

BÖLÜM 2

REJENERATİF ENDODONTİDE KANAL İÇİ MEDİKAMENT KULLANIMI

Ahter ŞANAL ÇIKMAN¹

Nihan ÇELİK²

GİRİŞ

İmmatür dişlerde travma, çürük veya anatomik varyasyonlar nedeniyle pulpa nekrozu gelişme riski oldukça yüksektir⁽¹⁾. Geleneksel olarak immatür dişleri tedavi etmek için uzun süreli kalsiyum hidroksit (Ca(OH)₂) apeksifikasyonu ve mineral trioksit agregat (MTA) ile tek seans apeksifikasyon gibi farklı klinik yöntemler kullanılmaktadır. Her iki tedavi yöntemi ile apikal kapanma sağlansa da, kök gelişiminin durması ve dentin duvarlarının ince kalması, immatür daimi dişin prognozunu olumsuz yönde etkilemektedir^(2, 3). İlk defa 2001 yılında, Iwaya ve ark. nekrotik pulpalı immatür daimi dişlerin pulpa dokusunun revaskülarizasyonunu desteklemek için rejenerasyon tedavisinin alternatif bir tedavi seçeneği olabileceğini bildirmişlerdir⁽⁴⁾.

Rejeneratif endodontik prosedürler (REP) olarak da adlandırılan revaskülarizasyon tedavisi, hasarlı pulpa-dentin kompleksinin bütünlüğünü yeniden sağlayarak kök gelişimini devam ettirmeyi hedefleyen biyolojik temelli bir işlemdir^{(5),(2)}. REP'ler, hem ince kalan dentin duvarlarının kalınlaşmasını sağlayarak dişin kırılma riskini azaltır hem de pulpanın revaskülarizasyonu ile dişin vitalisini geri kazanmasına olanak sağlar⁽⁶⁾.

Amerikan Endodonti Derneği (American Association of Endodontists, AAE) tarafından hazırlanan klinik rehberde belirtilen tedavi protokolüne göre, ilk seansta kök kanalının % 1.5'lik sodyum hipoklorit ile irigasyonunun ardından, 1-4 hafta boyunca kanal içi medikament uygulanması önerilmektedir. İkinci seansta ise klinik belirti ve semptom yoksa kök kanalı, dentinden büyüme faktörlerinin salınımını sağlayan % 17'lik EDTA ile irige edildikten sonra, apikal bölgedeki kök

¹ Dr. Öğr. Üyesi, Recep Tayyip Erdoğan Üniversitesi Diş Hekimliği Fakültesi Endodonti AD., ahterdeha@hotmail.com

² Arş. Gör., Recep Tayyip Erdoğan Üniversitesi Diş Hekimliği Fakültesi Endodonti AD., dt.nihancelik@gmail.com

dirilmiştir⁽⁶⁸⁾. Yapılan deneysel bir hayvan çalışmasında, Propolisin REP sırasında kanal içi medikament olarak etkinliği araştırılmış ve Propolis ve ÜAP arasında antimikrobiyal etkinlik açısından herhangi bir fark görülmediği gibi, REP' de başarı kriterleri arasında yer alan kök uzunluğunun artması, dentinin kalınlaşması ve apikal açıklığın azalması gibi parametrelerde de ÜAP'ye benzer sonuçlar elde edildiği bildirilmiştir⁽⁸¹⁾.

TY ve ark. nın yaptığı 18 aylık klinik bir çalışmada çeşitli antibiyotik patları ve Propolisin revaskülarizasyona etkisi değerlendirilmiştir. Propolis dahil test edilen tüm kanal içi medikamentlerin, immatür daimi anterior dişlerde kök gelişimini devam ettirdiği ve başarılı bir pulpal revaskülarizasyon sağladığı bildirilmiştir⁽¹⁷⁾.

Sonuç olarak, rejeneratif endodontide uygulanan prosedürler ve kullanılan materyaller, kök kanalını etkili bir şekilde dezenfekte etmeli, periapikal dokularla biyolojik olarak uyumlu olmalı, etkili dozda ve etkili sürede kullanılarak dentinin fiziksel ve kimyasal özelliklerini korumalıdır. Alternatif materyallerin kullanımıyla ilgili daha kesin sonuçların elde edilebilmesi için daha uzun klinik gözlem süresine sahip daha fazla klinik çalışmaya ihtiyaç vardır.

Anahtar Kelimeler: Rejeneratif endodonti, antibiyotik patları, kalsiyum hidroksit

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