

Conventional endodontic approach of extensive cystic lesion

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This article aims to report a non-surgical endodontic treatment of an extensive cystic anterior maxillary lesion. Initially, conventional endodontic retreatment was proposed. Histopathological examination was suggestive of periapical. Clinical evaluation revealed a positive response to palpation and percussion. Also, grade II mobility was identified in all anterior maxillary teeth. Thermal test were performed and only elements 11 and 21, showed a negative response due to previous endodontic treatment, however considered unsatisfactory. Initially, conventional endodontic retreatment was performed on teeth 11 and 21. Accidentally, in the prosthetic

rehabilitation phase, the root canal deviation of the canal in tooth 21 and total removal of the filling material of tooth 11 occurred. Nevertheless, in 2015 was observed a significant decrease of the lesion. In 2017, conventional endodontic treatment of the elements was performed again. It was concluded that conventional endodontic retreatment was essential in the bone formation of the associated lesion, enabling better conditions for any necessary surgical intervention, favoring the patient's prognosis.

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