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場　所：実習館 2 階総合歯科医学研究所セミナールーム

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タイトル：New Trends and Materials in Conservative Pulp Therapy

Recent progress in understanding the molecular and cellular changes during tooth development and how they are mimicked during tissue repair offers the opportunity to assess the biologic validity of the various vital pulp treatments.
Under this light, indirect pulp treatment can be an acceptable procedure for primary teeth with reversible pulp inflammation, provided that this diagnosis is based on a good history, a proper clinical and radiographic examination, and the tooth had been sealed with a leakage-free restoration.
Direct pulp capping (DPC) with calcium hydroxide has been widely used with high success rates in young permanent teeth, but the results in primary teeth are less satisfactory. Thus, the traditional rationale for the use of calcium hydroxide DPC should be maintained, and this treatment modality should be reserved for iatrogenic exposures in asymptomatic teeth that are expected to exfoliate within a short period of time. In younger children, iatrogenic or carious exposures should be treated by pulpotomy.
Formocresol has been the most popular pulp dressing material for pulpotomized primary molars for many years but, due to its deleterious effect, the use of formocresol is decreasing considerably worldwide.
Several pulp dressing materials have been tested, but none presented the clinical success rate achieved with formoeresol. Ferric sulfate has been proposed as a substitute to formocresol 9 and the success rates were comparable to those of formocresol.
More recently, considerably better results have been obtained with MTA (Mineral Trioxide Aggregate), and statistically significant differences were reported when compared to formocresol. Internal root resorption, a finding seen both in ferric sulfate and formoeresol, was not observed in the 51 TA treated teeth with a much longer follow up time. MTA is commercially available as ProrootMTA (Dentsply, Paris).

担当：健康増進口腔科学講座　宮 沢 裕 夫