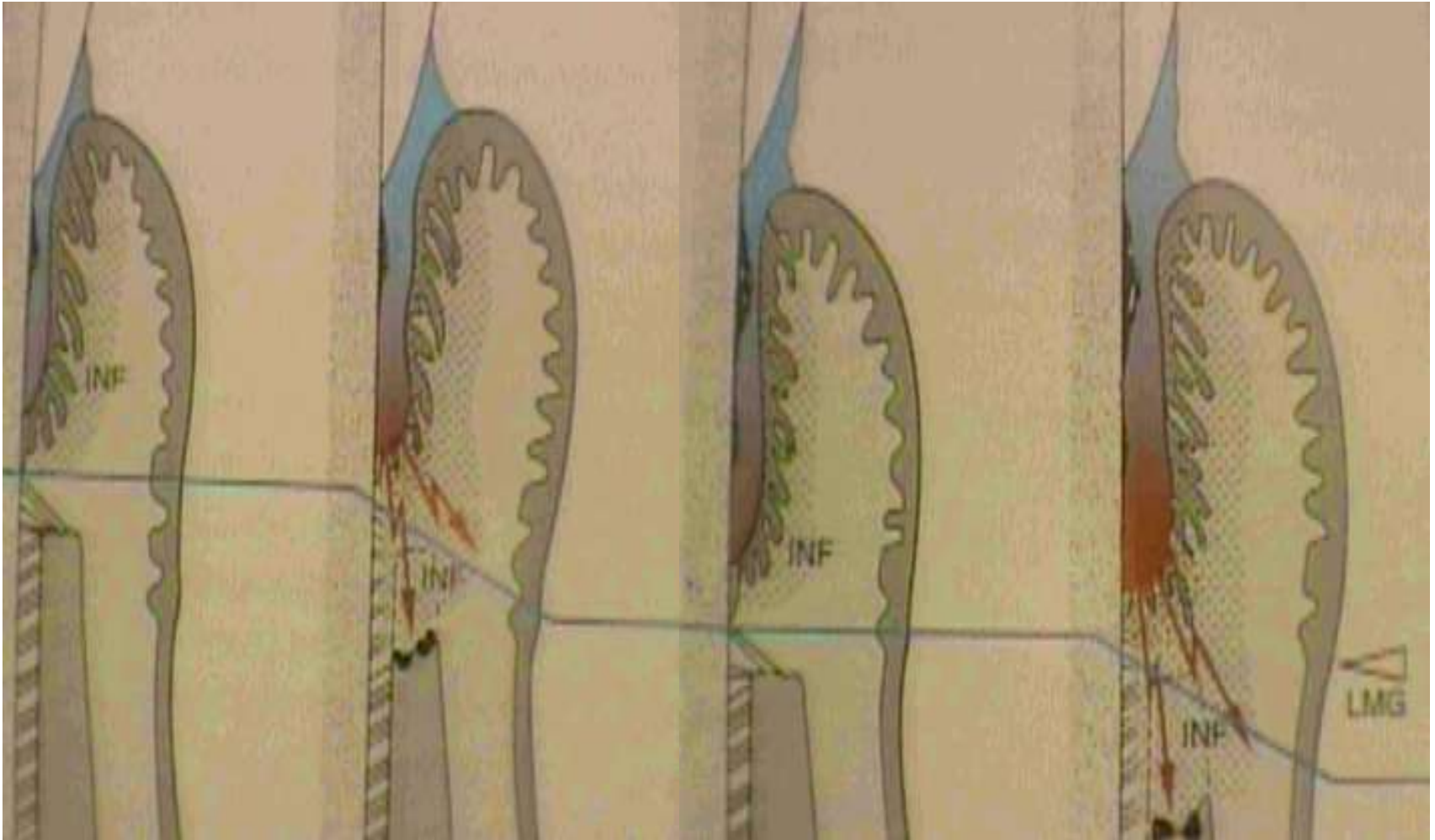


# LESÃO DE FURCA

# EVOLUÇÃO DA PERIODONTITE



**CODIGO 1**

**CODIGO 2**



**CODIGO 3**

**CODIGO 4**

**Sonda para CPINT -OMS**



**Prolongamentos de