

ASSESSING RESTORABILITY OF A TOOTH:

To restore or not to restore

A CDE Presentation

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Objectives

- 1. To demonstrate the relevance of proper assessment before restoration
- 2. To describe the tooth restorability index
- 3. To discuss the different parameters used in restorability assessment
- 4. To explain the significance of the restorability index in deciding to restore or not to restore

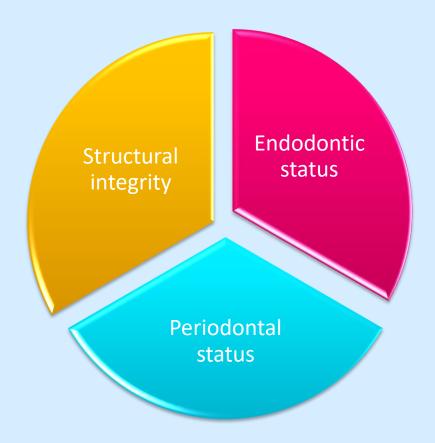
Relevance of proper assessment:

- Management of patients' expectations.
- Proper treatment planning.
- 3. Helps in deciding when to refer for secondary or tertiary dental treatment.



Restorability Index

Provides a framework for assessing teeth and planning treatments

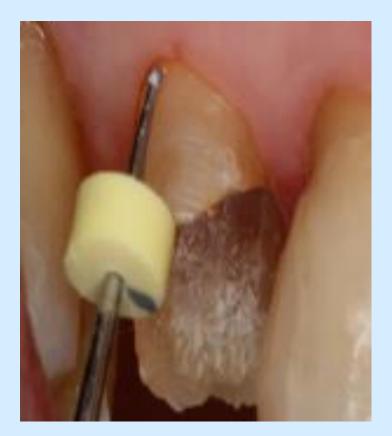


Structural integrity

Evaluation of remaining tooth coverage. Taking into

consideration;

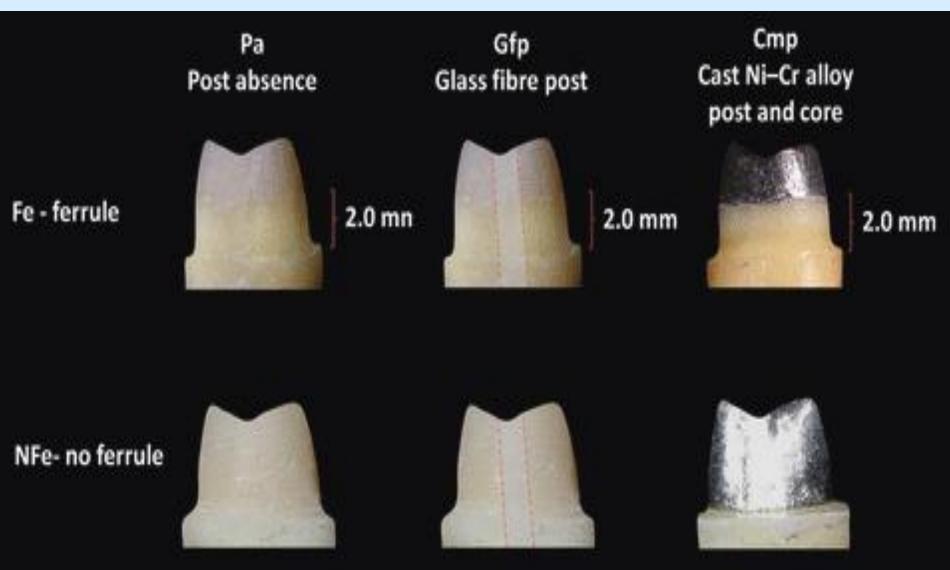
- The ferrule effect
- Relation of crown to root ratio
- Margin location



Ferrule Effect

 360 metal collar of crown surrounding the parallel walls of dentine, extending coronal to the shoulder of the preparation.







Post and core





Post and crown loosened from maxillary canine a few months after placement. Both the core/prefabricated post and the crown came off (a). Clinical photograph shows the absence of cervical tooth structure (no ferrule) for resistance of the crown

Structural integrity index

level	description
0	Unrestored or well adapted restoration
1	Simple indirect restoration
2	Minimal residual sound tooth structure.
6	Inadequate structure for ferrule

Endodontic considerations

Impact On Prognosis And Management

- Perforation, Resorption, Endo-Perio Lesion
- Horizontal / Vertical Root Fracture
- Broken Files / Pins / Post Issues
- Presence, Size And Duration Of Initial Endodontic Lesion
- Surgical And Non-Surgical Treatment Approaches

Endodontic index

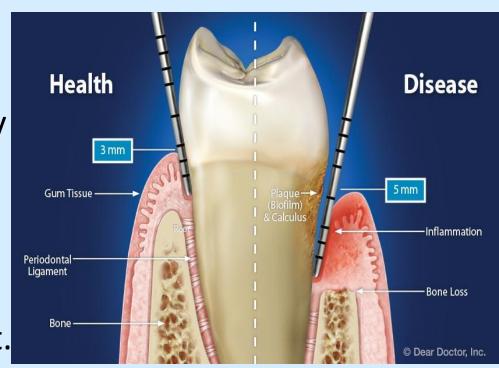
level	description
0	Vital pulp or successfully RCT
1	Simple root canal system, easily retrievable canal filling
2	Sclerosed canals ,complex root curvatures or complex re root treatment
6	Untreatable root canal system.

Periodontal Assessment

- Gingival attachment level
- Bone loss and mobility

Pocket depth

Furcation involvement.







Periodontal Restorability index

Level	Description
0	Probing <3.5 mm
1	Probing 3.5-5.5 mm, root surface debridement required.
2	Probing >5.5 mm , compromised support
6	Untreatable perio disease. E.g. grade 3 mobility

The context

This category refers to the oral environment, both

-local context; patients ability to maintain dentition

-General context; social, dental and medical history

Level	local context	General context
0	Isolated dental problem, adjacent teeth are healthy.	Replacing of strategic tooth may be excessively complex
1	Tooth to be used as an abutment	Immuno compromised or head and neck radiotherapy
2	Extensive Prosthodontic treatment multiple including adjacent tooth	Para functional habits, high caries risk
6	Retention of tooth would complicate simple treatment plan e.g. extensive bridge work	Very ill patient, should be in tertiary care.

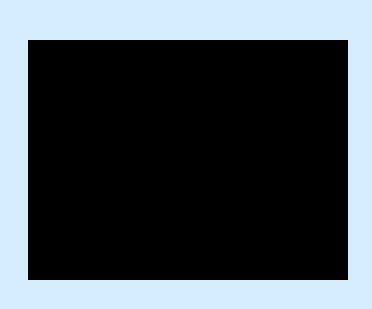


1/3/2018

JUBILEE DENTAL CLINIC

References..

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- A. Dawood1,2 and S. Patel. The dental practicality indexassessing the restorability of teeth. BRITISH DENTAL JOURNAL | VOLUME 222 NO. 10 | MAY 26 2017
- Helder Esteves, DMD, MDSc; André Correia, DMD, PhD; Filipe Araújo, DMD, MDSc. Classification of extensively damaged teeth to evaluate prognosis





A SMILE IS FOREVER!

THANK YOU!