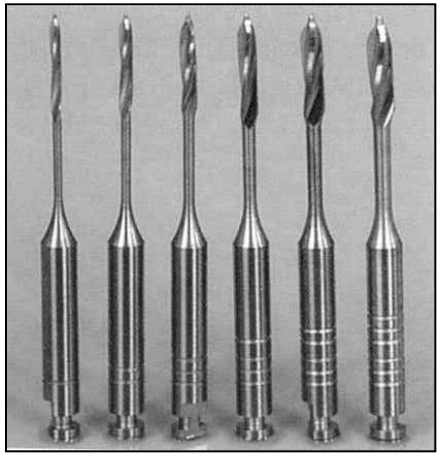
Rounded burs - balls



Miller´s burs



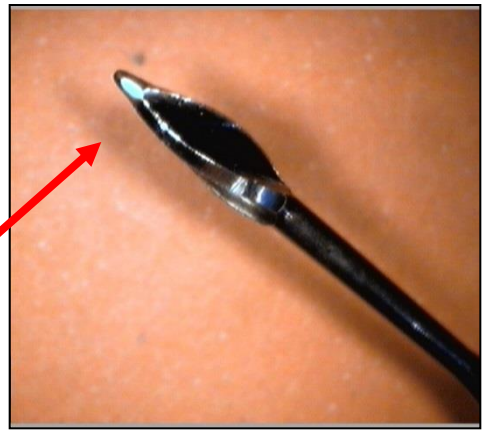
Gates Glidden´s burs



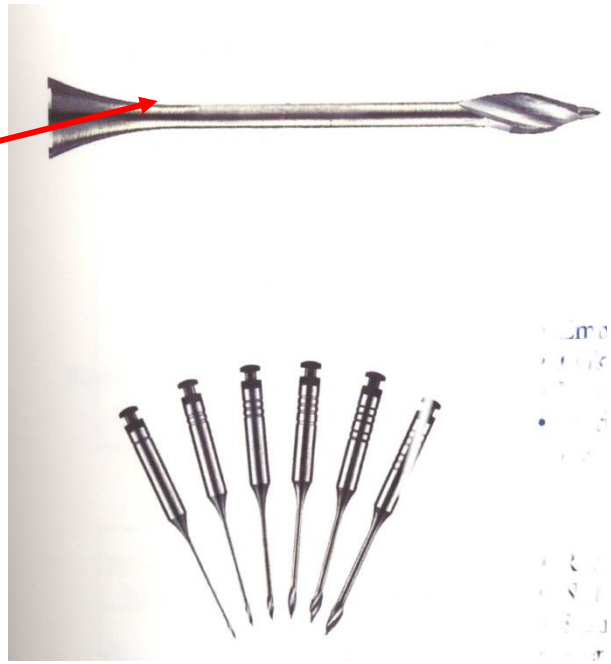
Peeso – Largo


Gates - Glidden


Peeso-Largo



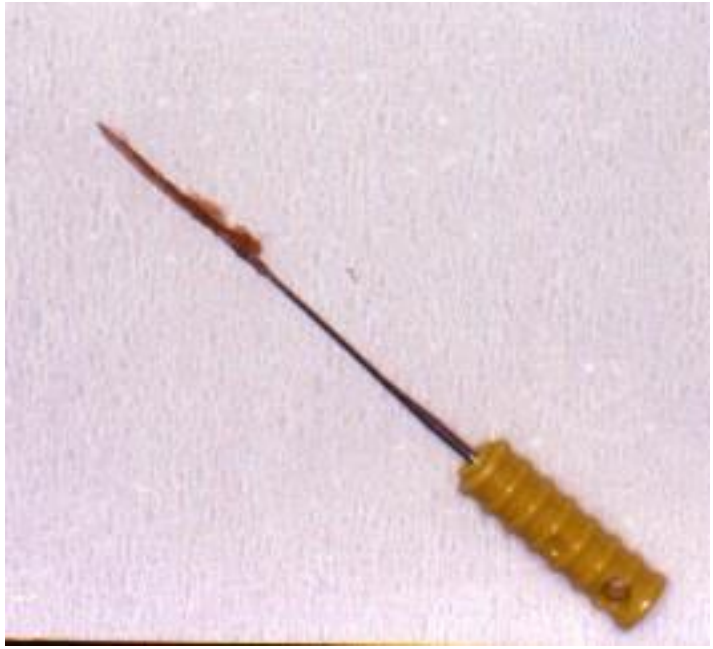
Gates – Glidden:
Blunt, non active tip



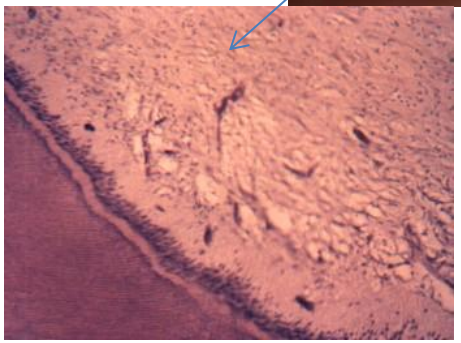
Programm point of breakage

Ultrasound

Pulpextractor



Dental pulp



Soft wire
Prickles like harpune
Insertion
Rotation
Exstirpation

Canal shaping

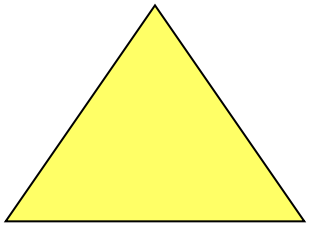
- Reamers (penetration)
- Files (shaping)