esmalte**



**Cálculos subgengivais**





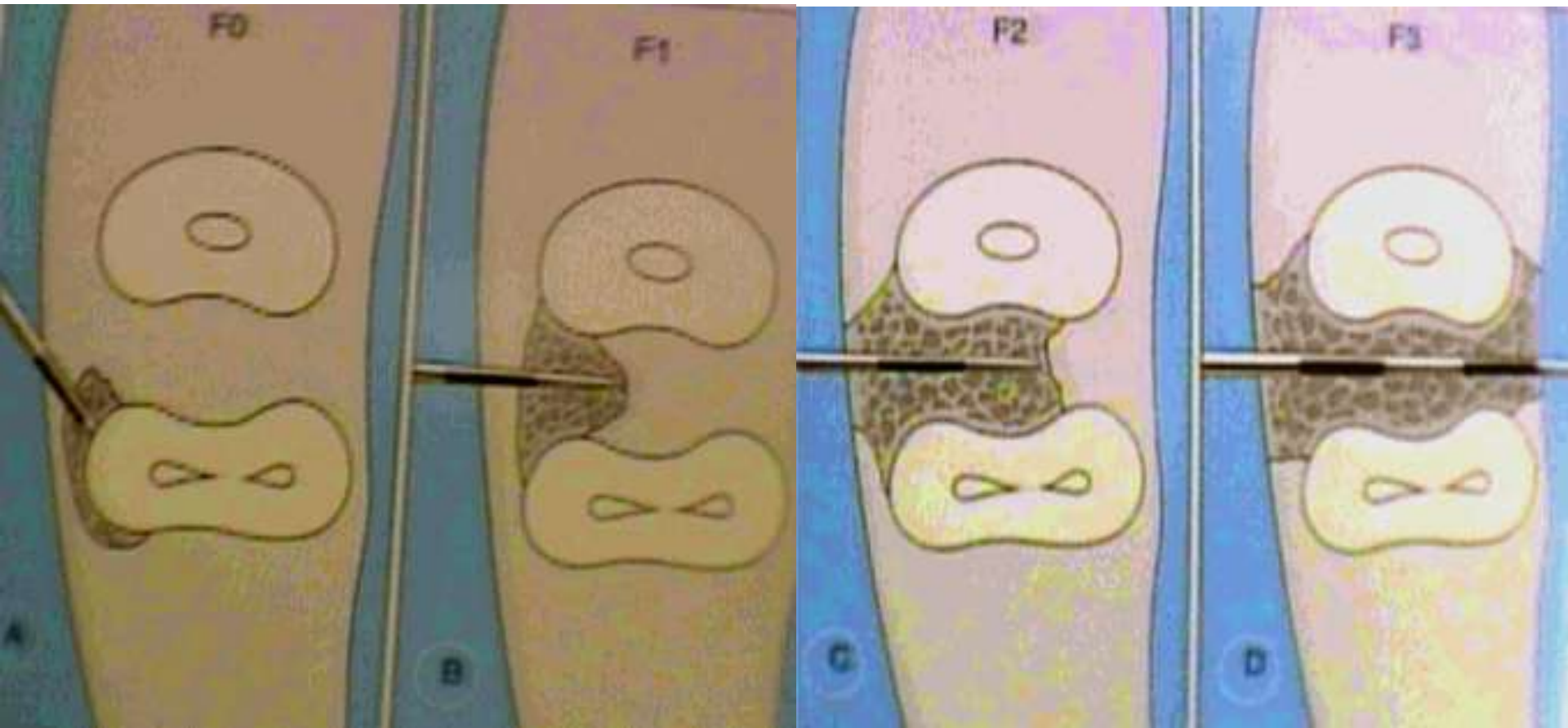
# DEFEITOS DE FURCA Horizontal

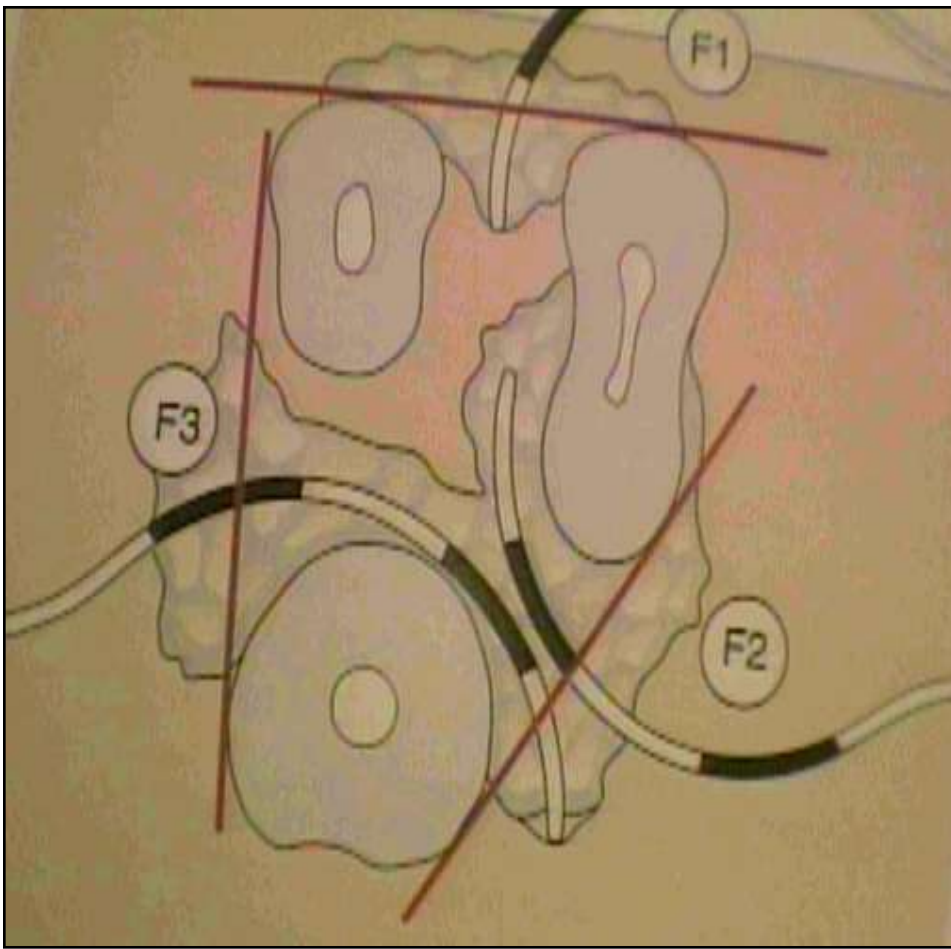
**A: Bolsa de raíz mesial sem comprometer a furca**

