

# Endodontic Re-treatment

As with any dental or medical procedure, occasionally a tooth may not heal as expected after initial treatment for a variety of reasons including:

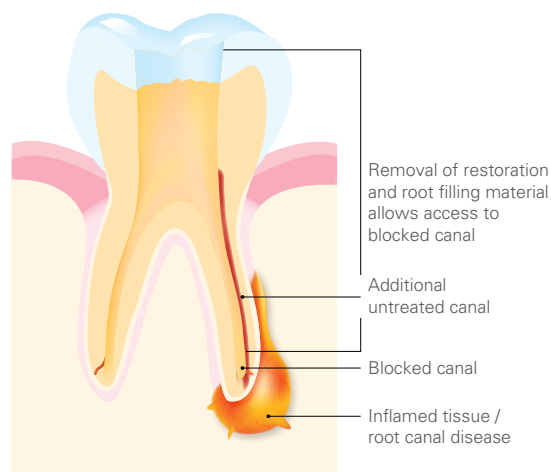
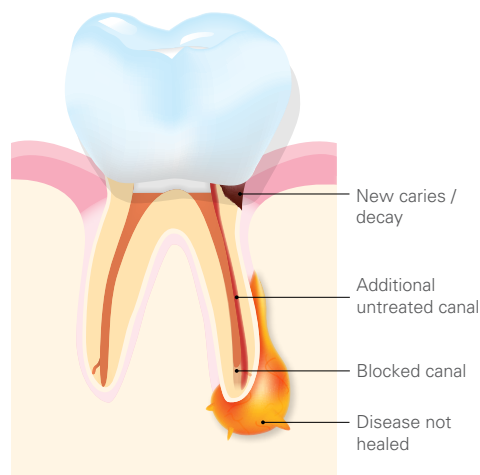
- Narrow or curved canals were not treated during the initial procedure;
- Complicated canal anatomy went undetected in the first procedure;
- The placement of the crown or other restoration was delayed following the endodontic treatment;
- The restoration did not prevent salivary contamination to the inside of the tooth; or
- Non-healing of previous pathology.

Successfully treated teeth may encounter new problems that may require treatment. This occurs when:

- New decay exposes the root canal filling material to bacteria, causing a new infection in the tooth;
- A loose, cracked or broken crown or filling exposes the tooth to new infection;
- A tooth sustains a fracture.

Because we have to “undo” previous work that has been done in the root canal system, non-surgical re-treatment is much more complex. It may also require more appointments and time for treatment. In some cases, the root canal anatomy may be quite complicated and you may require surgical management of the root end to properly clean and seal the root canal systems.

Alternatives to non-surgical retreatment may include apical surgery (discussed in the next section), no treatment or extraction with/without replacement of your tooth.



## Is re-treatment the best option for me?

Saving your natural tooth is the best option if a positive outcome of re-treatment is expected. Advances in technology and treatment in Endodontics, have improved our ability to fully identify causes of re-infection and manage these issues. Hence, the long-term outcome of your non-surgical endodontic re-treatment is better than ever before.

Nature has provided the best for you and your natural tooth almost always functions better than an artificial one. Maintenance of a natural tooth is generally easier and has lower maintenance compared with maintaining a prosthesis. With appropriate care, a root treated tooth can last for many years, ideally for the rest of your life!

## What happens during re-treatment?

1. Non-surgical endodontic retreatment involves firstly re-gaining access into the root canal system of your tooth through the crown. Any defective restorative material, tooth decay or materials, which obstruct re-entry into the root canal system, will need to be removed before starting the retreatment. During this stage, we will assess the presence of any cracks involving the roots or any canal anatomy that has not been previously treated prior to proceeding further.
2. The existing, contaminated root filling material is carefully removed and then the canals are cleaned, shaped and disinfected. The tooth is carefully examined using magnification and illumination, searching for any additional canals or unusual anatomy that requires treatment.
3. The tooth usually requires medication which is sealed into the root canals and a temporary restoration is placed. The length of time your tooth needs to be medicated will vary according to your individual situation. Your treatment is not yet completed and it is critical for you to return even though the tooth may be completely comfortable.
4. The root canal system will be filled with a root filling material called gutta-percha and an adhesive sealer cement. The aim is to completely fill the root canals and prevent re-infection. In most cases a temporary filling is placed to close the access opening.
5. Once re-treatment is completed and the root canal system re-filled, you will need to return to your dentist for a new permanent restoration.
6. If the canals are unusually narrow or blocked, your Endodontist may recommend endodontic microsurgery. This surgery involves making an incision in the gums to allow the other end of the root to be treated and sealed.



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