

ROOT CANAL TREATMENT DISCHARGE INSTRUCTIONS

Your pet underwent root canal therapy, a specialized dental procedure that removes infected or damaged pulp tissue from inside the tooth, thoroughly disinfects the root canal system, and seals it to prevent future bacterial invasion. This treatment saves the tooth structure while eliminating pain and infection. The procedure involves creating a small access hole through the crown of the tooth, removing the pulp, cleaning and shaping the canals, filling them with an inert rubber-like material called gutta-percha, and finally restoring the access site with a strong composite filling that closely matches the tooth color.

What to Expect in your Pet's Mouth

Following root canal therapy, the treated tooth should be comfortable and functional. The composite restoration on the crown surface may appear slightly different in color or texture compared to the natural enamel, but it should be smooth and flush with the surrounding tooth structure. There should be no holes, gaps, or rough edges where food could become trapped. The gums around the treated tooth should appear pink and healthy without significant swelling or redness. Your pet should begin using the tooth normally for eating and chewing within a few days as any minor post-procedural sensitivity resolves.

Daily Home Monitoring

The access sites in the tooth through which the root canal was performed were filled with a composite material that is very strong and closely matches the color of the tooth. On a daily basis, usually at the time of tooth brushing, check to make sure the composite is in place. If it were gone, you would notice a hole in the tooth with a pink or orange material down below. This pink or orange material is the gutta-percha root canal filling, which should never be exposed to the oral environment as it can lead to bacterial leakage and treatment failure. For patients who have had root canal therapy, during home care is the perfect time to make sure the composite is in place and there has been no further damage to the tooth. Gently lift the lip to visualize the treated tooth, looking for any changes in the restoration's appearance, integrity, or position.

Specific Complications to Watch For

Endodontic treatment can fail if bacteria re-enter the sealed canal system or if structural damage occurs to the tooth. One serious complication is apical periodontitis, where infection persists or develops at the tip of the root, causing bone destruction visible on radiographs and potentially causing swelling near the tooth root. This may present as a firm swelling under the eye for upper canine teeth, drainage tract on the face or gums, or recurrent pain despite the root canal treatment.

Another complication is root fracture, which can occur if the tooth structure was significantly weakened by the original injury, decay, or the access preparation itself. Vertical root fractures are particularly devastating as they typically require tooth extraction and may cause intermittent pain, swelling that comes and goes, or a narrow deep pocket alongside the tooth detected during professional examination.

Coronal leakage represents another significant risk, occurring when the composite restoration fails, breaks, or wears away, allowing oral fluids and bacteria to seep down into the previously sealed canal system. This contamination can happen within days or may develop gradually over months, eventually leading to reinfection and abscess formation.

Instrument fracture is a technical complication where a small endodontic file breaks inside the root canal during the initial procedure. While sometimes these fragments can be bypassed or incorporated into the filling, they may prevent complete canal sealing and serve as a nidus for infection. Additionally, some teeth have complex anatomy with accessory canals, lateral canals, or isthmus connections that may be impossible to fully clean and seal, leading to persistent infection in these microscopic branches.

Tooth discoloration may develop months or years after successful root canal therapy, indicating internal bleeding at the time of original injury, pulp tissue remnants breaking down, or bacterial byproducts staining the dentin from within. While discoloration alone does not indicate failure, it warrants radiographic evaluation to assess periapical health. Progressive wear or attrition of the composite restoration can occur with heavy chewing forces, eventually exposing the underlying root canal filling material.

Internal or external root resorption represents another complication where the tooth structure begins to dissolve, either from within the canal or from the external root surface, potentially compromising tooth stability and requiring advanced intervention or extraction.

Signs of Treatment Failure

Monitor your pet closely for indicators that the root canal may be failing or complications have developed. Persistent or recurrent swelling of the face, particularly under the eye for upper teeth or along the jawline for lower teeth, suggests apical abscess formation. Any drainage of pus or blood from the gums near the treated tooth, or the appearance of a pimple-like lesion on the facial skin that intermittently drains, indicates established infection requiring immediate attention.

Your pet may show subtle signs of oral discomfort including dropping food while eating, reluctance to chew hard items on the affected side, excessive drooling, or pawing at the face. Some animals will become head-shy, resisting handling of the muzzle or face, while others may exhibit decreased appetite or selective eating preferences. Bad odor from the mouth that

persists despite regular dental care, visible holes or defects in the tooth crown, or any exposure of pink or orange material at the access site all warrant prompt veterinary evaluation.

Long-Term Follow-Up Care

Your pet should be rechecked in 6 months with a dental radiograph. Please call to set up this appointment. This radiographic examination is essential to evaluate the bone healing around the root tip and confirm that the root canal treatment remains successful, as many failures do not cause obvious clinical signs until significant damage has occurred.

If the root canal looks good at the one-year recheck, future visits are necessary only if you notice a problem such as not eating, dropping food, missing composite, swelling, or any other concerns with the treated tooth. However, periodic radiographic monitoring every one to two years indefinitely may be better, as endodontic failure can occur silently years after apparently successful treatment.

Please call if you notice any problems with the composite material or have any questions about the appearance of the tooth, as early intervention can often salvage the tooth and prevent the need for extraction.