Comprehensive case presentation

Presented by: Sara F. Akhleifa
Roll No. 720
This work was achieved by the student: **Sara Fakhri Akhleifa** under the supervision of dental teaching staff at Libyan International Medical University:

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- Abdelsalam Alsanfaz
- Ranya F. Elemam
- Ali Busnaina
- Naeima M. Betamar
- Nada Kashbor
- Mohamed H. Elgtlawi
- Rabea Alhuni
Helping people is not a duty, It’s a joy, for it increases our own health & happiness.
Personal Data

Patient’s Name : F.A.A
D.O.B : 22\8\1974
Gender : Female
Occupation : House wife
Address : 20.st
Nationality : Libyan
Chief complain:

Patient complain of pain in her upper front teeth since 2 days

History of chief complain:

Pain started six months ago as mild localized intermittent pain related to her upper teeth aggravated by cold drinks and sweets lasts for 5mins, relived by warm water rinse, not disturbing her sleep of non radiating nature not associated with any other symptoms.

Suddenly in last 2 days the pain become severe, throbbing, spontaneous, continuous pain, which increases with biting, and reduced by stopping of mastication (biting) associated with tenderness around the tooth

- No previous treatment attempts.
- She didn’t take any medication for it.
Past and present medical history:

- Free from any chronic illnesses
- History of 4 caesarean section
- History of Gestational diabetes
- No allergies
- On oral contraceptives since one year and a half
- Nursing

Systematic review:

- Nothing abnormal detected
Dental history:
- Brushes her teeth ones morning with soft brush, vertical technique
- No other methods of cleaning
- History of fillings, root canal treatment and non-complicated extractions over 5 yrs ago (destroyed by caries)
- No oral harmful habits
- Not a regular visitor to dental clinics but willing to be

Family history:
+ve for Diabetes mellitus from mothers side

Social history:
Married and a mother of 4 boys (9 yrs, 8 yrs, 3 yrs, 1 yr)
Non smoker, non alcohol drinker
General examination:
Normal body built, gait, posture, mental status, facial symmetry, skin and speech

Extra oral examination:
TMJ: average mouth opening and movement, no crepitation no tenderness
Cervical LN: not palpable
Lip seal \ Lip line \ dental relation to facial mid line: competent lips \ mid lip line \ coinciding
Face form: ovoid.
Profile: straight
Intra oral examination:

**SOFT TISSUE**

- Halitosis: present “mild”
- Oral mucosa \ Palate \ tongue: N.A.D*

**Hard Tissue Examination**

![Image of tooth diagrams]
<table>
<thead>
<tr>
<th>Tooth</th>
<th>Decay</th>
<th>Miss</th>
<th>Fill</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>14,11,22,23</td>
<td>25,15,16,37,36</td>
<td>26,21,12,35,45</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>2</td>
<td>46,47</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Plaque Index = 9/6 = 1.5

Calculus Index = 6/6 = 1

DMFT = 16

OHI-S = 1.5 + 1 = 2.5 **FAIR**
### Gingival status

<table>
<thead>
<tr>
<th></th>
<th>Max. Right Posterior</th>
<th>Max. Anteriors</th>
<th>Max. Left Posterior</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Color</strong></td>
<td>pink</td>
<td>pink</td>
<td>pink</td>
</tr>
<tr>
<td><strong>Contour</strong></td>
<td>Scalloped, rolled margin, blunt IDP</td>
<td>Scalloped, rolled margin, blunt IDP</td>
<td>Scalloped, rolled margin, blunt IDP</td>
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<tr>
<td><strong>Size</strong></td>
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<td>Not Enlarged</td>
<td>Not Enlarged</td>
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<tr>
<td><strong>Consistency</strong></td>
<td>Firm resilient</td>
<td>Firm resilient</td>
<td>Firm resilient</td>
</tr>
<tr>
<td><strong>Stippling</strong></td>
<td>Absent</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td><strong>Position</strong></td>
<td>@ CEJ</td>
<td>@ CEJ</td>
<td>Apical to CEJ</td>
</tr>
<tr>
<td><strong>Bleeding on probing</strong></td>
<td>PRESENT</td>
<td>PRESENT</td>
<td>PRESENT</td>
</tr>
<tr>
<td><strong>Exudation</strong></td>
<td>absent</td>
<td>absent</td>
<td>Absent</td>
</tr>
<tr>
<td><strong>Mand. Right Posterior</strong></td>
<td>Camouflage color</td>
<td>Mand. Anteriors</td>
<td>Mand. Left Posterior</td>
</tr>
<tr>
<td><strong>Color</strong></td>
<td>pink</td>
<td>pink</td>
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</table>

