Success in Endodontics

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Success, in the dictionary, is defined as "to succeed at something", "to have a happy result at something", or "to be able to reach the end of an endeavor". Within Endodontics, following these concepts, some consider that success would be to accomplish the endodontic treatment, finishing it at the correct limit, with an excellent visual quality of the radiograph and in the shortest possible time.

However, some factors must be considered. That short time in treatment, i.e., performing a molar in 50 minutes, following unique protocols in all canals, emphasizing on such variable anatomies, may in the long run reflect in an apical periodontitis, which may interfere systemically in the patient's health.

In a paper published by Prof. Estrela's group, they analyzed the lesion identification rate in more than 1400 endodontically treated teeth, and when they analyzed the presence of a lesion in the panoramic radiograph, they detected it in only 17% of the teeth. When the periapical image of these same teeth was observed, the presence of apical periodontitis was seen in 35% of the cases. Finally, CT scan imaging of the teeth showed the presence of an image suggestive of apical periodontitis in 63% of the teeth. This denotes that, according to the type of image one employs, one can have very different success rates. But let's separate fact from fiction. Studies show that the tomographic image approximates the histological reality that is occurring in the apical region. We have to keep in mind and break paradigms. The first point is to show the patient the importance of returning to the office after the endodontic treatment to evaluate the apical conditions, so that after this control, we can define success. We can do this control radiographically, but after the disappearance of the apical periodontitis or after 2 to 3 years of follow-up, it is recommended to request a

CT scan to be sure of the success. Remember: success is not only about making a lot of money in the profession, but mainly about achieving tomographic success rates close to 100%. In these cases, besides saving teeth, we are promoting health, and this should be the intent of a professional who has dedicated himself to it. Clinical and animal studies show that the presence of more than one endodontic infectious focus in the oral cavity can hinder glycemia control and increase the risk of systemic problems in the patient.

In view of this fact, the clinic should always be based on scientific evidence. Science and clinic should not follow different paths, but follow the same path and objectives, which are to promote the patient's health and well-being.

The moment shows us this fact. Therefore, we are becoming more and more successful professionals, more and more healing apical periodontitis, and not worrying about how long the treatment takes.

We will get closer and closer to 100% cure of apical periodontitis.

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