

**NEW JERSEY ACADEMY OF PEDIATRIC DENTISTRY**  
**www.njapd.org**

**CONTINUING EDUCATION COURSE**  
**NEW TRENDS AND MATERIALS IN**  
**PULP THERAPY**  
**Dr. Anna Fuks**

**APRIL 14, 2010**

**Renaissance Woodbridge Hotel**

- 515 US Highway 1 South
- Iselin, New Jersey 08830  
1-732-634-3600

**Schedule**

<b>8:00 – 9:00</b>	<b>Registration</b>	<b>12:30 – 1:30</b>	<b>Lunch</b>
<b>9:00 – 12:30</b>	<b>Morning Sessions</b>	<b>1:30 – 5:00</b>	<b>Afternoon Session</b>

**Registration**

**Fees:** Please Note that fees are inclusive of all the activities listed above.  
Category: \$195 Member AAPD  
\$225 Non-member AAPD  
\$70 Residents, Hygienists and Dental Auxiliaries

**REGISTRATION DEADLINE: April 02, 2010**

**CE CREDIT: 7 Hours**

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**Detach and return this portion to NJAPD by April, 02 2010!!**

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ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

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1313 ROUTE 27  
Somerset, NJ 08873 \$ \_\_\_\_\_ Amount Enclosed  
**Category:**

**Names of Attendees:**

\_\_\_\_\_  
\_\_\_\_\_

# **New Trends and Materials in Pulp Therapy**

## **Current concepts and controversies**

Maintaining the integrity and health of the oral tissues is the primary objective of pulp treatment. It is desirable to attempt to maintain pulp vitality whenever possible. However, pulp autolysis can be stabilized and maintained by the different conservative treatments, or the pulp can be entirely eliminated without significantly compromising the function of the tooth.

Recent progress in understanding the molecular and cellular changes during tooth development and how they are mimicked during tissue repair offers the opportunity to assess the biologic validity of the various vital pulp treatments.

Under this light, indirect pulp treatment (IPT) can be an acceptable procedure for primary teeth with reversible pulp inflammation, provided that this diagnosis is based on a good history, a proper clinical and radiographic examination, and the tooth had been sealed with a leakage-free restoration.

Stepwise excavation has been suggested as an alternative to IPT. The advantages and disadvantages of this technique will be presented and critically discussed.

Direct pulp capping (DPC) with calcium hydroxide has been widely used with high success rates in young permanent teeth, but the results in primary teeth are less satisfactory. Thus, the traditional rationale for the use of calcium hydroxide DPC should be maintained, and this treatment modality should be reserved for iatrogenic exposures in asymptomatic teeth that are expected to exfoliate within a short period of time. In younger children, iatrogenic or carious exposures should be treated by pulpotomy.

Formocresol has been the most popular pulp dressing material for pulpotomized primary molars for many years but, due to its deleterious effect, the use of formocresol is decreasing considerably worldwide.

Several pulp dressing materials have been tested, but none presented the clinical success rate achieved with formocresol. Ferric sulfate has been proposed as a substitute to formocresol, and the success rates were comparable to those of formocresol. More recently, considerably better results have been obtained with MTA (Mineral Trioxide Aggregate), and statistically significant differences were reported when this material was compared to formocresol.

Data comparing the success rates of the different techniques will be presented

When pulp vitality cannot be maintained (in cases of irreversible pulp inflammation or necrosis) pulpectomy and root canal treatment is the recommended treatment.

In primary teeth a resorbable paste must be employed, while in mature permanent teeth a conventional endodontic treatment is performed.

Several resorbable pastes will be presented, and data comparing the success rates of the different techniques will be presented and analyzed.

In immature permanent teeth, where an appropriate seal cannot be achieved with a conventional root canal filling, a calcium hydroxide apexification is recommended. Another alternative is creating an apical barrier with MTA, followed by a conventional root canal obturation.

Recently a technique that attempts to revascularize the pulp has been reported and will be briefly described.

## Curriculum Vitae

*Prof. Anna B. Fuks was born in Curitiba, Brazil, and graduated in Dentistry by the Federal University of the State of Parana. She completed her post-graduate course in Pediatric Dentistry at the University of Alabama in 1966, and did her residency at The Children's Hospital at the University of Alabama. She then returned to her home town in Brazil, where she practiced and taught Pediatric Dentistry at the University of Parana until 1973. That same year she immigrated to Israel and joined the Department of Pediatric Dentistry of the Hebrew University of Jerusalem, Israel. Following an academic career, she achieved the degree of Professor that she has maintained to date. In addition to teaching and clinical practice Prof. Fuks dedicated herself to clinical and laboratory research, and became a Board member of the International Association of Pediatric Dentistry (IAPD). As visiting professor at the Medical Research Institute of the University of the Witwatersrand (Wits), Johannesburg, South Africa and at Universities in New Jersey, USA, London, England and Ontario Canada, she developed research studies mainly in the fields of Pulp Therapy, Dental Materials and Restorative Techniques. Being fluent in English, Spanish, Portuguese, and Hebrew, she lectured and taught courses in Pediatric Dentistry in several countries in South and Central America, Mexico, United States, Canada, Italy, France, Spain, Greece, Cyprus, Panama, Germany, China, South Africa, Ireland, Thailand and Australia, and became honorary member of the Mexican, Italian, Belgian and Brazilian Academies of Pediatric Dentistry.*

*Dr. Fuks is a member of the American Academy of Pediatric Dentistry and of the editorial board of several dental journals. Having received several international prizes in research, she has published over 120 articles and 85 abstracts in many international journals, and wrote 15 chapters in Pediatric Dentistry books. Presently she continues teaching at the Department of Pediatric Dentistry of the Hadassah School of Dental Medicine in Jerusalem, is a member of the Israeli State Board Exams for Pediatric Dentistry and Endodontics, and is Past-President of the International Association of Pediatric Dentistry .*

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