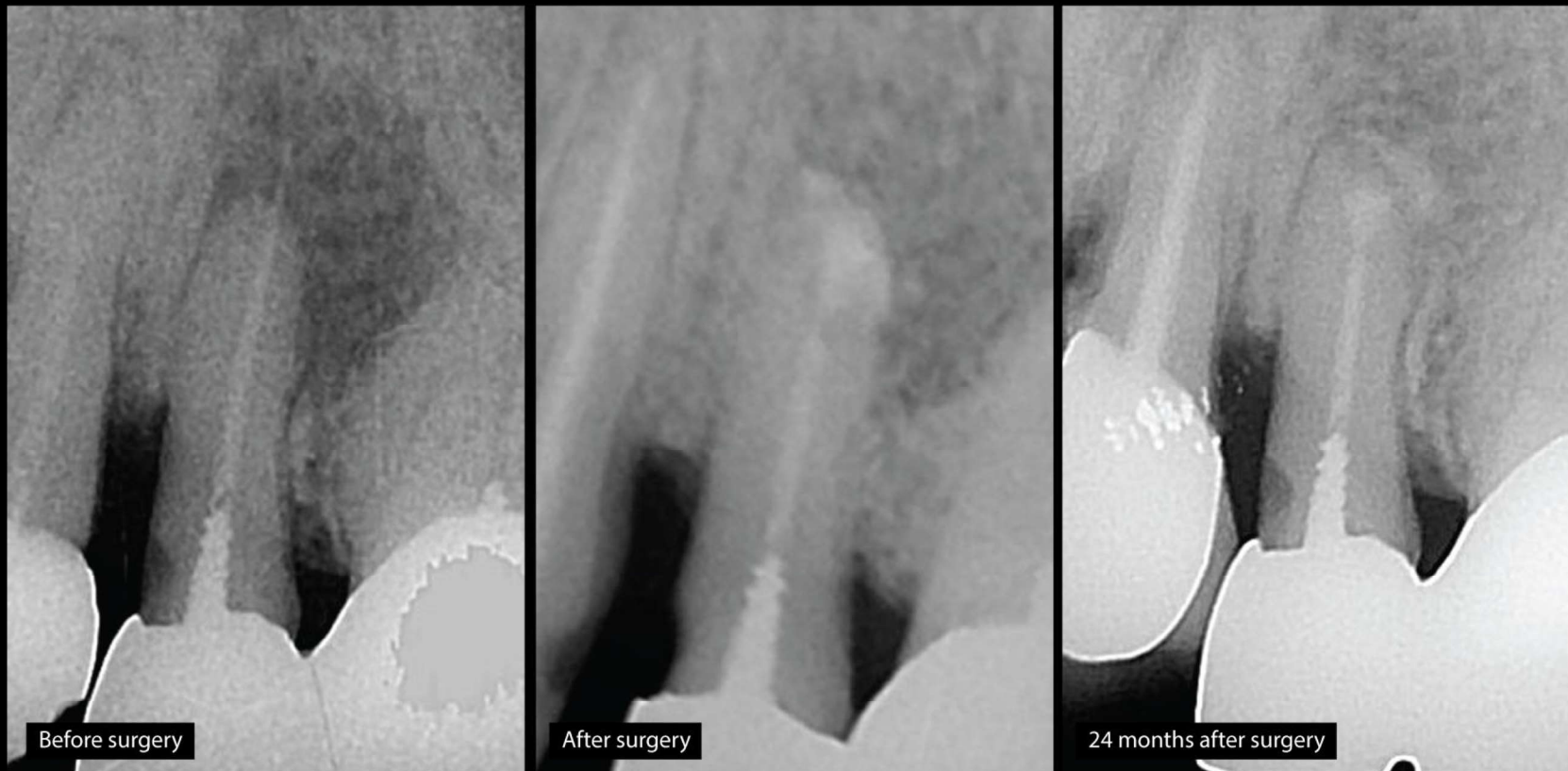
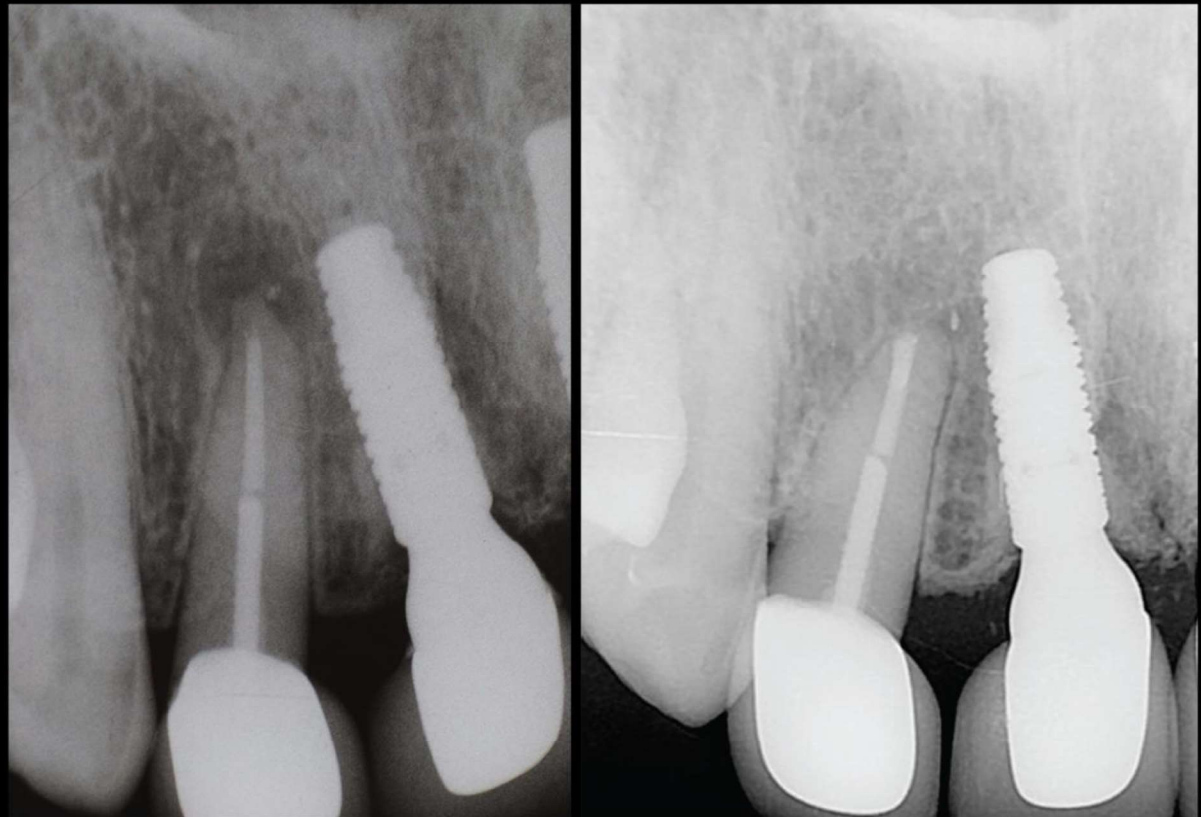