**B: Furca 1, a sonda Penetra até 3mm horizontalmente**

**C: Furca 2, sonda penetra mais de 3mm**

**D: Furca 3, sonda Atravessa para o outro lado**





### Graus de Furcas (horizontal)

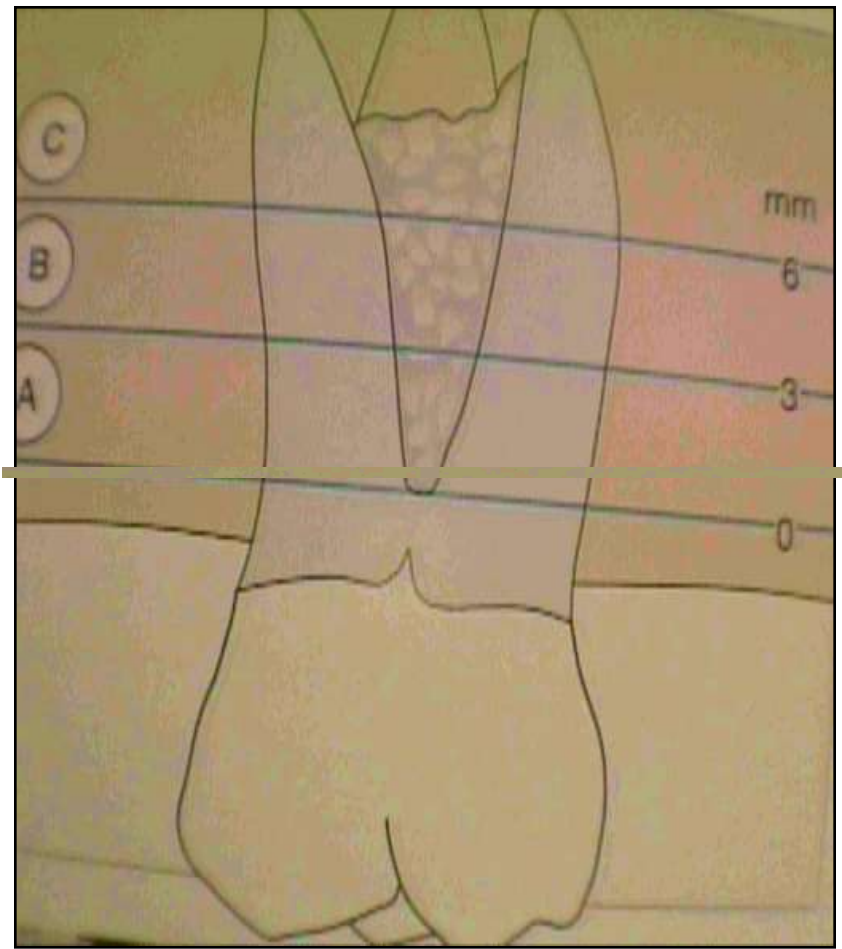
Hamp y col. 1975

FO= não há profundidade horizontal

F1= 1 a 3 mm

F2= mais de 3mm, não comunica de lado a lado

F3= Comunica lado a lado



### Graus de Furcas (vertical)

Tarnow y Fletcher 1984

