

# Root surface caries and its therapy

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Clinical appearance

Radiologic appearance

Morphology of cement caries

- active
- inactive
- transitional

# Etiology

bacteria: *S. mutans*, *Lactobacillus*, *Actinobacillus*

pH 6,4 (!) → demineralisation cement vs. enamel

periodontal status

age

xerostomy

oral hygiene

# Possibilities

primer prevention = prevention

secunder prevention = stoppage

tertier prevention = treatment

# Filling therapy

viewpoints to consider (complaints, type of lesion, esthetics, etc.)

examination of clean surfaces!

proper access and isolation

supra or subgingival?

used material

## Isolation?

# Materials

direct gold

amalgam

glass ionomer / resin modified glass ionomer

compomer

composite

# Cavity preparation methods

conventional

modified conventional

„mixed”

# Difficulties in cervical filling process (despite favorable C factor)

polymerisation shrinkage

mechanical stress

abrasion, bruxism, traumatic occlusion

sclerotised and hypermineralised dentin