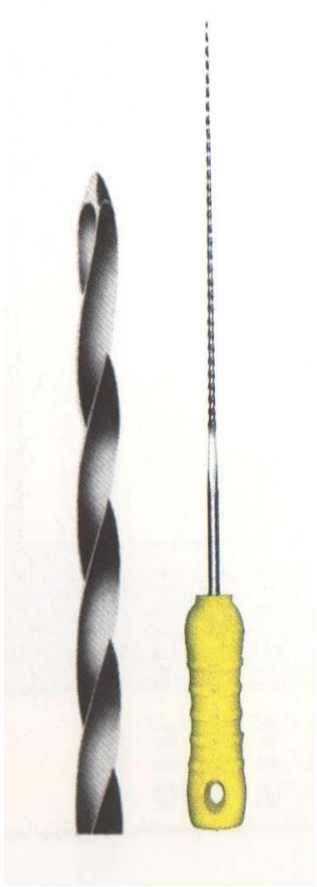
Reamer

K -reamer

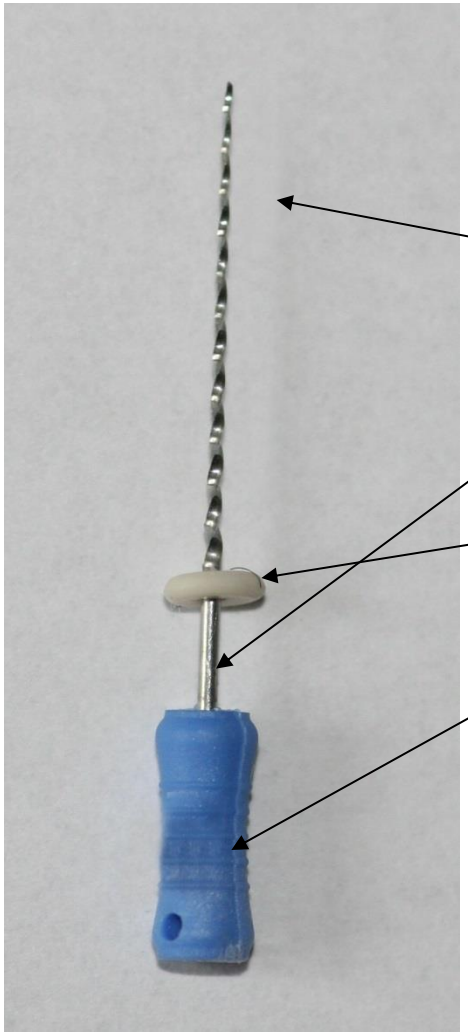
Triangl or square wire spun

Symbol





Reamer



Bladed part

Shank

Stopper

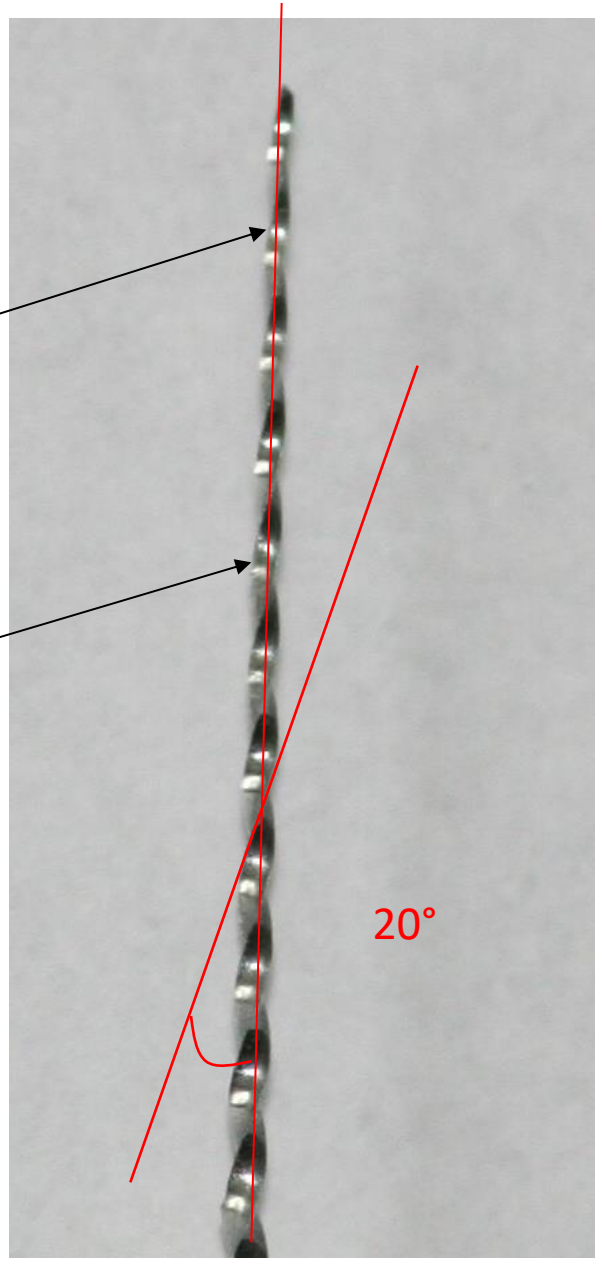
Grip

Reamer

Blades

Space for dentin chips

Rotation – reaming achtion - panetration



Reamer

Rotation (clockwise) – penetration

Application of plastic material (contraclockwise)

