
(28)

牙髓疾病中的團隊作戰：與牙周、鑲復之跨科協同治療

Teamwork in Endodontic Diseases: Interdisciplinary Collaborative Treatment with Prosthodontists and Periodontists

時間：113 年 6 月 23 日(星期日) 08:30~16:50
地點：臺北榮民總醫院 致德樓第二會議室

08:30-09:00 報到

09:00-09:10 開場 Opening Remarks

楊淑芬醫師
Shue-Fen Yang

上午場：關於牙根病灶您應該了解的事

What You Should Know about Periapical Lesion

座長：白勝方 醫師 (Sheng-Fang Pai)

09:10-10:20 側方病灶你想知道的幾件事

10:20-10:40 Coffee Break

10:40-11:50 根尖巨大病灶你想知道的那幾件事

11:50-12:00 Q&A

何怡青醫師 Yi-Ching Ho
郭恬君醫師 Tien-Chun Kuo
陳誼安醫師 Ian Chen
林怡君醫師 Yi-Chun Lin

白勝方醫師
Sheng-Fang Pai

下午場：關於裂齒您應該了解的事

What You Should Know about Cracked Tooth

座長：闕玲惠 醫師 (Ling-Huey Chueh)

13:30-14:20 裂齒診斷與患者族群速寫

14:20-15:20 裂齒的保護：黏著性補綴 vs. 全覆蓋式牙冠
(最少的犧牲，換取最大的效益?)

15:20-15:40 Coffee Break

15:40-16:30 尋找預測未來的水晶球：談裂齒的預後

16:30-16:40 Q&A

16:40-16:50 結語 Closing Remarks

鄭陳陽醫師 Chen-Yang Cheng

劉妍君醫師 Yen-Chun Liu

蔡佳倫醫師 Chia-Lun Tsai

彭炯熾醫師 Chun-Chi Peng

闕玲惠醫師

楊淑芬醫師
Shue-Fen Yang

What you should know about periapical lesion

關於牙根病灶您應該了解的事

Yi-Ching Ho, Tienchun Kuo, Ian Chen, Yi-Chun Lin

何怡青 郭恬君 陳誼安 林怡君

Department of Stomatology, Taipei Veterans General Hospital, Taipei, Taiwan, ROC

Department of Dentistry, National Yang Ming Chiao Tung University, Taipei, Taiwan, ROC

Elite Dental Clinic, Taipei, Taiwan, ROC

臺北榮民總醫院 口腔醫學部

國立陽明交通大學 牙醫學系

協力牙醫診所

Typical periapical lesion is located at the root apex. When a lateral lesion appears around the root, in addition to vertical root fracture, the possibility of lateral canals, cementum tear, or root perforation must be considered. The prevalence of lateral canals is 27-75%. However, not all lateral root canals would cause lateral lesions. Only larger lateral root canals that are communicated with the periodontal tissue will increase the chance of lateral lesions. The instrumentation of root canal treatment cannot clean the lateral root canals. If the lateral lesions remain unhealed after root canal treatment, periapical surgery or intentional replantation will be indicated. Cementum tear is a special kind of root surface fracture, leading to periodontal and periapical destruction. The key treatment of cementum tear is to remove the fractured cementum. This requires interdisciplinary collaborative treatment between periodontist and endodontist. Besides, if root perforation occurs and is not repaired, lateral lesions and even periodontal pockets may appear. When treating root perforation, the time and location must be considered and the appropriate filling material must be determined.

When a large lesion appears, we should understand the success rate of non-surgical root canal treatment. When non-surgical root canal treatment fails, periapical surgery will be indicated. We will discuss the criteria to evaluate periapical healing after periapical surgery by radiographs or CBCT. When periapical surgery is combined with guided tissue regeneration, the periodontist will share with us how to choose bone graft materials and membrane for a successful surgery. Finally, we will share cases of soft tissue fenestration. The possible causes will be discussed, and cases of successful surgical treatment through interdisciplinary cooperation between periodontist and endodontist will be presented.

What you should know about cracked tooth

關於裂齒您應該了解的事

Chen-Yang Cheng, Yen-Chun Liu, Chia-Lun Tsai, Chun-Chi Peng

鄭陳陽 劉妍君 蔡佳倫 彭炯熾

Elite Dental Clinic, Taipei, Taiwan, ROC

Department of Stomatology, Taipei Veterans General Hospital, Taipei, Taiwan, ROC

P & H Dental Clinic, Taipei, Taiwan, ROC

協力牙科

臺北榮民總醫院口腔醫學部

敦南牙醫聯合診所

The definition of a cracked tooth is that a thin surface disruption of enamel and dentin, and possibly cementum, of unknown depth or extension. Histological studies found that dentinal tubules were invaded by bacteria, especially when the crack extended perpendicularly into the dentin. In many cases, the crack extended to the pulp, leading to reactions with intensities ranging from acute inflammation to total pulpal necrosis. Due to incomplete fracture of the crown, various symptoms of pulpitis are caused, such as biting pain, rebound pain, sensitivity to cold and heat, sensitivity to sweets. Most patients with cracked teeth are middle-aged or elderly. Based on the enamel wear pattern, it is estimated that the longevity of teeth without modern care is about 30 to 40 years. Cracked teeth also often occur in patients who like to eat hard and crispy foods. There are strong masticatory muscles or attrition on occlusal surface.

The treatment for cracked teeth is to protect the affected teeth. We know that the earlier cracks are diagnosed, the greater the tooth's survival rate. However, no one has the "crystal ball" to foresee the future, but we now have outcome information to help guide us clinically. Informing the patient that the tooth is compromised or has a guarded prognosis is essential. The patient's understanding of treatment limits, bite force and eating habits are definitely important predictors.