



Resin onlay restoration of endodontically treated dens evaginatus

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I. Introduction

As the majority of dens evaginatus is diagnosed after pulpal infection occurred, the management option is usually full endodontic therapy. Apexification is often required as pulpal infection usually occurs before root development is complete. After endodontic therapy, endodontically treated tooth should be restored by full coverage crown or onlay using gold or composite resin.

With the recent advances in adhesive restorations, a concept of minimal intervention dentistry has been introduced to conserve the tooth structure as much as possible.

Several studies have shown that, provided most of its tooth structure remains, an endodontically treated tooth can be successfully restored by resin onlay.

In the present clinical cases, it is suggested that fiber-reinforced esthetic indirect composite resin restorations (Tescera ATL, Bisco, USA) can be an esthetic and conservative treatment option.

II. Case Presentation

Case I

1. Sex/Age: F/11
2. Chief Complaint: For root canal treatment on #45
3. Past Dental History: N/S
4. Present Illness: Endodontic treatment with calcium hydroxide for 2 weeks
5. Impression: Periapical abscess on #45
6. Tx plan: Endodontic therapy and restoration

Case II

1. Sex/Age: F/12
2. Chief Complaint: Referred from LDC for root canal treatment of #35
3. Past Dental History: N/S
4. Present Illness: Symptomatic swelling in buccal and lingual gingiva on #35
5. Impression: Periapical abscess on #35
6. Tx plan: Endodontic therapy and restoration

III. Conclusion

Endodontically treated dens evaginatus could be successfully restored by resin onlay restoration luted with adhesive resin cement, but long term clinical evaluations are necessary.