

Re: Long term fistula – other causes ?

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- *From:* Mark & Steven Bornfeld <bornfeldmung@xxxxxxxxxxxxxxxxx>
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david.patrick@xxxxxxxxxxxxxxxx wrote:

Hi,

I had root canal treatment around 5 years ago following the death of an upper right 1st Bicuspid. I never received a satisfactory explanation for the tooth 'dying' despite good hygiene. I had a crown fitted on the remains of the tooth.

I have now developed an infection in the cheek side root canal which is draining through 2 fistulas but is not causing any pain. My dentist has removed the crown and root fillings and has given me antibiotics to clear up the infection. I'm going back in a week to investigate the possibility of re-filling the canals and re-fitting the crown. Inspection of the root showed no fractures or obvious causes for the infection.

I've had what I assume to be a fistula adjacent to this tooth for many years (perhaps as long as 20). Despite repeatedly mentioning it to the various dentists I've seen over the years, they were never able to see any signs of trouble on x-rays. The fistula was hard to the touch and very rarely leaked (if ever). In short, it was there but didn't cause any discomfort.

I'm concerned that there's something else there that caused this tooth to die in the first place and I suspect the infection will just recur if I get the roots filled and the tooth re-crowned. How can I make sure my dentist gets to the root (pardon the pun) of the problem without performing an extraction?

Thanks,

David.

I wish I could promise you that your dentist does get to the problem. Some fractures are difficult to impossible

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to visualize. Sometimes but not always a fracture can be inferred by the pattern of bone loss on the x-ray. I'm assuming this in fact is a fistula, demonstrated either by x-ray or a history of drainage. There are other explanations for a hard bump in the gum—most commonly an exostosis—which is an overgrowth of perfectly normal bone.

I feel better about having a patient retreat a root canal if the original root canal appears in some way deficient. If it appears to have been perfectly done and failed anyway, it's not as obvious how things can be improved. But sometimes they can be—such as minute canals that may have been missed the first go-round.

Good luck,
Steve

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