

Editorial

Forever students of root canal anatomy!

July is the last month of the academic year. This is a difficult moment in our dental school: Summer begins and graduated students leave their place for the beginners, who are in charge of, mostly, their first endo patient. This transition is always hard to achieve.

For the endodontic staff, it is a matter to imply themselves more and again in order to coach, in the best way they can, those clinical beginners. The main problems are linked especially to the anesthesia of inflammatory pulps, to the finding and negotiation of curved canals, shaping and disinfection of the entire endodontic system, to the pain control.

Although in 2012, technical advancements in endodontology enable practitioners to achieve treatment outcomes in a better way, students always find considerable difficulties when confronted for the first time with a real patient. For example, diagnostic procedures benefit of the precious and undisputable digital radiographic technology, and the CBCT that provides real and precise information about the root canal anatomy, an accurate size and morphology of periapical lesions and bone loss, but still the first concern of a new student is to obtain a radiograph that includes root apices and periapical bone and shows teeth and roots in a correct dimension. Another example is the shaping of root canals with rotary nickel titanium files whose performances improve with the years, but we still see apical blockages, zippings, root canal deviations and elbows created by students who encounter problems to apply their theoretical and practical lessons when they are confronted to their first patient. Most of those difficulties are related to root canal anatomy as apical curvatures or supplementary canals.

The past decade has witnessed more significant developments than the whole last century, but a constant remains: The endodontic anatomy we treat everyday is always the same and is not able to change. Therefore, we are and must remain students of endodontic anatomy. In order to treat this anatomy, all technologies, materials, instruments and techniques gain in precision and performance for the best of the patient and practitioner who must not forget that teeth prognosis and the future of our noble speciality rely on him.

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