**Other findings:**

High labial franal attachment and gingival recession related to (26,35,45,46,47)
Diagnosis: Chronic Generalized Mild to Moderate with localizes severe periodontitis related to (35, 45, 46)

Of an overall good prognosis
Differential diagnosis

For (23):
1. Acute periapical periodontitis\abscess
2. Acute exacerbation of chronic periapical abscess\periodontitis
3. Infected periapical granuloma or cyst

For (11):
1. Acute reversible pulpitis
2. Acute irreversible pulpitis

Investigations:
1. Periapical Radiograph of (23,11)
2. Vitality test for (23,11)
3. Orthopantomogram Radiograph
Orthopantomogram Radiograph Examination

Panoramic view showing maxillary and mandibular teeth with generalized mild to moderate bone loss and multiple restorations and multiple extracted teeth

- Marked left mandibular ridge atrophy
- Remaining root related to 14
- Periapical radiolucency related to root 45 and a small RO at apical 1\3 of the RCT
- Radiolucency related to mesial aspect of crown 34 and distal aspect of 35 crown indicating class II caries lesion
Periapical Radiograph
Final Diagnosis:

- Negative vitality test for (23) indicating Acute periapical periodontitis
- Positive vitality test for (11) indicating Acute reversible pulpitis
- Chronic Periapical abscess/granuloma (21)
- Periapical granuloma/cyst (35)
- Badly caries destructed (14)
- Dental caries in relation to mesial (35)
- Dental caries in relation to distal (34)
- Chronic Generalized Mild to Moderate with localizes sever periodontitis
- Multiple teeth missing (16,15,14,37, 36,45)
Treatment Plane

Preliminary \ Emergency Phase
Biomechanical preparation (23)

Phase I
Patient motivation and education about the importance of Plaque control
Diet control
Supra and sub gingival Scaling and Root planning
Excavation of caries and temporary restoration (11,34,35)

Re-evaluation Of Phase I

Phase II Surgical Phase:
Extraction of non restorable teeth (14,22,35)
Phase III Restorative Phase

✓ RCT (23 )
✓ Final restorations for (34,35)
✓ Prosthetic reconstruction of decayed tooth (21,23 )
   (prefabricated fiber post and composite core)
✓ replacement of missing (22) with fixed-fixed PFM FPD
✓ Full coverage PFM restoration for (11)
✓ Replacement of (16,15,14,36,37,45) with upper and lower RPD

Phase IV Maintenance and recall

Periodic checking 1st after 3 months then after every 6 months if maintenance achieved
Preliminary \ Emergency Phase

Biomechanical preparation (23)
The diet sheet was discussed with the patient, supporting their good habits & explaining the effect of the bad ones on their oral health and how to decrease and stop that effects.

<table>
<thead>
<tr>
<th>Time</th>
<th>Meal</th>
<th>Food Description</th>
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<tbody>
<tr>
<td>8:30 a.m</td>
<td>Breakfast</td>
<td>فطور: شاي&quot;ملعقة سكر&quot;/سندوتش جبنه + زيتون + طماطم + كوب كبير ماء</td>
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<td>Lunch</td>
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<td>09:30 p.m</td>
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<tr>
<td>9:30 a.m</td>
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</table>

Diet sheet analysis
Phase I Therapy
Excavation of caries of (11)
Phase II Surgical Phase:
Extraction of non restorable teeth (14,22,35)
Final class II Composite restoration for (34,35)
Diagnostic cast (with wax up) mounted on an articulator
Obtained from primary impression
Restoration of 21 tooth with prefabricated fiber post & composite core
Putty index on diagnostic wax up for the purpose of fabrication of provisional restoration
Restoration of 23 tooth with prefabricated fiber post and core
Fabrication of provisional restoration (11,21,22,23)
Application of retraction cords around abutment teeth
Metal Try in
To check:
✓ Complete Seating
✓ Marginal Integrity
✓ Stability
Metal Try in
To check:
Occlusion
Followed by Shade Selection
Phase III

**Insertion**

Trial cementation of the permanent restorations for one week
Phase III

Insertion
Final cementation of the permanent restorations with adhesive resin cement
RPD
Replacement of the other missed teeth with upper Kennedy’s class III RPD
And lower Kennedy’s class II modification 1 RPD
RPD
Replacement of (16,15,14,37, 36,45) missed teeth with RPD
Pre operative photo
Post operative photos
Thank You