



# Newsletter

## PRAIRIE ENDODONTICS

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Happy New Year!

We are excited to launch the first issue of our Newsletter. Our goal is to share with our referring offices an interesting clinical case, a piece of literature (Abstract) and new technology that is part of our armamentarium.

We hope you enjoy it!

Cheers,

*Rodrigo, Simona and Mike*

Prairie Endodontics - Winnipeg - MB

## Case Report

Endodontic treatment of a Dens-in-Dens with pulp necrosis and apical periodontitis

## Evidence-Based Endodontics

“Characteristics of Cracked Teeth with Reversible Pulpitis After Orthodontic Banding-A Prospective Cohort Study”

JOE - December 2022

## Technology

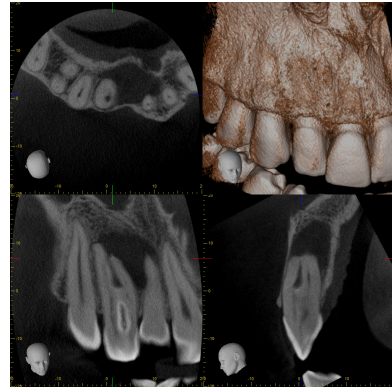
SLP EndoActivator  
Handpiece



# Endodontic Treatment of a Dens-in-Dens #12



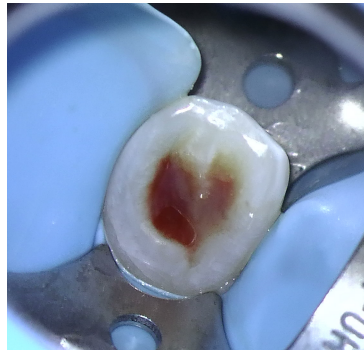
Preoperative radiograph



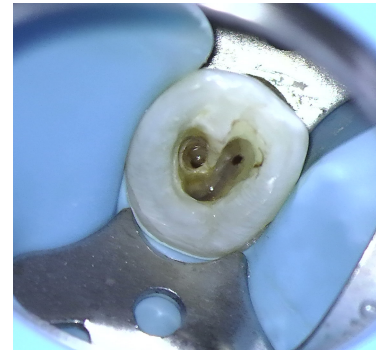
Preoperative CBCT scan image



Clinical aspect



Intra-canal drainage



Shaping and Disinfection



Postoperative radiograph



# Characteristics of Cracked Teeth with Reversible Pulpitis After Orthodontic Banding-A Prospective Cohort Study

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## Abstract

**Introduction:** Cracked teeth with reversible pulpitis can be managed with orthodontic bands in the interim before definitive restorations. The aim of this study was to determine short-term outcomes of these teeth following orthodontic band placement. The time taken for definitive pulp diagnoses after orthodontic band placement and associated prognostic factors was also analyzed.

**Methods:** One hundred twenty-five patients with a cracked tooth with reversible pulpitis each were recruited. Preoperative data including patient and tooth factors were collected. Cracked teeth were banded and reviewed until symptoms resolved before referral for coronal coverage. Kaplan-Meier and Cox analyses were performed to analyze pulp survival of these teeth. Prognostic factors were investigated using Pearson's chi-square and Student's t-test.

**Results:** One hundred twenty-two cracked teeth were analyzed. One hundred thirteen (92.6%) teeth had the pulpitis resolved within 2 months (median 40.0; interquartile range 28-61). The median time taken for progression to irreversible pulpitis or pulp necrosis for teeth that required root canal treatment was 3 months (median 90.0; interquartile range 68-110). No prognostic factors were associated with the resolution of pulpal symptoms. However, higher preoperative triggered pain scores ( $P < .05$ , hazards ratio 1.547) and absence of a distal marginal ridge crack ( $P < .05$ , hazards ratio 0.638) were correlated with a longer duration before definitive pulp diagnoses.

**Conclusion:** Following orthodontic band placement, a normal pulp diagnosis was achieved in 92.6% of cracked teeth with preoperative reversible pulpitis. Definitive pulp diagnoses could be determined in approximately 2 months. Teeth with higher preoperative triggered pain scores may require a longer review period.



## SLP ENDOACTIVATOR SYSTEM

The EndoActivator is designed to safely and vigorously enhance the hydrodynamic phenomenon. Recent studies have shown that cavitation and acoustic streaming significantly improve debridement and the disruption of the smear layer and biofilm. Activating fluids promote deep cleaning and disinfection into accessory canals, fins, and anastomoses. A cleaned root canal system facilitates obturation and increases long-term success.



Comparison of both versions of the sonic activators