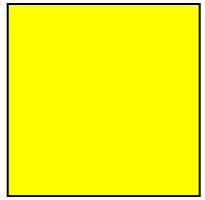
Files

1. **K-file**
2. **K-flexofile, flexicut, flex-R**
3. **K-flex**
4. **H-file, S-file**

K file

Wire triangl or square

Symbol is always square

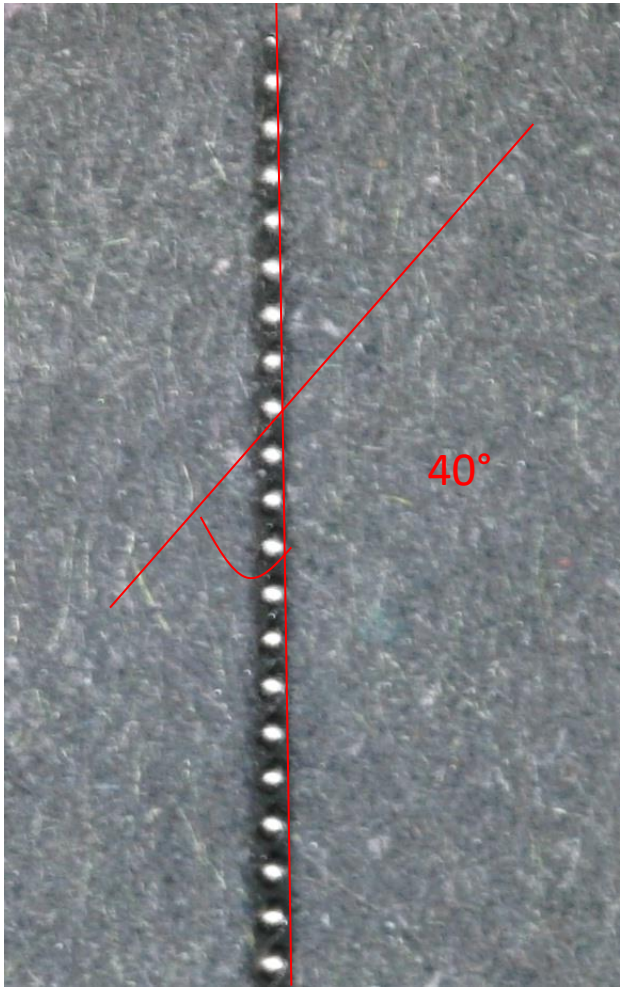


K-file

Filing

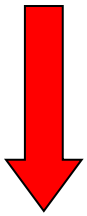
Also rotation

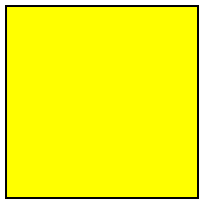
45° – 90°



K-flexofile, flexicut, flex-R

- Triangle wire always



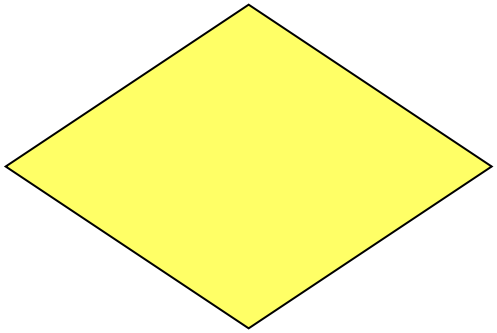