## **Apicoectomy #1**



Surgical method was selected over prosthetic approach due to post positioning.  
A distinct linear alba may be observed after surgery using ENDOCEM MTA.

## *Apicoectomy #2*



Due to the length of the post, surgical approach was best in this case. The restoration was poorly placed resulting in the tooth experiencing excessive occlusal interference. Nevertheless, the tooth is seen in the process of healing after surgery and placement of ENDOCEM MTA.

## Replantation



Extraction was necessary due to extensive root contamination and apical lesion.  
Retro-filling was completed using ENDOCEM MTA and replantation was performed.  
11 months post-operatively, good healing with development of new hard tissues found on radiograph.

## *Perforation Repair*



ENDOCEM MTA particles are smaller in size on average than conventional MTA products, and it also has a high viscosity. Therefore, it is easily applied using an appliance such as the CENTRIX gun. Another important feature is ENDOCEM MTA's non-miscibility that allows it to maintain integrity in less than ideal clinic conditions such as uncontrolled bleeding, without fear of wash-out. The unique characteristics of ENDOCEM MTA facilitate its use in areas that may be difficult to isolate and maintain a dry field.

Strip perforations may be successfully restored with ENDOCEM MTA. Please see above.



## *Apexogenesis*



Case of pulpal inflammation due to Dens Evaginatus and fracture.

After canal irrigation was performed up to the necrotized area, the canal was filled with ENDOCEM MTA by retro-filling method.

After case completion the treated area looks almost indistinguishable from natural root.

## *Vital pulp therapy #1*



Many studies have found that success rates of direct pulp capping is significantly affected by the cause of pulp exposure, scope of pulp exposure, and patient's age. However, ENDOCEM MTA boosts rates of successful outcomes to the point that it exceeds that of the conventional endodontic treatment regardless of aforementioned factors in direct pulp capping.

## ***Vital pulp therapy #2***



When pulp exposures occur in anterior teeth, Partial pulpotomy with MTA is likely the best treatment option. When doing so, ENDOCEM MTA, impervious to contamination by blood, is the safest product choice for successful clinical outcomes.

## *Vital pulp therapy #3*



Direct pulp capping and resin core build up on maxillary 1st molar  
ENDOCEM MTA makes immediate resin bonding and preparation possible after treatment due to its fast setting time.



## ***Pulpotomy of deciduous tooth***



ENDOCEM MTA may be used in primary teeth without total bleeding control, with placement of stainless steel crown immediately after treatment.

ENDOCEM is biocompatible; and thus, causes low level of irritation resulting in less calcification. However, clinical findings from pulpotomy treatments show that ENDOCEM MTA also induces calcification in root canals