

were not successfully eliminated, remaining its activity in the future. Therefore, the treatment protocol consist in eliminating the bacterias and byproducts in the root canal system and dentinal tubules in order to stop the inflammatory process and allow a correct regeneration of the periodontium.

Case report

Woman of 22 years old who attends the surgery because of the pain she feels in the second quadrant. A periapical radiograph is taken and the corresponding diagnosis is a periapical lesion in the tooth 1.5 (endodontically treated). We start the retreatment eliminating the fiber posts and sealing the last apical 6mm with MTA© (Dentsply Maillefer) because of the root resorbtion, after an intermediate cure with calcium hydroxide. In the third appointment we filled the rest of the root canal with gutta-percha. The final restoration was done with a lithium silicate crown. In the X-ray-controls done during the last two years after the treatment, we can see the total healing of the lesion.

Conclusions

The mineral trioxide aggregate is the therapeutic choice to seal big apical diameters resulting from apical re-sorptions; a complete bone and periodontal healing in the perirradicular region was achieved in the case presented.

- Oral Presentation 76

TITLE: Percentage of success in non-surgical root canal retreatment. A retrospective study

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Objectives

The aim of this study was to evaluate the percentage of success in non-surgical root canal retreatment and to determine the influence of various factors on the prognosis.

Materials and Methods

A total of 77 patients with 87 previously endodontically treated teeth were included in this retrospective study. The follow-up period was at least 24 months. The Local Ethics Committe on Investigations Involving Human Subjects reviewed and approved the protocol. All

participants signed an informed consent. The patients were referred to the Master in Restorative Dentistry and Endodontics, University of Valencia, between 2009 and 2012. The operators worked with operating microscope and followed the same sequence of retreatment for all the cases. The teeth were classified according to their dental group and by presence or absense of periapical lesion radiographically detectable at the beginning of the treatment. It was also assessed the preservation or not of the initial root canal morphology. The classification proposed by Gorni et al. was used for this purpose. In order to evaluate the degree of healing, Kvist classification was employed.

Results

The overall success of nonsurgical retreatment was 83.9% after an average follow-up period of 28.5 months. Complete healing was observed in 41 teeth (47.1%) and incomplete healing in 32 (36.8%). A total of 14 teeth failed (16.1%). The highest percentage of success (94.7%) were obtained in cases with canal morphology respected and without periapical lesion at the initial appointment.

Conclusions

Non-surgical retreatment is a highly predictable procedure with a high percentage of success. Further investigation is required to determine the importance of other prognostic factors on the outcome of retreatment.

- Oral Presentation 77

TITLE: Mesostructure of pink porcelain-composite in risked anterior esthetic by dental implants

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Introduction

Anterior front rehabilitation with implants can have aesthetic consequences if parameters of ideal placement are not respected so it can derive in deficit of support tissues, both bone and soft tissue. An artificial material, like porcelain or pink composite, could be a good alternative to solve this problem, but due to the aesthetic limitations, other therapeutic alternatives might be considered.