

Bölüm 4

ENDODONTİK TEDAVİLİ DİŞLERİN POST-KOR RESTORASYONLARI

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GİRİŞ

Aşırı madde kaybı bulunan kanal tedavili dişlerin üst yapı restorasyonunda çeşitli tedavi seçenekleri mevcut olmasına karşın araştırmacılar tarafından ortak bir fikir birliği sağlanamamıştır (Robbins, 2002). Bu dişlerin uzun dönem başarısında sadece yapılan endodontik tedavi değil, yapılan üst restorasyon da oldukça önemli bir etkidir. Endodontik tedavi sonrasındaki restorasyonlar, zayıf diş dokusunu destekleyerek kırılmalarını ve kanal sisteminin ağız içi sıvılarla kontaminasyonunu önlemekte, yitirilmiş diş dokusunu taklit ederek dişin fonksiyon görmesini sağlamaktadır (Gillen & ark., 2011).

Vital olan dişler referans alındığında kanal tedavisi görmüş dişler kırılmaya karşı, çürük temizlenmesi ve giriş kavitesinin hazırlanması sonrasındaki diş doku kaybından dolayı, biyomekanik açıdan daha risklidir (Zarone& ark., 2006). Ayrıca tedavi sonrasındaki su kaybına bağlı dehidratasyon ve kollajen çapraz bağların kaybedilmesi de dişin kırılma direncini azaltmaktadır (Assif&Gorfil, 1994). Uzun yıllardır, kanal tedavisi sonrasındaki aşırı madde kaybı olan dişler, çeşitli post-kor materyallerle ve kron restorasyonlarla restore edilmektedir (Goodacre&Spolnik, 1994). Uygulanan postun temel amacı; koronal diş doku kaybı fazla olan dişlerde kor yapının oluşturulmasıdır (Ahmetoğlu&ark., 2014).

KOR MATERYALLERİ

Aşırı madde kaybı olan dişlerde, post yapının üzerine uygulanan, prepare edilmiş diş formunu taklit eden bölüme kor denir (Alaçam, Nalbant&Alaçam, 1998). Kor yapıları iki şekilde oluşturulmaktadır.

- 1- Post ve kor yapı birleşik bir şekilde oluşturulduğu döküm ve CAD/CAM sistemiyle,

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