



ENDODONTIC FAQs

1. What is an endodontist?

An endodontist is a dental surgeon who has had extensive additional training in treating endodontic problems (endo-within, dontic-tooth). This mostly involves root canal treatment.

Although all dentists have received training in endodontic procedures, endodontists' extensive training and clinical experience, depth of scientific knowledge and their ability to use special equipment such as endodontic microscopes and micro instruments, would allow them to access the fine, curved root canals within the tooth that can be very difficult to reach, and to carry out the treatment to the highest standards. This could lead to good treatment results and increase the chances of success.

2. Why is root canal treatment necessary?

a) When a tooth has suffered trauma, has a deep decay or a large restoration, bacteria could reach the pulp. The injured pulp tissue can eventually die and the root canal could become infected causing pain or abscess, or it may remain symptom-free. In severe cases this infection could spread to the surrounding bone. If root canal treatment is not performed the tooth may have to be removed.

b) When a root-treated tooth gets infected again.

c) Sometimes, in order to restore a tooth, it is necessary to perform root canal treatment.

3. What is the reason for the disease of the dental pulp?

Tooth decay, cracking, a large filling, trauma or even tooth wear can sometimes cause irreversible damage to the dental pulp.

4. What is the purpose of root canal treatment?

The purpose of root canal treatment is to remove the inflamed tissue or bacteria inside the root canal and to seal the canals to reduce the risk of re-infection, allowing the surrounding tissues to heal.



5. What is involved in root canal treatment?

The aim of root canal treatment is to remove the infected pulp tissue thus destroying bacteria or/and sealing the canals so they do not get infected or re-infected. Treatment is usually done under local anaesthetic administered into the gum adjacent to the tooth that is being treated. The tooth under treatment is then isolated with a rubber sheet in order to firstly prevent the tooth from being contaminated with saliva (which contains bacteria), and secondly to improve the patient's comfort.

An opening is prepared on the biting surface of the tooth to allow identification of the root canals of the tooth. The canals are then enlarged by small metal files to create space for disinfectant solutions to be inserted into the canals.

Once the root canals have been disinfected, they are filled with a rubber-like material, which coupled with a good seal of the crown of the tooth could prevent re- infection of the disinfected root canals.

6. How long would the treatment take?

The treatment is time-consuming because of its complexity but can readily be done using modern local anaesthetic techniques with little or no discomfort. Its duration depends on the complexity of the root canal system. A routine root canal treatment could take between 1.5- 2 hours and involve 1-2 sessions. A retreatment can take more and might involve 2-4 sessions.

7. What happens after root canal treatment?

After root canal treatment of the premolars and molars, a crown is usually required to protect the tooth from fracture. Sometimes the existing crown can be retained and the opening simply filled with a filling material.

You will be referred back to your referring dentist for these procedures.

8. Will it hurt?

The treatment is painless. It is normal for patients to experience some soreness after treatment as the supporting tissues of the tooth may be a little bruised. This discomfort is usually resolved with painkillers, which may be bought over the counter at your local chemist.

9. How long will the tooth last?

Although it is impossible to guarantee the success of any medical or dental procedure, root canal treatment has a very high success rate and provided the tooth is subsequently restored, it should last for many years. The factors influencing the success of root canal treatment include how infected the tooth is, how long the infection has been present and if the tooth has previously been root treated.