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Non-Surgical Root Canal Retreatment On The Maxillary Left Second Premolar

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ABSTRACT

Root canal treatment failure is usually caused by recurrent infection in the root canal. The case of teeth requiring root canal treatment is generally caused by the presence of persistent infection in the root canal. The microorganisms that are in recurrent infections of the root canal originate from microorganisms capable of surviving the previous treatment or microorganism entering into a root canal after the treatment is completed as a result of leakage or loss of restorations (crowns). This case report will discuss the non surgical root canal retreatment on the maxillary left second premolar. Female patients aged 26 years old came to UNPAD Dental and Oral Hospital complaining the lost of the filling on the upper left tooth, and food often got trapped in the tooth. Approximately 3 months earlier, the patient had been treated with root canal treatment at the dentist before. The patient wanted the tooth to be refilled due to appearance disturbance. Intra oral examination test resulted: vitality (-), percussion (+), palpation (-), and tooth mobility (-). Management of root canal treatment failure cases is the non-surgical treatment. The main purpose of non-surgical root canal treatment is to regain access to the apical foramen, by disposing of root canal filling completely, resulting in good cleaning and shaping therefore filling can be done perfectly. Treatment in this case is managed well by showing absence of patient complaints, no swelling, no pain, widening and thinning of periodontal membrane radiographically, lamina dura resumed to normal.

Key words: non-surgical root canal retreatment.

INTRODUCTION

The potential for an optimal outcome of endodontic treatment reaches up to 90%-95% of the cases when teeth are treated under controlled clinical condition. After a root canal procedure, a tooth may require re-treatment because of a persistent infection or reinfection of the root canal. Re-treatment requires complete removal of the root canal filling material, followed by further shaping, cleaning and reobturation.