

# Bölüm 1

## SÜT DİŞLERİNDE UYGULANAN AMPUTASYON TEDAVİLERİNE GENEL BAKIŞ

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### 1. GİRİŞ

Süt dişleri, çocuğun beslenme, konuşma fonksiyonlarını yerine getirmesinde çenelerin gelişiminde ve sürekli dişlerin süreceklere boşlukların korunmasında olduğu kadar; estetik açıdan da son derece önemlidirler. Çocuklardaki erken süt dişi kayıpları fonksiyonel, fizyolojik ve psikolojik sorunların ortaya çıkmasına neden olur (1).

Süt dişlerinin mine ve dentin katmanlarının ince, pulpa odasının geniş, özellikle süt azılarının mezial pulpa boynuzlarının yüzeye çok yakın olmaları nedeniyle, süt dişlerinde çürük kısa sürede pulpaya ulaşmakta ve pulpa hastalıkları da hızlı bir gelişim göstermektedir. Yapılacak başarılı bir pulpa tedavisi ile diş çekimden kurtarılabilir. Süt dişlerinde kanal tedavisi yapmak, sürekli dişlerdeki kadar kolay değildir ve başarı oranı daha düşüktür. Süt azılarının köklerinin, sürekli diş germeleri sebebi ile aşırı diverjan oluşu, kök kanallarının çok geniş ve yassı oluşu, kök dentini ve sementinin inceliği, fizyolojik kök rezorpsiyonu, sürekli diş germinin varlığı, pulpa-paradental kanalların varlığı bunlara ilave olarak okul öncesi çocukların tedavileri sırasındaki iletişim güçlükleri gibi problemler süt dişlerinde kanal tedavisinin yapılmasını zorlaştırmaktadır (2).

Bütün bunlar göz önünde tutularak geniş çürük kaviterlerinde pulpanın bir veya birkaç yerden açılması durumunda dişin hiperemi evresini aşmaması şartıyla, pulpa amputasyonu tedavisi uygun bir yöntem olmaktadır (2,3).

### 2. PULPA HİSTOLOJİSİ

Diş pulpası, hücreler, hücreler arası madde ve fibriller içeren bir bağ dokusu sistemidir. İçerisinde ayrıca damar ve sinirler bulunur. Embriyonel hayatta mezodermden şekillenir. Bağ dokusu vücudun destek dokusudur ve eklemlerin sinoviyal sıvılarından, kemik ve dentin gibi sert yapılara kadar değişen kıvam özelliği

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ajanlardır. Bütün bu materyaller, antiinflamatuvar etkiden, antioksidan, antimikrobiyal, onarıcı ve yara iyileştirici etkilere kadar değişik farmakolojik özelliklere sahiptirler (78).

Bitkisel esaslı ajanların yanında son yıllarda, biyoaktif materyallerin de süt dişi amputasyonlarında kullanılması önerilmiştir. Antioksidan karışım (oxyfruit 40) (79), mine matriksi türevi (Emdogain) (80), nanokristalin kalsiyum sülfat/hidroksiapatit (81) kalsiyumdan zengin karışım (82), pulpa hücrelerinin implantasyonu (83), 3Mix-tatin (84) süt dişi amputasyonlarında denenmiş ve önerilmiş biyoaktif materyallerdendir.

#### **4. SONUÇ**

Koruyucu dişhekimliği çalışmaları, tedavi edici uygulamalara göre günümüzde daha fazla önem kazanmaktadır. Ancak koruyucu dişhekimliği uygulamaları büyük yatırım gerektiren alt yapıya ihtiyaç duymaktadır. Ülkemizde bu alt yapı çalışmaları başlatılmış olmasına rağmen bütün ülkeye yayılması ve tamamlanması zaman alacaktır. Bu nedenle ülkemizde, tedavi edici hizmetler, koruyucu dişhekimliği hizmetleri kadar önem taşımaya devam etmektedir.

Çocuk dişhekimliğinde de süt dişi amputasyon tedavileri, tedavi edici hizmetlerin en önemli kısmını oluşturmaktadır. Yapılan bütün çalışmalar ideal bir teknik ve materyal geliştirilmesi üzerinedir. Ancak henüz tam olarak bu başarılamamıştır. Bu konuda yapılması gereken daha çok araştırmaya ihtiyaç vardır...

**Anahtar Kelimeler:** Amputasyon, süt dişleri, formokrezol, ferrik sülfat, MTA.

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