Pulp and periapical pathosis in consequence of caries Symptoms, diagnosis, pathology

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Symptoms of caries

- Sensitivity to sweet, cold/hot, chewing...
- Remains of food interproximal
- Gingival papilla bleeding
- Unpleasant taste
- Bad breath
- Damaged esthetics

Caries diagnosis

- Inspection, palpation, percussion
- Vitality test
- Fibre-optic transillumination
- Radiographic examination
- Electric resistance measurement
- Laser fluorescence
- QLFTM-technology (Quantitative Light-induced Fluorescence)
- CLSM- technology (Confocal Laser Scannig Microscopy)

Classification of pulpal diseases

Reversible pulpitis

Irreversible pulpitisHyperplastic pulpitis

Pulpal necrosis

Symptoms of pulpal diseases

Reversible pulpitis

sharp, transient pain after application of stimuli

Irreversible pulpitis

- asymptomatic, mild symptoms or
- intermittent or continuous episodes of spontaneous pain:
 - sharp or dull
 - localized or diffuse
 - last only minutes or for hours
- difficult pain localization
- prolonged response to stimuli

Pulpal necrosis

- asymptomatic, or episodes of spontaneous pain
- sensitive to percussion (yes / no)

Reversible pulpitis

Clinical Features:

- hypersensitive to thermal (hot or cold) or sweet stimulus which rapidly disappears when stimulus is removed
- localized increase in intrapulpal pressure
- threshold stimulation for A-delta nerve fibers is lowered

Irreversible pulpitis

Clinical Features:

- hypersensitive to thermal stimulus (hot or cold) which produces a pain which lingers for minutes when stimulus is removed
- pain is severe, persistent and poorly localized
- pain may radiate to ear, temple, eye or neck

Hyperplastic pulpitis

- no gender or racial predilection
- children and young adults
- exuberant proliferation of chronically inflamed pulpal tissue through a large open carious lesion
- asymptomatic
- primary dentition and the permanent dentition
- gross caries destruction with possible premature tooth loss

Pulpal necrosis

Clinical Features:

- discolored tooth
- teeth do not respond to either cold or electric pulp tests
- may range from being asymptomatic to being very sensitive to percussion

Hard tissue changes due to pulpal inflammation

- Pulp calcification
 - Pulp stones
 - Diffuse calcification
 - Calcific metamorphosis
- Internal resorption

Periapical pathosis

- Acute apical periodontitis
- Chronic apical periodontitis
- Condensing osteitis
- Acute apical abscess
- Suppurative apical periodontitis (Chronic apical abscess)
- Nonendodontic periapical pathosis

Acute apical periodontitis

- spontaneous slight / severe / excruciating discomfort or pain
- no response to electrical or thermal stimuli
- application of pressure causes marked to excruciating pain
- radiographic feature: thickening of periodontal ligament space

Chronic apical periodontitis

- asymptomatic or slight discomfort
- no response to electrical or thermal stimuli
- percussion causes little or no pain
- slight palpation sensitivity
- radiographic feature range to extensive destruction of periapical tissue

Condensing osteitis

- asymptomatic or discomfort or pain
- yes or no respond to electrical or thermal stimuli
- yes or no sensitivity to palpation or percussion
- radiographically diffuse, concentric radiopacity of periapical tissue

Acute apical abscess

- moderate to severe discomfort and / or
- swelling
- systemic manifestations of an infective process (high temperature, malaise, leukocytosis)
- no response to electrical or thermal stimuli
- painful to palpation or percussion
- radiographic feature: frank periapical lesion (infrequent: thickening of periodontal ligament space)

Suppurative apical periodontitis or Chronic apical abscess

- sinus tract
- asymptomatic because of drainage
- closure of the sinus: pain
- radiographic feature range to extensive destruction of periapical tissue

THANK YOU FOR YOUR ATTENTION!