Flexibility

K- flexofile a flex – R file: non cutting tip and first blades are blunt

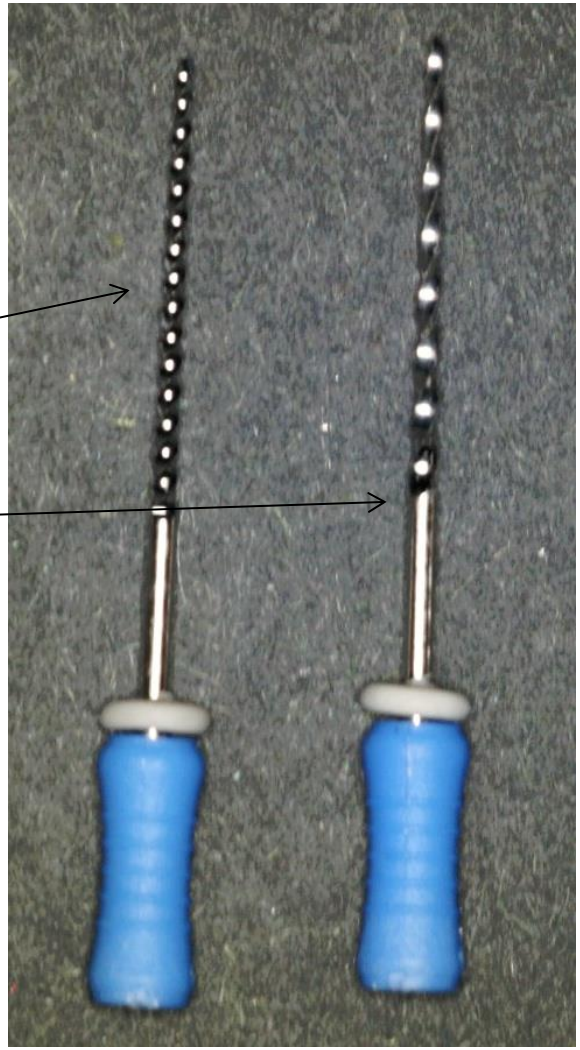
Like K-file

K- flex



Rhombus
Two blades in action
Enough space for dentin chips
Flexibility, effifacy

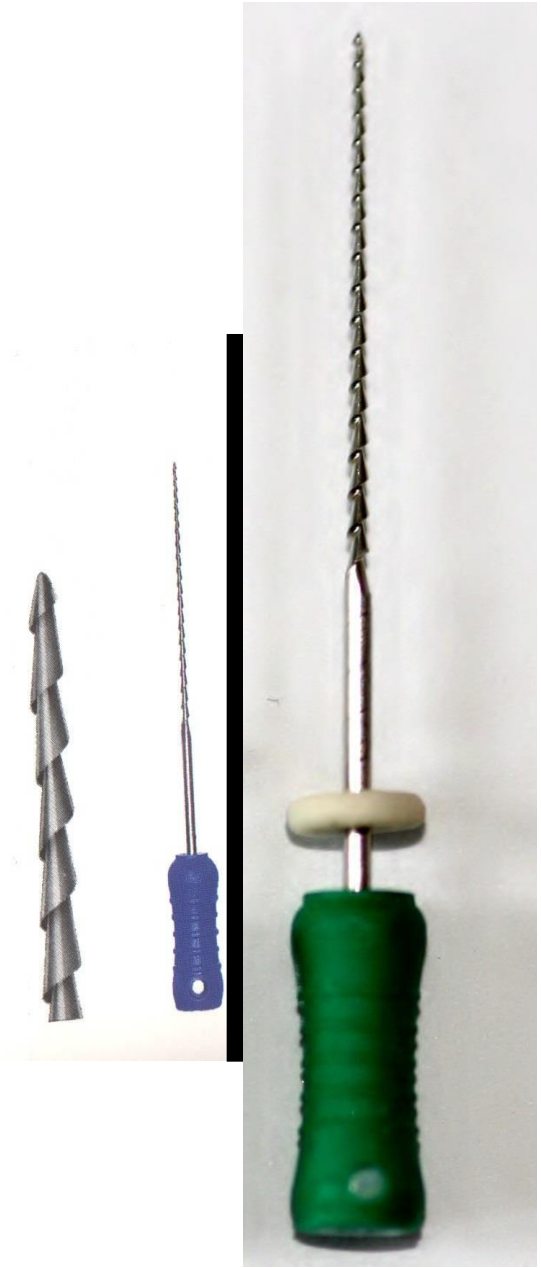
K-file and reamer: the difference



H-file

= Hedstroem file

Ring

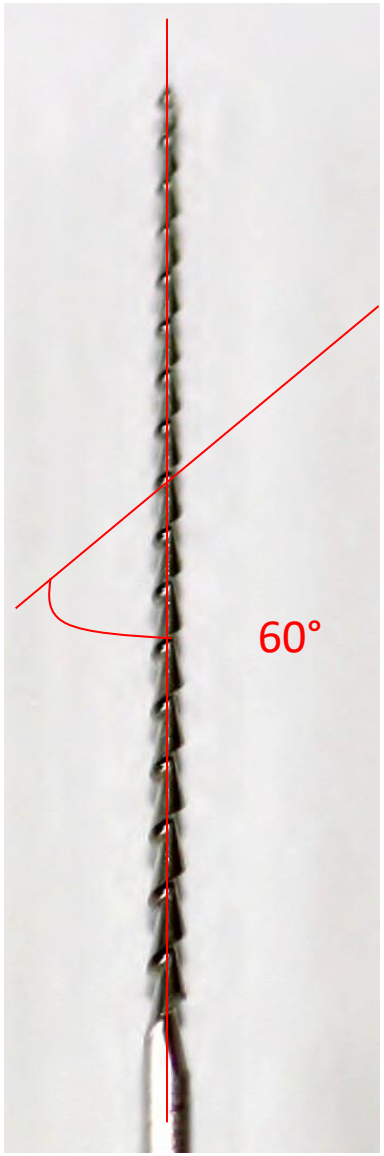


H- file

No rotation!!

Pull motion only!!

