Southern Oregon Veterinarian Specialty Center’s Vet Pages

Introducing the CareTom CT

To better serve our veterinary partners and clients, Southern Oregon Veterinary Special Center has been busy expanding its facility and adding advanced equipment. Our most recent addition is a CT scanner. Some cases which would benefit from a CT scan include:

- Dental disease/TMJ disease
- Nasal tumors and erosive disease
- Bulla exams
- Metastatic screens
- Orthopedic disorder
- Some brain lesions

Southern Oregon Veterinary Specialty Center’s

THIS ISSUE

2 CASE STUDY
By Alice Seivers, Dentistry & Oral Surgery

3 WHAT’S YOUR DIAGNOSIS?

4 UPCOMING ROUND TABLE

CT APPOINTMENTS AVAILABLE
CT appointments are now open for your clients. Please contact our office for more information or to schedule a time.

541-282-7711
An 11 year-old, spayed female, Labrador Retriever mix presented for an oral examination and cleaning. Beyond generalized calculus with minimal gingivitis and mild generalized abrasion, the awake examination was within normal limits. Her anesthetized examination found the following issue. What is it and what is the next step?

There is a 9mm periodontal pocket on the distal aspect of the right mandibular first molar (tooth 309). Radiographs are needed to assess extent and type of disease and determine treatment options.

Radiographs demonstrate greater than or equal to 50% vertical bone loss. This is a three-walled infraboney pocket.

What treatment options are available at this point? Why did this problem develop?

Vertical bone loss distal to the first mandibular molar is commonly found. This condition most likely developed because there is too much open space between the crowns of the first and second molar. The crowns are typically closer together, preventing food debris from accumulating in the interdental space.

This tooth is a strategic tooth. Extraction is not the ideal treatment choice, but is an option if the owner is unable to pursue therapy.

This pocket is too deep for closed root planing.

The size of our instruments prevents them from reaching all of the surfaces of the pocket. Open root planing can be temporarily helpful, but the gingival tissue will repopulate the pocket faster than boney tissue, preventing resolution of the problem and allowing it to continue to develop.

Guided tissue regeneration would allow for regrowth of boney tissue and ligamentous tissue, maintaining the health of the tooth. Open root planing with placement of bone grafting material and a boney membrane will facilitate bone growth, while excluding gingival epithelium from the periodontal pocket.

Also, modification of the cusp of the second molar by odontoplasty and dentinal sealant application will open up the space and allow food to exit the pocket via normal mastication activity. With periodontal surgery, the owners willingness to brush and maintain the area can be key to success. Sometimes, aggressive periodontal surgery is best delayed to give the clients time to work with their pet on developing good brushing skills.

In this case, less aggressive care of open root planning was initially used and the owners worked to develop brushing skills over the next three months. At the three month recheck, the pocket was decreased by 3mm.

Guided tissue regeneration and modification of the crown of the second molar was performed. Four months later, the site was rechecked and the periodontal pocket...
was resolved and now at 2mm. Radiographically, bone height was restored and there was resolution of the periodontal pocket.

A six year-old, spayed female German shepherd presented for fracture of the left maxillary canine tooth (204) three days prior. There was a complicated crown fracture visible on awake examination. On anesthetized examination, a pulp granuloma was evident and bleeding occurred with probing.

In this situation, benign neglect is not an option. Anytime the pulp is exposed, endodontic therapy and extraction are the only options available. This tooth is infected and will eventually die when the pulp defenses are overwhelmed with infection.

Vital pulp therapy and direct pulp capping is not an option in this patient due to poor success rates in dogs over 18 months of age and the extended duration of time from fracture. Vital pulp therapy, if appropriate, must be attempted within 48 hours of the fracture.

The canine tooth is considered a strategic tooth for a dog. While extraction is a possibility for treatment, it is considered less than ideal due to the increased morbidity to the patient and loss of an important anatomic structure.

Radiographs demonstrated normal endodontic anatomy with normal periodontal health. Root canal therapy was elected for this patient.

The tooth was rechecked with radiographs and periodontal probing exam 6 months after treatment to confirm healing of the tooth and monitor for any possible complications. With careful technique and attention to detail, root canal therapy has an excellent prognosis and success rate for continued use of the tooth and health of the patient.

What do you think the problem is in this case? Check whether you’re right in the next issue of Vet Pages.
This round table discussion will be lead by one of SOVSC’s specialists, centering around one or two journal articles. Copies of journal articles will be provided ahead of time and are available by calling our office. Two hours of continuing education credit is available for this format!

**Upcoming Round Table Articles**
