Multidisciplinary Approach for Tooth Extraction Indications not only Oral Surgical Perspective

A Yasar Guner*

Free Researcher, Corlu, Turkey

*Corresponding Author: A Yasar Guner, Free Researcher, Corlu, Turkey.

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Teeth extraction may be required for various reasons. Nowadays, it is often possible to treat the teeth. But sometimes teeth must be extracted for different reasons. In addition, even though it is possible to keep the tooth in the mouth with treatments, if the retention of the tooth will shorten the overall life of the treatments, or reduce the aesthetic results, the best decision can be the extraction of the tooth. In recent years, especially dental implants have provided a more radical approach to treatment planning. Below are the general indications of tooth extraction. Nevertheless, the these indications are not general guidelines.

1. If endodontic treatment is contraindicated, the only alternative is extraction.
   The contraindications of endodontic treatment:
   a. Non-restorable teeth.
   b. Vertical root fractures.
   c. Untreated teeth with root amputation and hemisection methods.
   d. Large resorption.
   e. Non-strategic teeth
   f. Teeth that cannot be prepared for endodontic treatment (root calcification, instrument fracture in the canal, excessive curve roots).
   g. Improper crown-to-root ratio.

   Such teeth can be treated endodontically again, but it is better to extraction, if they are not important to left in the mouth.

3. Contraindication of periodontal surgery.
   Periodontal surgery in advanced periodontal disease can cause more damage to the tissues. In such cases, it is not possible to restore the health, comfort and function of the periodontium with periodontal surgery. Tooth extraction is the right option.

4. Orthodontic tooth extraction.
   Teeth can be extracted to gain space for orthodontic treatment. For this purpose, the most commonly first premolar teeth extracted and sometimes the second premolars are extracted.

5. Prosthetic tooth extraction.
   If the tooth will interfere the planning and stability of the prosthesis and the situation cannot be corrected in any way, the tooth must be extracted.

6. Teeth between many implants.

7. Impacted teeth
   If there is no contraindication, impacted teeth usually surgically excised.

8. Supernumerary teeth.
9. The teeth in the pathological lesion.
   If endodontic treatment of the tooth worsen the removal of the pathological lesion, the tooth should be extracted.
10. Teeth in the jaw fracture line.
    The teeth in the fracture line are not extracted in most cases. The treatment of the fracture is done in this way. However, in the following cases, it is recommended to extraction of the tooth in the fracture line.
    a. Teeth that can cause to difficulty of the reduction of the fracture.
    b. Teeth with fractured root.
    c. Pericoronitis at the partially erupted third molar tooth
    d. Periodontium unhealthy teeth
    e. Teeth with large periapical lesions.
    Small periapical lesions on the fracture line can be treated with endodontic treatment as early as possible after fracture healing. Especially when the plates and screws are used, prophylactic extraction of the teeth in the fracture line should be avoided. It is also recommended to monitor the vitality of the adjacent teeth at the fracture line for one year.
11. Aesthetic reason for tooth extraction.
    For aesthetic reasons, it may rarely be the patient’s demand. In these cases, there is usually a discoloration or excessive protrusion in the teeth. In such cases, the problem can be solved by other methods (for example, laminate veneer can be applied in advanced discoloration, advanced protrusion can be corrected by orthodontically or orthognathic surgery). Sometimes the patient can prefer to tooth extraction and prosthetic treatment.
12. Tooth extraction before radiotherapy.
    Due to possible side effects of radiotherapy, the condition of the teeth should be evaluated prior to radiotherapy in the head and neck region. Teeth that are expected to cause problems after radiotherapy or with poor prognosis should be taken three weeks before radiotherapy, if possible. Can the tooth extraction be done after radiotherapy? Or how to do tooth extraction after radiation therapy? The answers to these questions are difficult. In cases where extraction are required after radiotherapy, it will be appropriate to perform by oral surgeon.
    The last indication for tooth extraction is economic reasons. If the patient cannot pay for the treatment, if he is reluctant to treatment or cannot allocate the time required for treatment, in these cases the indication of tooth extraction is especially powered in cases of deep decay, pulp necrosis and advanced periodontal disease [1-5].

Bibliography

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