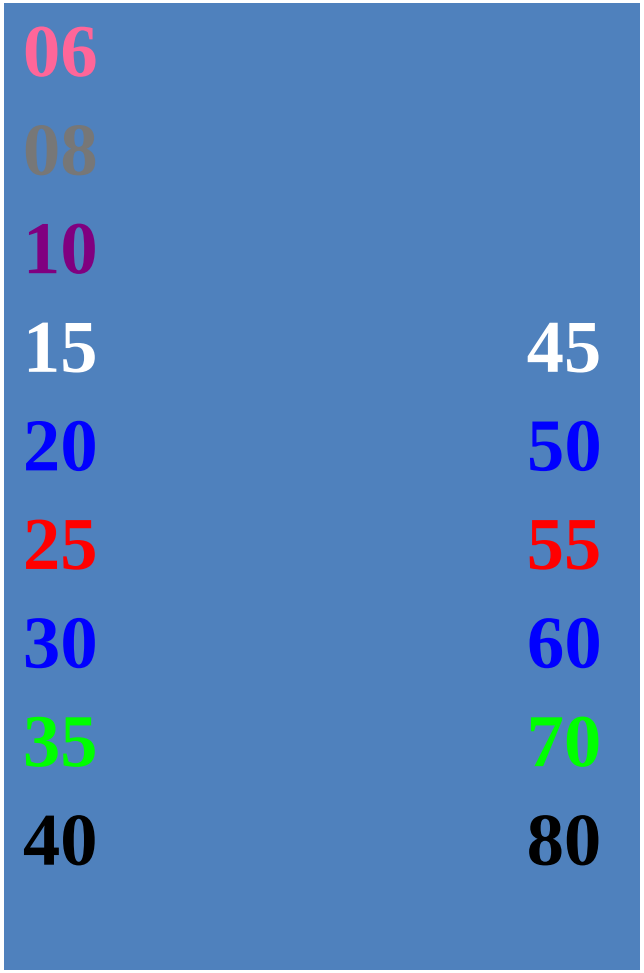
Risk of breakage in small sizes



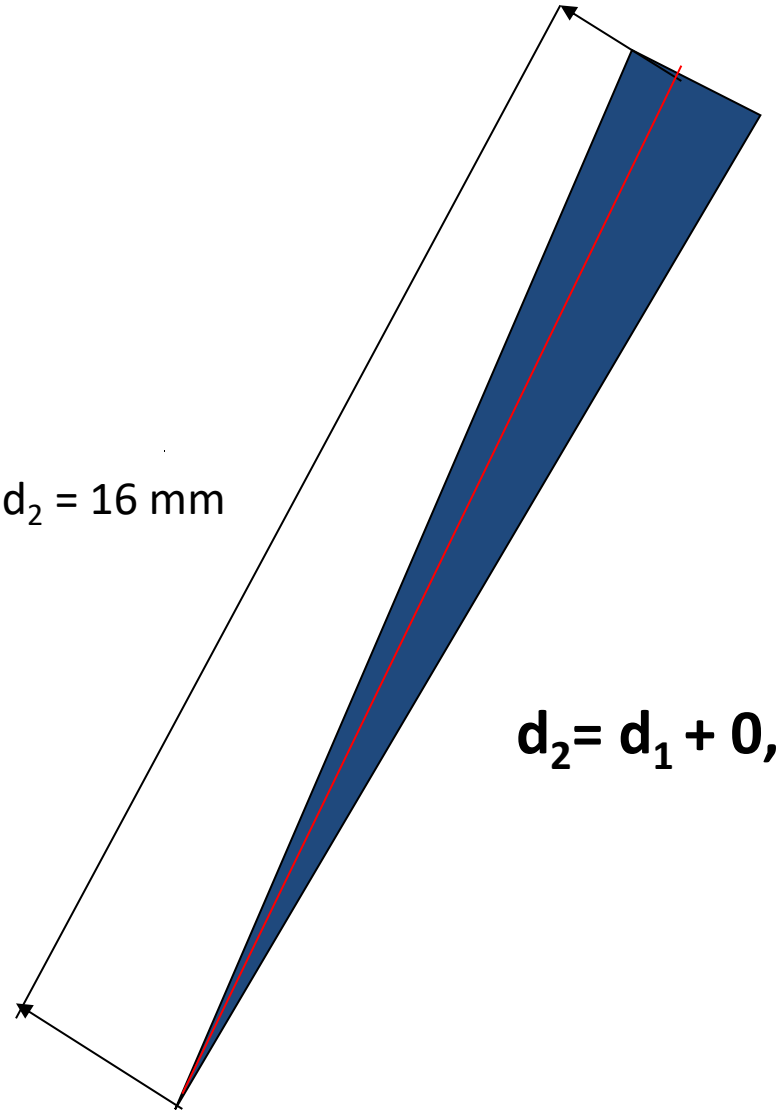
ISO

- Diameter of the tip
- Length of the cutting part
- Taper

ISO standard



Size – diameter at the tip



d_2

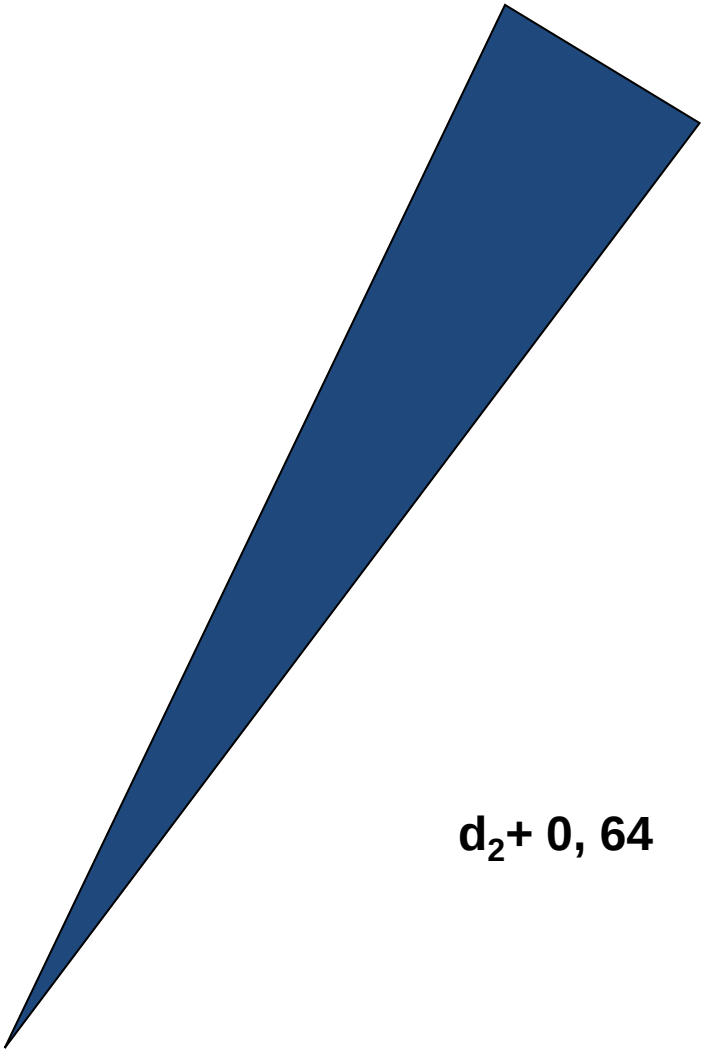
$d_1 - d_2 = 16$ mm

$d_2 = d_1 + 0{,}32$

d_1

Taper 2%

0,02 mm na 1mm



d_2

Taper 4%

d_2+ 0, 64

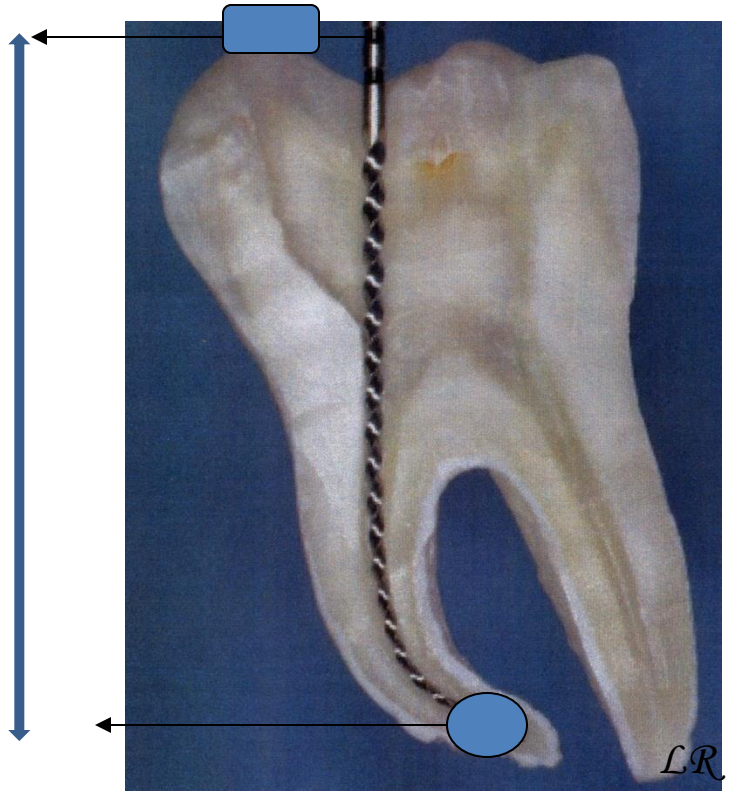
d_1

0,04mm na 1 mm

Working length

- Distance between the referential point and apical constriction

- Radiographically
- Apexlocators
- Combination



Why apical constriction

- Small apical communication
- Minimal risk of damage of periodontium
- Prevention of overfilling
- Prevention of extrusion of infection
- Good decontamination
- Godd condition for root canal filling

$\mathcal{LR}$

Radiogram

X-ray with inserted root canal instrument

Safe length: average length of teeth reduced for 2 – 3mm

Tooth with clinical crown

Safe length
Averige length of the tooth less 2 mm

- Maxilla:

I1 20

I2 18

C22-24

P20

M 18 mkk,20 P

Safe length
Averige length of the tooth less 2 mm

- Mandible

I 18

C20 -22

P18

M18

Procedure

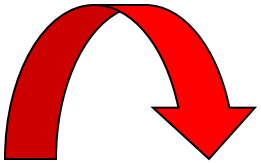
- Instrument ISO 15 inserted into the root canal, stop at the referential point
- Estimation of location of apical constriction (1 – 1,5 mm distance from x-ray apex.