A= 1 a 3 mm

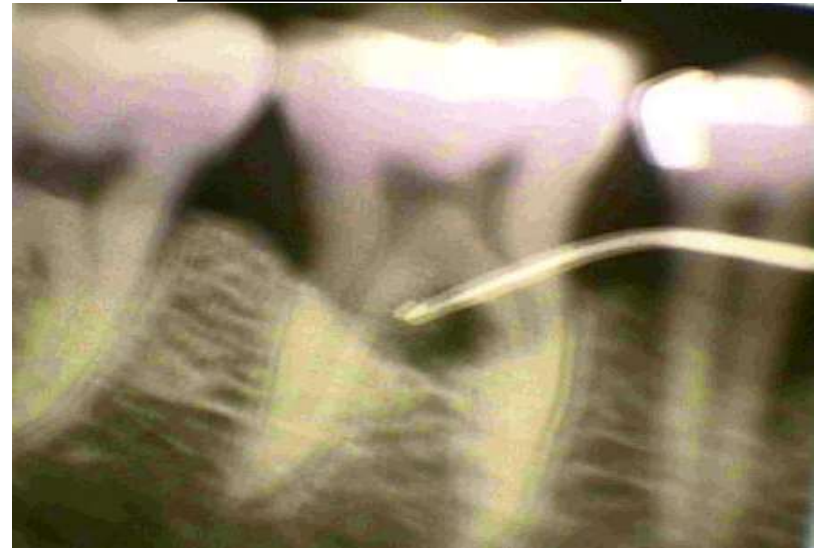
B= 4 a 6 mm

C= mais de 6 mm

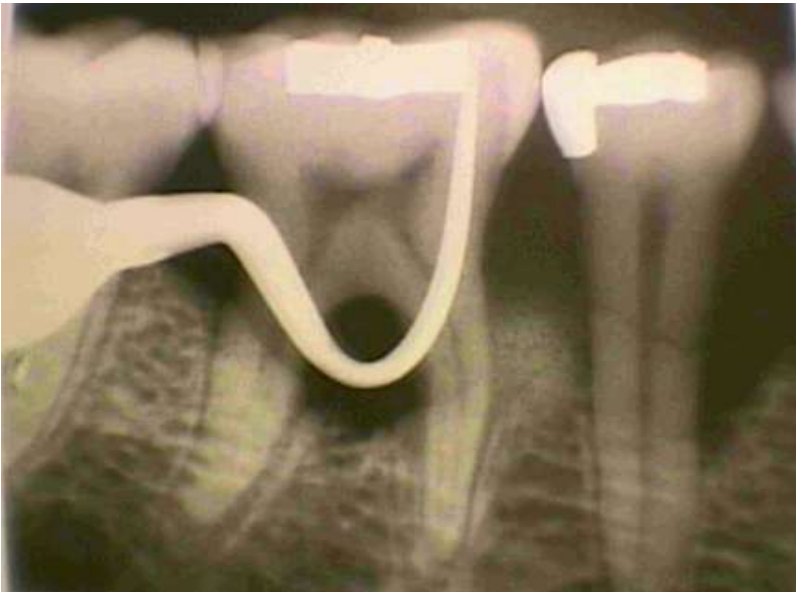
**Sin afección de la furca**



**Furca 3, subclase A**

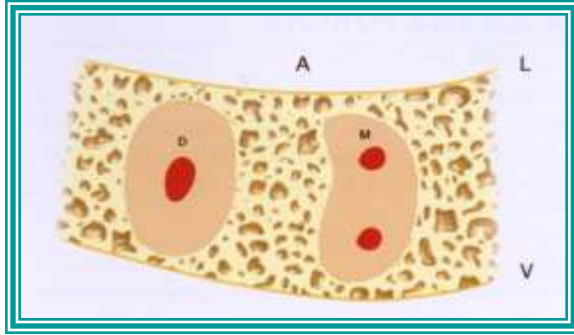


**Furca 3, subclase C**

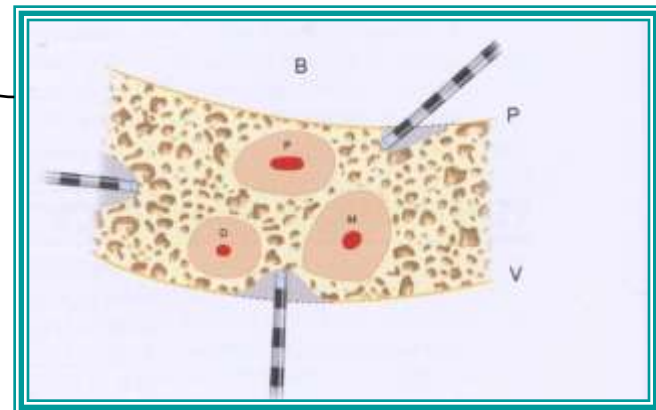
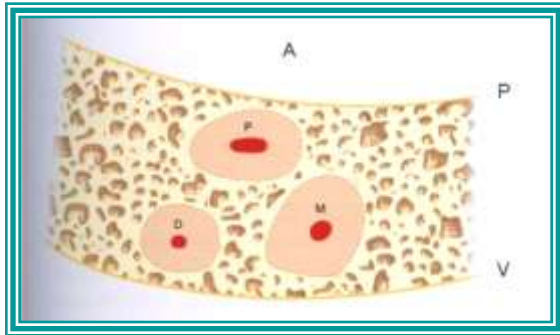
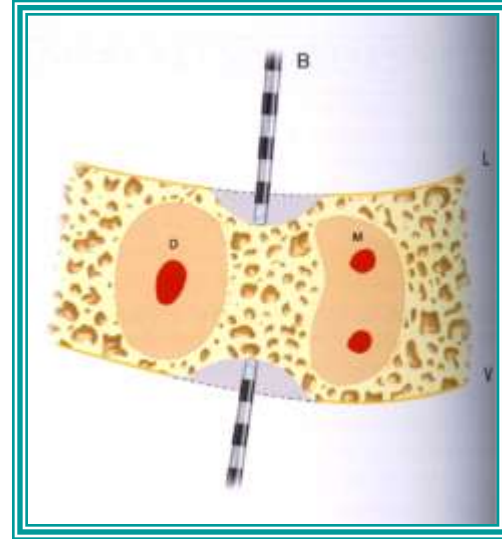




