With snow and ice arriving, the chance of trauma to immature maxillary anteriors is highly likely. Thus, this month's newsletter addresses the Cvek pulpotomy procedure. A traditional pulpotomy is a temporary solution; it involves removal of the coronal pulp to the floor of the chamber and is followed by a pulpectomy and endodontic treatment. In comparison, a Cvek pulpotomy or partial pulpotomy involves removal of 2mm of the pulp adjacent to the exposure. Its goal is to maintain pulp vitality indefinitely and allow root development to continue.

A Cvek pulpotomy is indicated on immature incisors, with vital pulps, that have endured a complicated crown fracture. The smaller the size of the pulp exposure (1-2mm) and the shorter the time elapsed since the injury the greater likelihood of the pulp remaining healthy and vital.

The Cvek Pulpotomy Technique

1. Remove the pulp tissue 2mm apical to the exposure with a high speed diamond bur under water
2. Control haemorrhage with saline or diluted sodium hypochlorite(2.5%) soaked foam/cotton pellet
3. Cover the pulp with a layer of MTA or calcium hydroxide
4. Seal with a layer of glass ionomer and restore the tooth
5. Re-evaluate in one month and then once every 3 months for the first year to monitor vitality and root development

Regards,

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