ADDICTION OF DIAMOND COATED ULTRASONIC TIPS TO YOUR PERIODONTAL TOOL KIT

Dr Ehsan Mellati, Specialist Periodontist

Diamond-coated ultrasonic tips are a MUST have tool in your periodontal tool kit. All popular ultrasonic scaling systems (i.e., Cavitron by Dentalply, EMS by EMS, and Statico by Actevo) provide diamond-coated tips. They are very helpful in removing and smoothing plaque retentive factors like overhanging restorations and root/crown surface irregularities. Compared to using burs they provide a much safer, more precise and more controlled handling. You can adjust the power of your ultrasonic device depending on hardness of tissue/ restoration you want to smoothen. If you have not used them before, a good suggestion is to try for the first time out of mouth on an extracted tooth to have get an idea of their tissue removal efficiency, which can be variable depending on your device and the power settings.

**Taking Crown and bridge impressions**
- Ensure healthy tissue (complete periodontal treatment prior to prosthetic/ restoration).
- Ensure adequate retraction and haemostatic procedure, if necessary. If retraction agents are used, rinse and dry thoroughly.
- Leave the haemostatic agent in place for as long as possible before taking the impression.

THE HOT PULP – how to achieve adequate anaesthesia

Dr Stephen Harlamb, Specialist Endodontist

Anaesthetising the hot pulp can be one of the most challenging aspects of providing relief of pain for our patients. I have found over the years the two main variables in achieving adequate anaesthesia are **time and volume**.

Therefore, when a diagnosis of irreversible pulpitis is made for a lower molar, I give two blocks (4.4 mls) of 2% lignocaine (1:80,000 Ad) followed by a buccal infiltration of 2.2 mls 4% Articaine (1:100,000 Ad) and then give the patient a magazine to read of 2.2 mls 4% Articaine (1:100,000 Ad) and then give the patient a magazine to read for 10 to 15 minutes. Recent studies have also found giving the patient 400 mg of Ibuprofen one hour before can also help. Prior to placing the rubber dam, I’ll then test the tooth with CO2 and if there is no response, I’m fairly confident I should be able to endodontically access the tooth. Intrapulpal anaesthesia may still be required.