# Furcas classe I

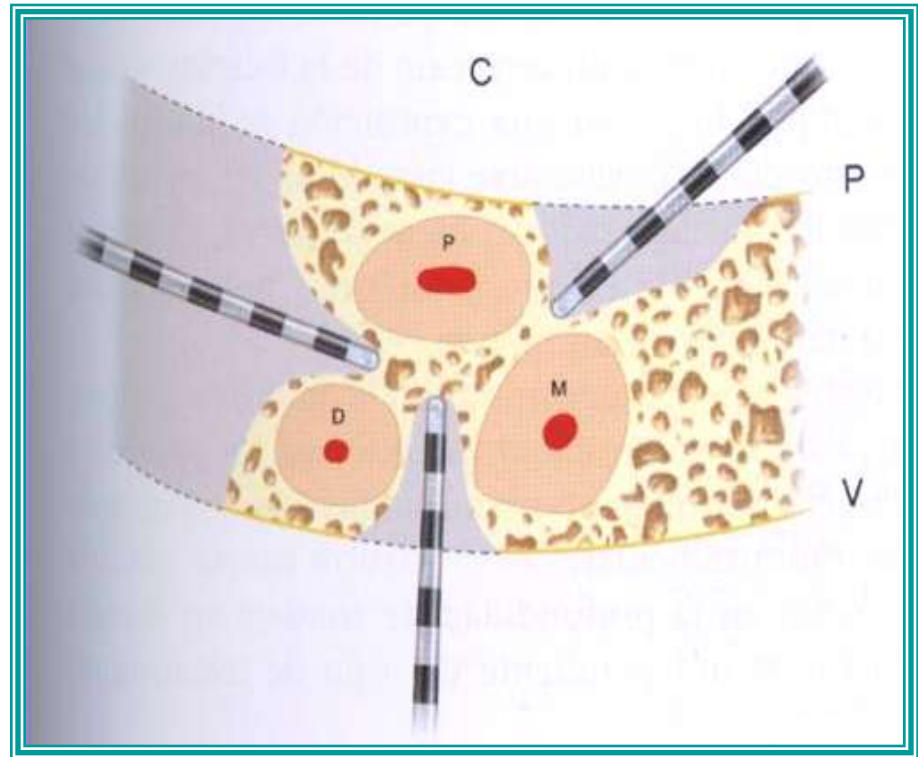
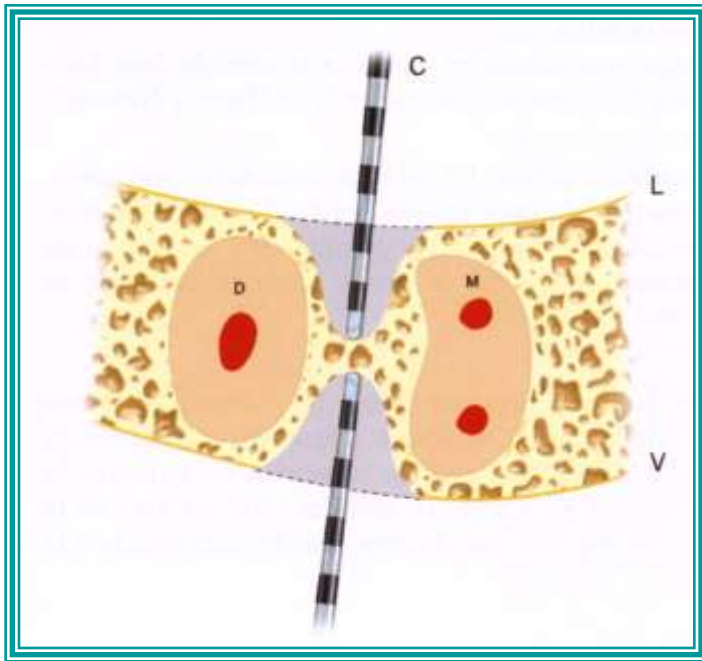


