



## **Case of the Month**

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### **Introduction:**

This patient presented for consultation with a history of an intermittent, dull ache in the upper left posterior quadrant. The discomfort had been present for 4 months. Clinical examination revealed a buccal fistula adjacent to tooth # 2.7 and a 10-mm perio pocket on the mesial aspect of the M-B root. Root canal therapy was completed 1 year ago. Tooth # 2.6 tested within normal limits to cold and percussion.

### **Differential Diagnosis:**

1. Crack of M-B root
2. Failed RCT
3. Isolated perio defect # 2.7

### **Treatment Plan:**

1. Flap # 2.7 and explore
2. Apioectomy # 2.7 or root amputation if cracked

### **Treatment:**

A facial flap revealed a gross osseous defect with no interproximal bone. Suspected a vertical fracture of the M-B root. The root was amputated.

Inspection of the root after surgery revealed no fracture but an untreated M-B2 canal was evident. It appeared to bifurcate from the main canal at the mid root.

### **Summary:**

When in doubt Retreat!