If diference in the radiogram more than 2 mm - repeat

If 2 mm or less – add to the safe length

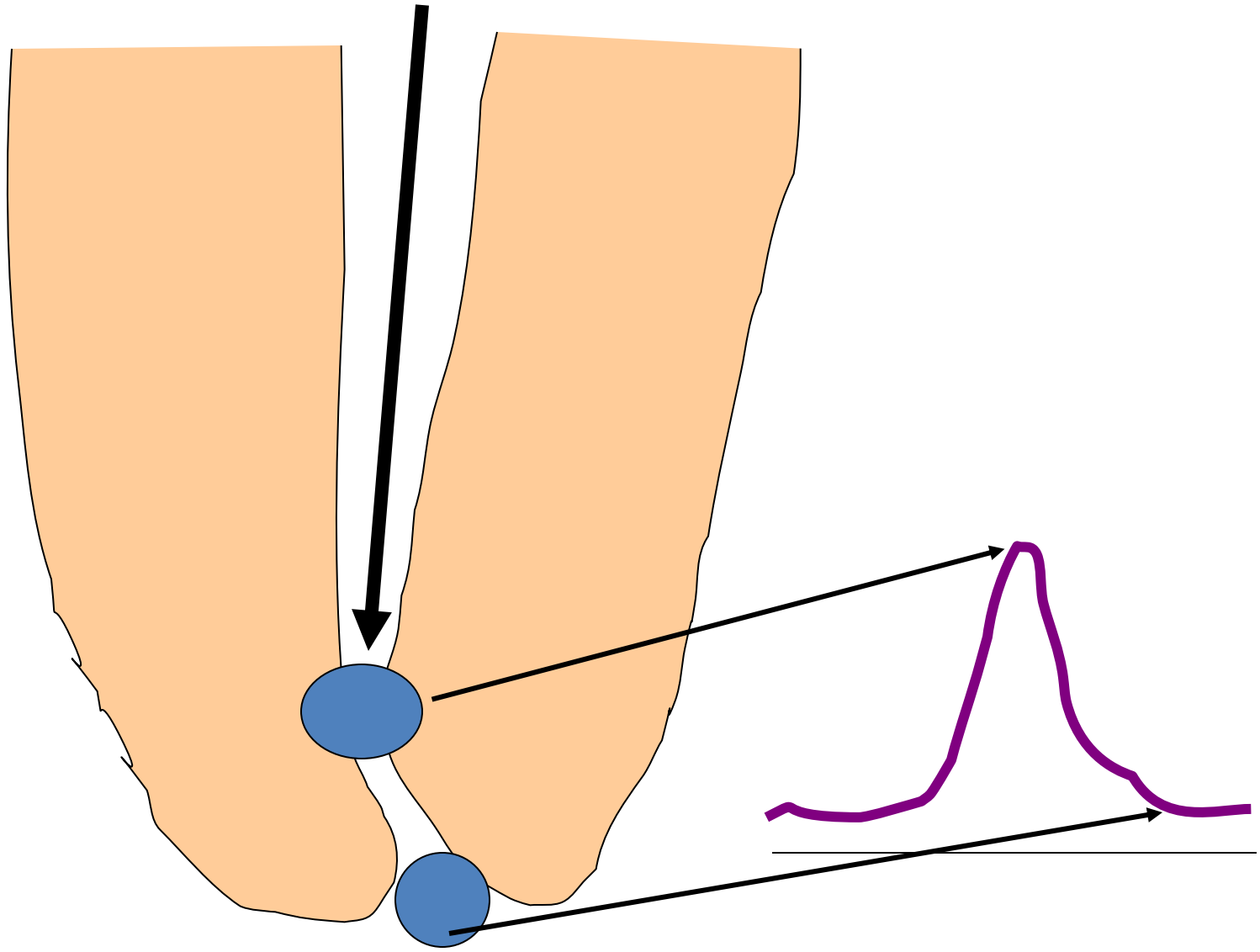
Endometry, odontometry

- Endometry

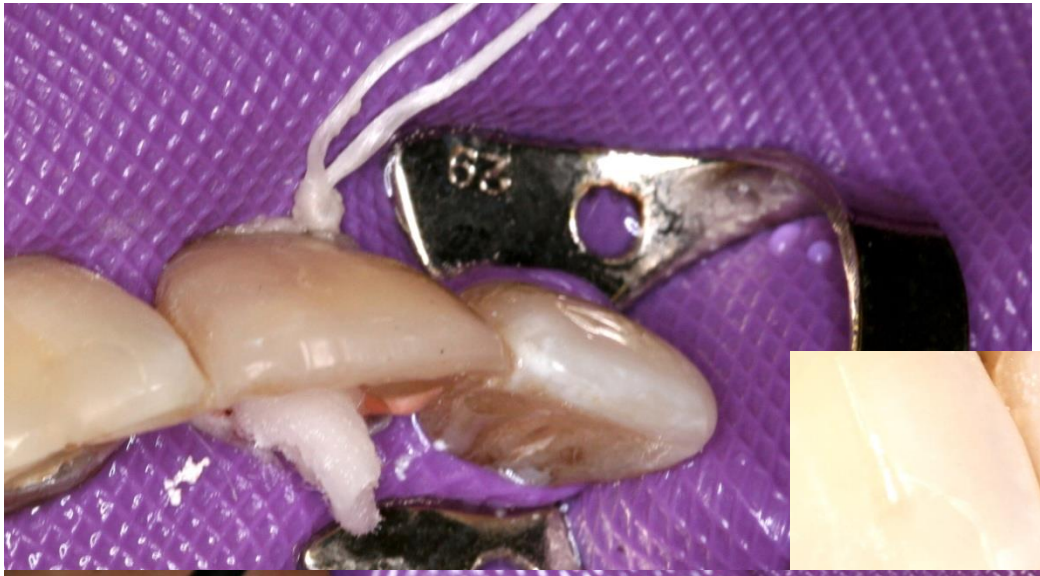


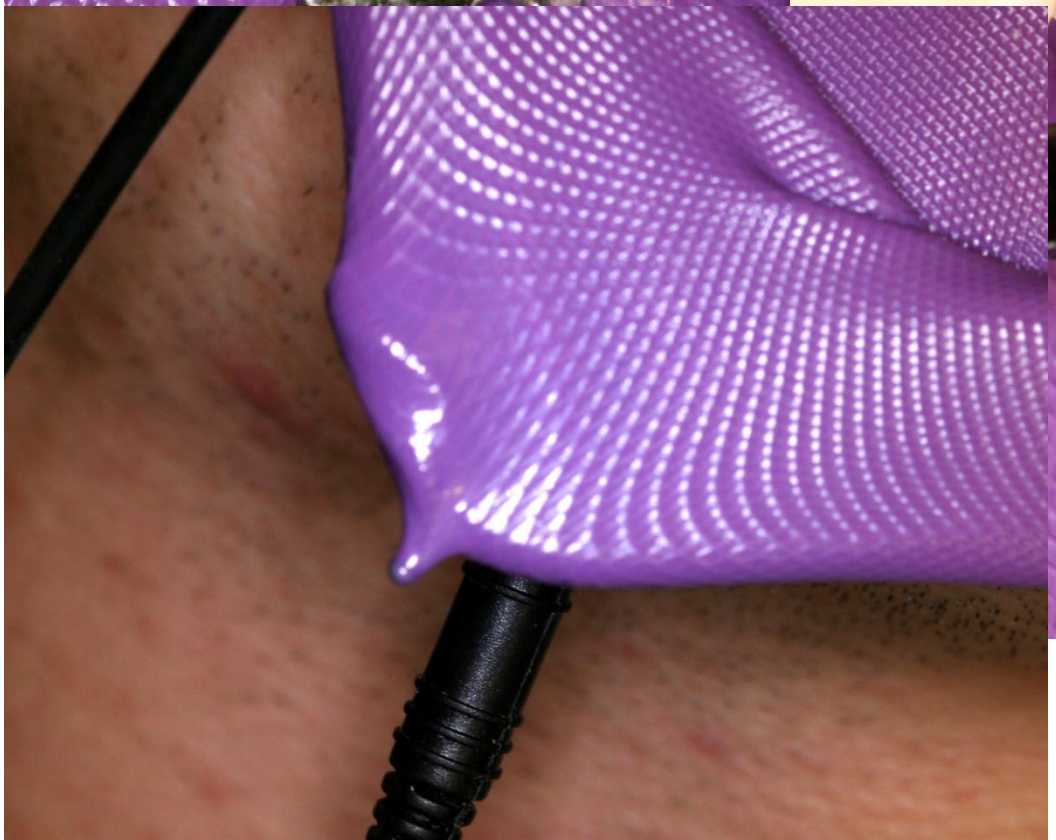
edevices based on measurement of electrical resistance

$\mathcal{LR}$



$\mathcal{LR}$





LR

RAYPEX® 6

Methods of shaping

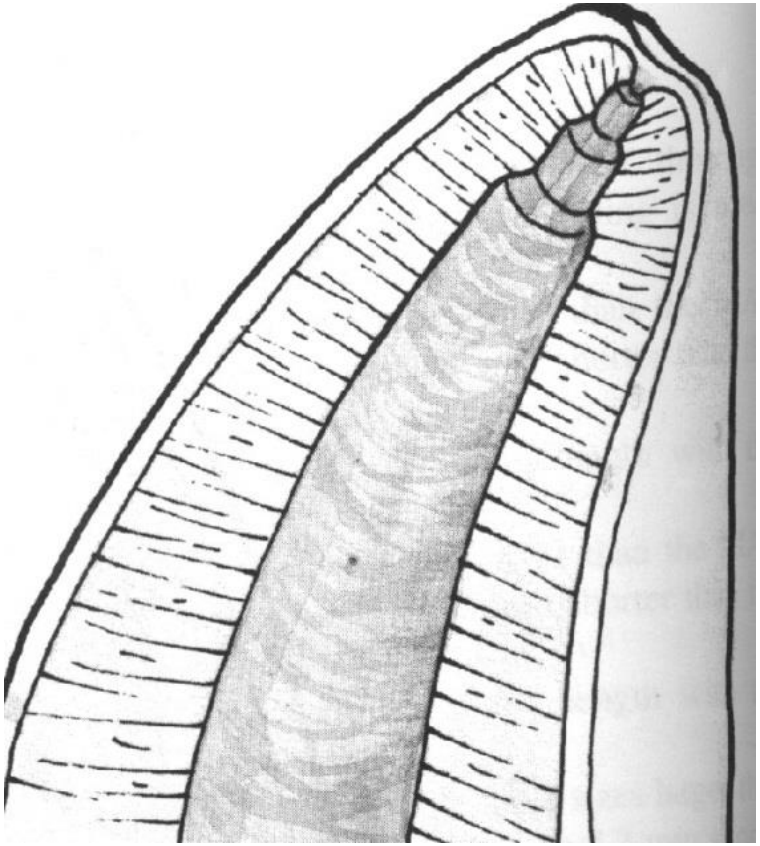
- Step back method

Increasing size with decreasing length.

Insertion of root canal instrument – WL

Next – 1 mm shorter

…



Taper
Final flaring with
the smallest instrument

H- File nebo K - Flexofile.

Method modified double flaerd

- I. Opening of root canal

- Coronal third

- II. Apical preparation

Cathetrization,measurement, shaping till ISO 30 – 35 balanced force. Master file – MAF (till WL)

- III.Step back
- Final flaring (MAF)