

MTA APEXIFICATION APPROACHES: A PATHWAY TO ENHANCED OUTCOMES

CASE 1: COLLAGEN SPONGE (COLOPLUG)

Chief complaint: Broken tooth in upper front tooth region for past 4 years.

Past dental history: History of trauma in upper front tooth 4 years earlier & history of root canal treatment irt 21, 22.

Investigation: IOPA - Incomplete root canal treatment IRT 21, 22, periapical radiolucency and wide open apex with thin dentinal wall irt 21.

Diagnosis: Ellis IV(Non vital) fracture in relation to 21 with immature apex.

Treatment plan: Retreatment and MTA Apexification using collagen sponge (ColoPlug) IRT 21.

APEXIFICATION: A method to induce development of the root apex of an immature pulpless tooth by formation of osteocementum / bone like tissue. (Cohen)

CASE 2: COLLAGEN MEMBRANE (COLOGIDE)

Chief complaint : Pain in upper front tooth region for past 2 years.

Investigation: IOPA-Periapical radiolucency and wide open apex with thin dentinal wall irt 12.

Diagnosis: Ellis IV(Non vital) fracture in relation to 12 with immature apex.

Treatment Plan :MTA Apexification using collagen membrane (ColoGide) in relation to 12



Pre operative intraoral image



Pre operative radiograph



Access opening irt 21



After confirming WL for MTA



MTA plug of 5mm



Post obturation radiograph



Pre operative intraoral image



Pre operative radiograph



WL determination



Collagen membrane (ColoGide)



MTA apexification



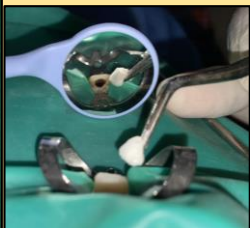
Immediate Post-op



3 months follow up



Collagen sponge (ColoPlug)



Armamentarium