

## Root canal treatment instructions (RCT)

(Root canal Treatment, also called Endodontic Treatment)

**RCT is performed under the following conditions, but not excluding:**

- I. When **tooth decay** has gone straight 'through' the tooth, and into the nerve
- II. **Pain** associated with a tooth due to irreversible pulpitis, with or without dental/root abscess
- III. **Abscess**, with or without pain (usually a radiological diagnosis confirms this)
- IV. When a stiff, or pin needs to be placed in order **to restore a severely mutilated tooth** for a filling and/or crown.
- V. When a tooth suffers severe **trauma** and pain relieve is needed.
- VI. When any form of pain on a tooth needs to be relieved.

### Treatment Protocol

1. RCT is usually performed in a minimum of two (2) appointments. The first appointment usually involves the removal of the nerve and placement of an inter- appointment medication, or anti-biotic to relieve the pain and to clean/sterilize the tooth. A temporary filling is usually placed. This first treatment is usually referred to as an Emergency Root Canal treatment.
2. The second appointment is usually longer, and during this appointment the tooth is measured and clean further, using x-rays etc. After the final root canal filling has been placed, a permanent filling is placed. Tooth will need a crown in future once the tooth is without pain, asymptomatic, or the infection/abscess cleared. **Please note**, sometimes a third or fourth appointment might be needed in difficult cases, or when the tooth is slow to respond to the treatment. At any given time your dentist could stop the treatment to recommend an extraction. Also bear in mind that if you wait too long between appointments the symptoms might return, or the tooth might develop new complications that might render future treatment futile, or cause more pain.
  - Pain is always a concern with any dental treatment, and RCT has left a very negative image with patients and dentists as being a very painful procedure.
  - Each individual is unique, and responds differently to, and interprets and handles pain differently. Your pain might be resolved immediately, or mild symptoms might persist that should clear up within a few days. Pain can persist or get worse after any treatment, and might take several days or weeks to clean in some rare cases.
  - Anti-biotics and/or pain medication might be prescribed in certain cases.
  - Even after a very successful RCT is performed clinically or radiologically, it could be that a tooth remains painful or symptomatic, or develops symptoms many years later again. A retreatment can be done, but success is usually 50:50. It is sometimes best to discuss the removal (extraction) of a tooth as an alternative before root canal treatment is started, or completed. A good alternative to RCT will be extraction and an implant, or a denture or bridge.
  - A RCT tooth is a dead tooth, and become brittle and might fracture easy. It is always recommended that crown be performed on a RCT tooth when the pain is asymptomatic, pain free to ensure a good long term prognosis in preserving the tooth structure.

**Please also note**, great controversy exists over the preservation of non-vital tissue in the human body, that the body's immune system can perceive as dead, necrotic, and a foreign body, i.e. an antigen. Certain authors are of the opinion, and research indicates that certain immune disorders, and even cancers, can be associated with these non-vital necrotic teeth present in the mouth. You as the patient must decide if you want to preserve a tooth with a RCT, or extract the tooth and opt for an alternative replacement for such a missing element