PI -3mm periodontitis leve a moderada



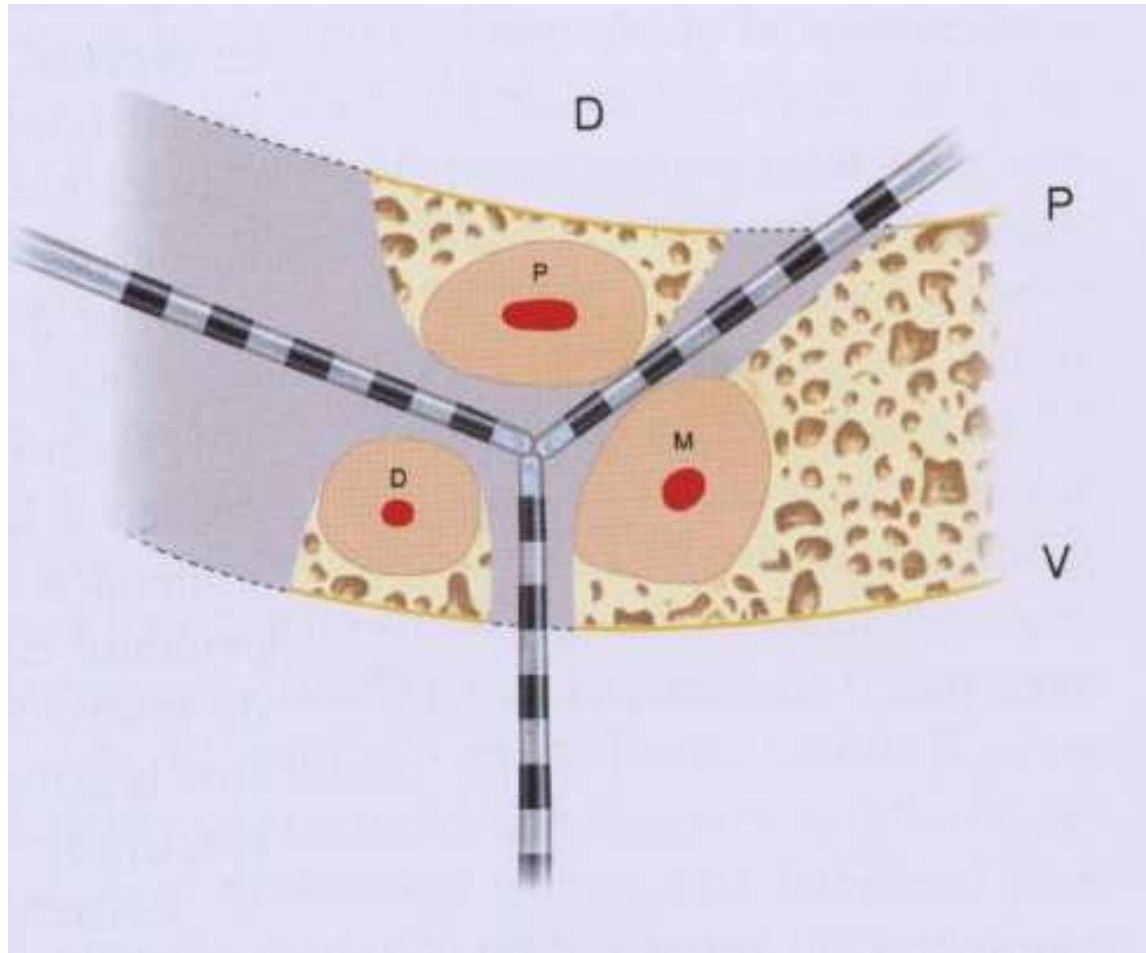


# Furcas Classe II

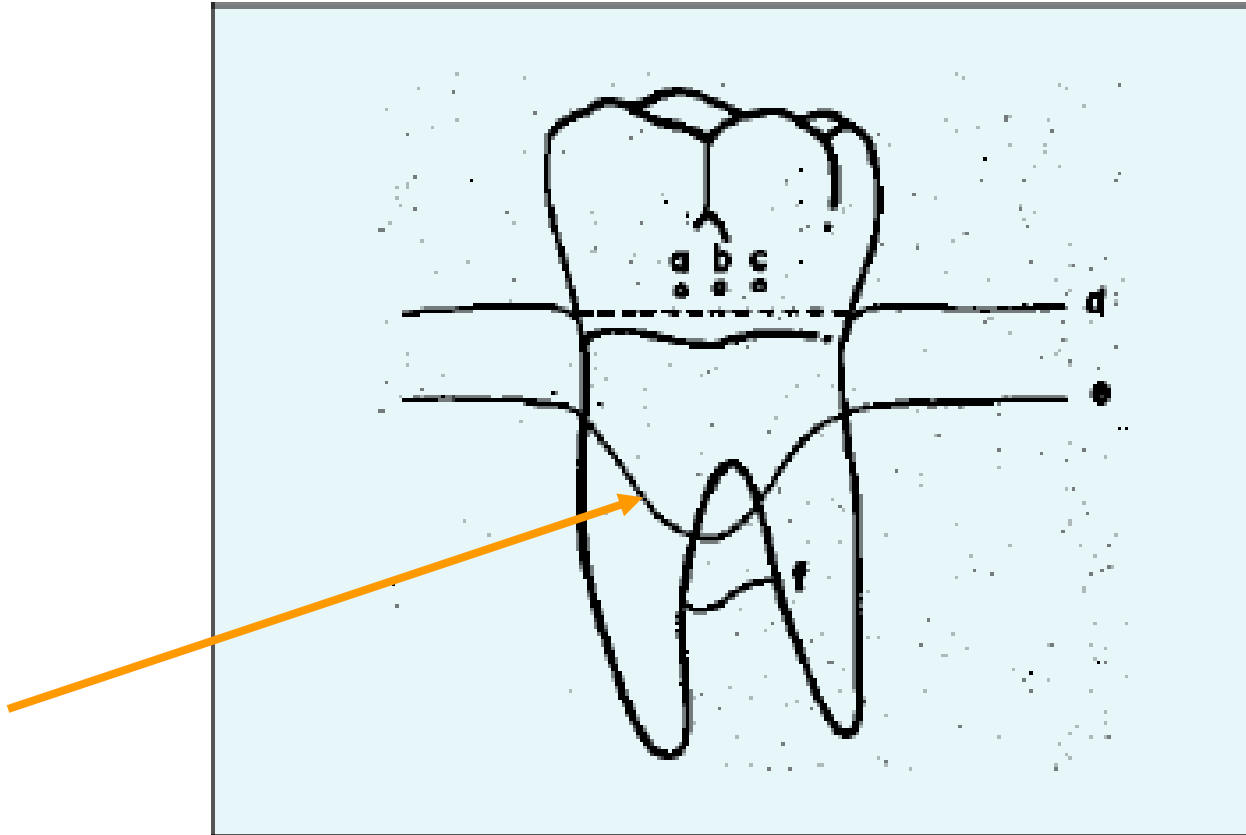


PI de 3mm o + (periodontitis avanzada)

