A CASE OF STAPLER PIN IN THE ROOT CANAL - EXTENDING BEYOND THE APEX.

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ABSTRACT: There have been several reports describing the placement, by patients, of foreign objects into exposed pulp chambers and canals. In the present case, a 13-year-old patient reported with complaints of pain and a history of inserting a foreign object into the root canal of the left central incisor. On examination the foreign body was found to be a stapler pin which was projecting 5 millimeters from the apical foramen. Foreign bodies discovered from the root canal have varied from radiolucent objects like wooden tooth picks or tooth brush bristles to radioopaque materials like paper pins, needles, pencil leads etc. In the present case, despite our best efforts, the patient did not agree to undergo any treatment except for the extraction of the left central incisor.

INTRODUCTION

Habits involving the oral cavity are very common in children. Placement of toys, pencils or other playable objects in the mouth is frequently displayed. Such habits can cause serious injury and special attention should be given when children intentionally insert objects into the root canal. Most of the time the parents are unaware of their children trying to insert objects into the canal.

There have been several reports describing the placement, by patients, of foreign objects into exposed pulp chambers and canals. Hall reported the introduction of a wooden object into the pulp chamber of a tooth, which had been exposed as a result of abrasion, in a child with vitamin D-resistant rickets. Gelfman and Colleagues noted the introduction of straw fibres into a cariously exposed tooth. Nernst and Harris described the insertion of various metallic objects like needles and pins into the open pulp chambers of teeth being prepared for endodontic therapy. Grossman reported finding an "indelible ink" pencil tip and small nails in the tooth that had been left open for drainage. Hayes reported gingival staining to have caused by pencil lead from a mechanical pencil and Salwen reported finding a "seed" in the periapex.

The present case is very unusual in that the patient has inserted a stapler pin of about 12 millimeters in length into the root canal, which had extruded about 5 millimeters beyond the apical foramen.

CASE REPORT

A 13 years old male patient reported to the Department of Pedodontics and Preventive Dentistry, College of Dental Surgery, Mangalore, seeking relief from pain associated with a fractured permanent maxillary left central incisor. The pain was of 1-week duration. He gave a history of trauma 3-4 years back that resulted in fracture of both the left and right central incisors. During the trauma, patient had experienced no pain and the pain developed 2 years later, for which he consulted a dentist. The dental surgeon initiated an endodontic procedure but the patient could not reveal the type of treatment. The patient did not maintain his appointments regularly and later he developed pain, for which he came to the author.

Clinical examination revealed fracture of the crown involving the enamel, the dentin and the pulp of the maxillary permanent right and the left central incisors. The access opening on the palatal aspect of both the incisors was present. There was a soft tissue swelling corresponding to the apex of the left central incisor. Both the incisors were tender on percussion.

Radiographic examination revealed periapical radiolucency in relation to both the central incisors and incomplete closure of the apex. Since apex closure was incomplete, it was assumed that the dental surgeon had initiated apexification. A radioopaque object of about 12 millimeters in length

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