

Root Canal for Permanent Maxillary Teeth

Umer Matinlinna*

Department of Restorative Dentistry, Arba Minch University, Arba Minch, Ethiopia

*Corresponding author: Umer Matinlinna, Department of Restorative Dentistry, Arba Minch University, Arba Minch, Ethiopia, E-mail: MatinlinnaU@gmail.com

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Description

A root canal is the naturally occurring anatomic space within the root of a tooth. It consists of the pulp chamber (within the coronal part of the tooth), the main canal(s), and more intricate anatomical branches that may connect the root canals to each other or to the surface of the root. At the center of every tooth is a hollow area that houses soft tissues, such as the nerve, blood vessels, and connective tissue. This hollow area contains a relatively wide space in the coronal portion of the tooth called the pulp chamber. These canals run through the center of the roots, similar to the way graphite runs through a pencil. The pulp receives nutrition through the blood vessels, and sensory nerves carry signals back to the brain. A tooth can be relieved from pain if there is irreversible damage to the pulp, via root canal treatment. Root canal anatomy consists of the pulp chamber and root canals. Both contain the dental pulp. The smaller branches, referred to as accessory canals, are most frequently found near the root end (apex), but may be encountered anywhere along the root length. The total number of root canals per tooth depends on the number of the tooth roots ranging from one to four, five or more in some cases. Sometimes there is more than one root canal per root. Some teeth have a more variable internal anatomy than others. An unusual root canal shape, complex branching (especially the existence of horizontal branches), and multiple root canals are considered as the main causes of root canal treatment failures. (e.g. If a secondary root canal goes unnoticed by the dentist and is not cleaned and sealed, it will remain

infected, causing the root canal therapy to fail). The main objective of root canal treatment procedures is to promote healing of apical periodontitis induced by the micro-organisms and their toxins. This is either the source of primary infection or associated with failure of secondary or persistent root canal treatments. Complex biofilms are adhered to the intra radicular dentine extending within the root canal system including lateral canals. Residual bacteria survive in these areas as putting the entire treatment outcome at risk in the presence of a newly found nutrient supply. Root canal retreatment procedures are performed when failure of the original treatment is clinically and radiographically confirmed. Among the treatment options available, nonsurgical root canal retreatment is the first choice. It includes filling material removal, instrumentation, and new obturation of the root canal system with the aim of creating a favorable environment for the recovery of periapical tissues. There are no nerve endings or vascular supply. So the tooth is very susceptible to subsequent infection and, ultimately, falling out. During a root canal, the dentist drills off the top of an infected tooth to access the soft tissue inside. The dentist then removes the infected dental pulp and fills the space with tiny rubber rods and caps the repaired tooth with a crown. A root canal ranks high on most people's list of dreaded dental procedures. Although the lengthy and sometimes painful surgery relieves the agony of an infection, a root canal results in a dead tooth with no living soft tissue, or dental pulp, inside.