# Furcas Classe III



# Furcas Classe IV



# **OBSERVAR OS SEGUINTE FATORES**

**Defeitos intra óseos combinados**

**Deiscência**

**Defeitos horizontais**

**Estado mucogengival .**

**Estado endodôntico.**

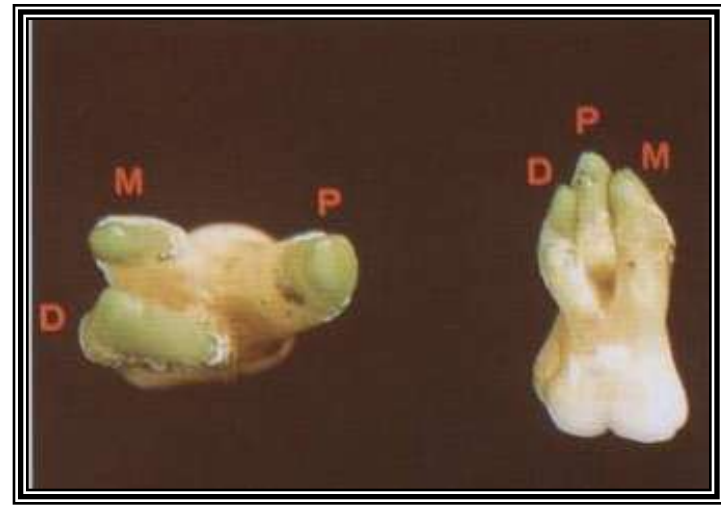
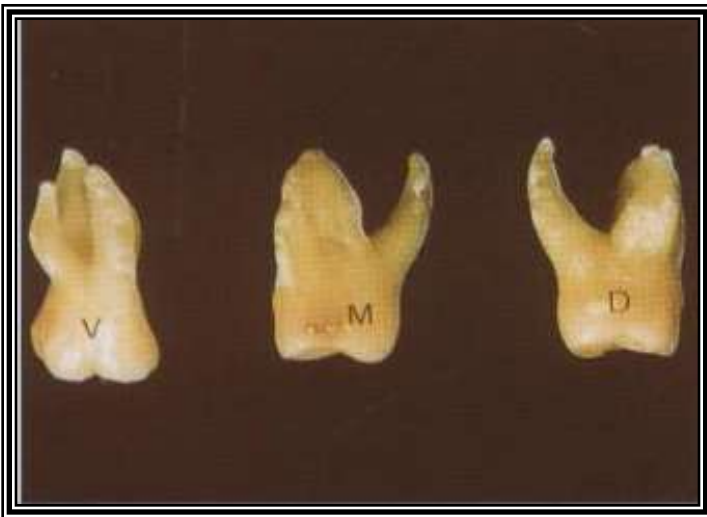
**Anatomia do tronco radicular**

