Treatment of a large periapical lesion. A case report.

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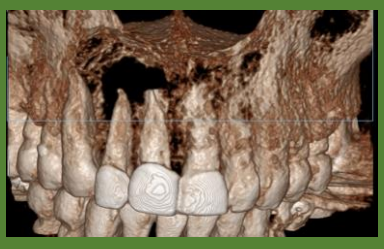
Introduction

Periapical inflammation develops as a response to the microbial flora of the pulp and the subproducts of the bacteria that infiltrate the periapical tissues and stimulate the immunological response of the host. Treatment options for the periapical lesions vary.

Goal

To report a case with a substantial periapical lesion that has been treated exclusively through conservative endodontic treatment.

- 50-year old female
- **Medical History:** No significance
- **Dental History**: Slight pain in the 11-12 region since 2 years.
- **Clinical Examination:**
  - Cold test: -
  - Palpation: +
  - Mobility: +
  - Percussion: +
  - Swelling in the 11-12 region
  - Sinus tract
- **Radiographic Examination:**
  Large periapical lesion in the 11-12 region



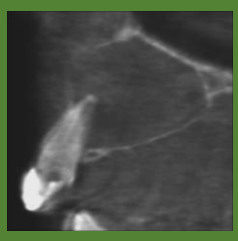
Initial Radiograph



- Diagnosis:
  Chronic Apical Periodontitis
- Treatment:

Endodontic treatment on elements 11 and 12.
Element 11 was treated in the undergraduate clinic of Aristotle University of Thessaloniki and element 12 in the postgraduate clinic of the Endodontics department of Aristotle University of Thessaloniki

CBCT



06/02/2016



17/05/2016

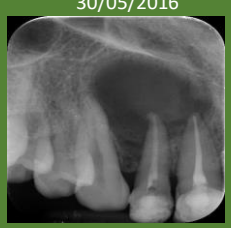


3 sessions with Ca(OH)2 dressing

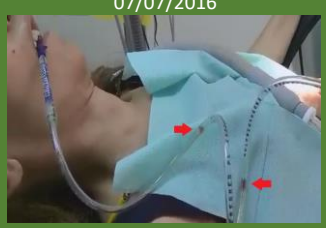
- Access cavities 11-12
- Length determination, irrigation with NaOCl 3.5 % and instrumentation with k-files(Dentsply,Maillefer) and rotary files (Mtwo, VDV Dental)

- Obturation of 11
- Constant outflow of purulent exudate from element 12– referral to the postgraduate clinic

30/05/2016



07/07/2016



3 sessions with Ca(OH)2 dressing

- Irrigation and instrumentation of element 12
- Ca(OH)2 dressing

Irrigation
Use of endoaspirator
20min constant aspiration

10/09/2016



Ca(OH)2 dressing

05/10/2016



Obturation by lateral condensation

09/01/2017



3 month recall

05/04/2017



6 month recall

03/10/2017



12 month recall



Initial Radiograph

Conclusion

Even large periapical lesions can respond to conservative endodontic treatment if the correct therapeutic approach is followed.



1,5 later