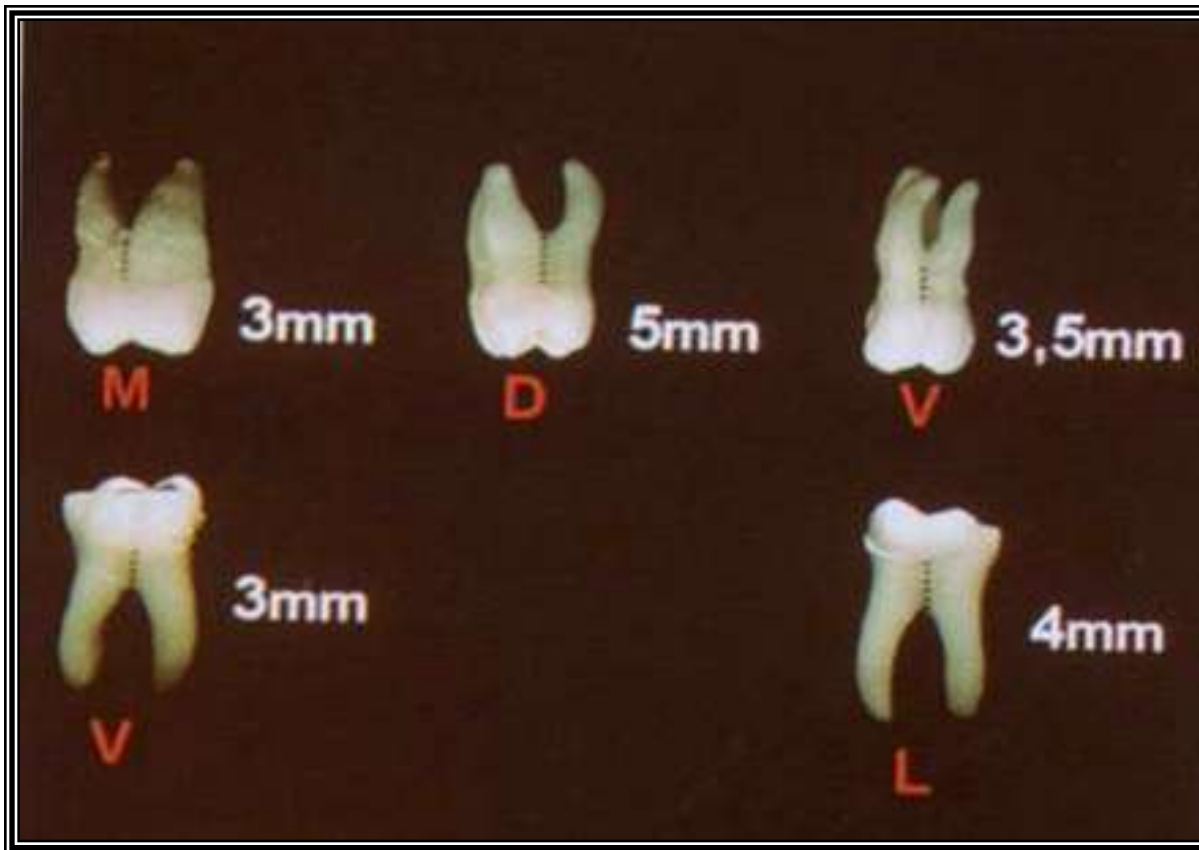
**Proximidade e divergência radicular**

**Altura óssea interproximal em relação a furca**



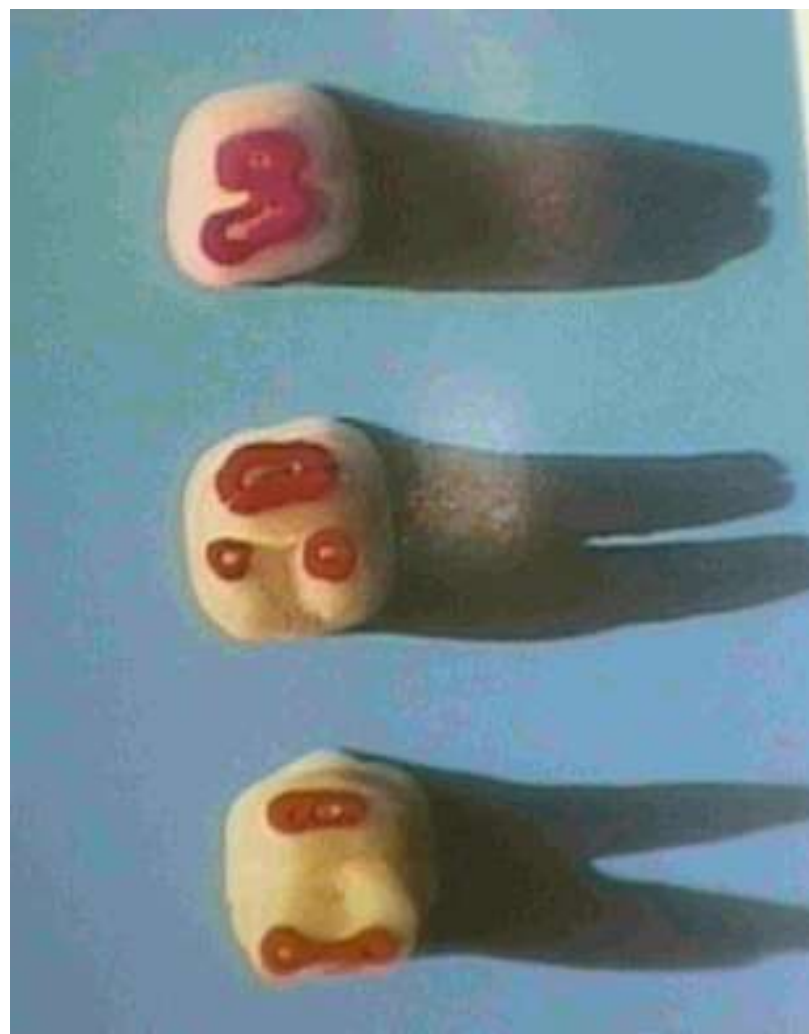
# Factores de êxito/fracasso no tratamento





**Importancia critica na  
seleção do caso para a  
terapia regenerativa**





**VARIAÇÕES DE FURCA DE  
MOLARES SUPERIORES E INFERIORES**

# **PROCEDIMENTOS CIRÚRGICOS PARA TRATAMENTO DE LESÕES DE FURCA**

- **Odontoplastia e furcoplastia**
- **Rizectomia**
- **Odontossecção**
- **Tunelização radicular**
- **Procedimentos regeneradores**

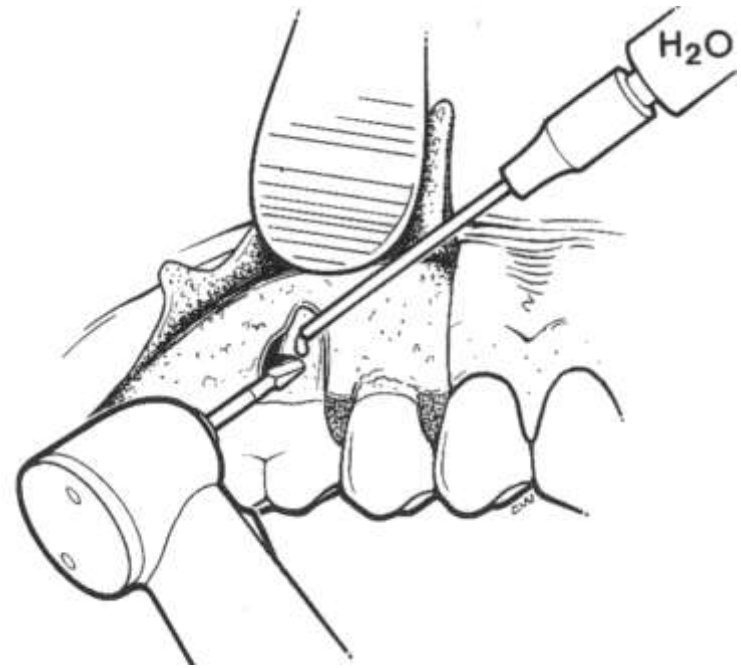
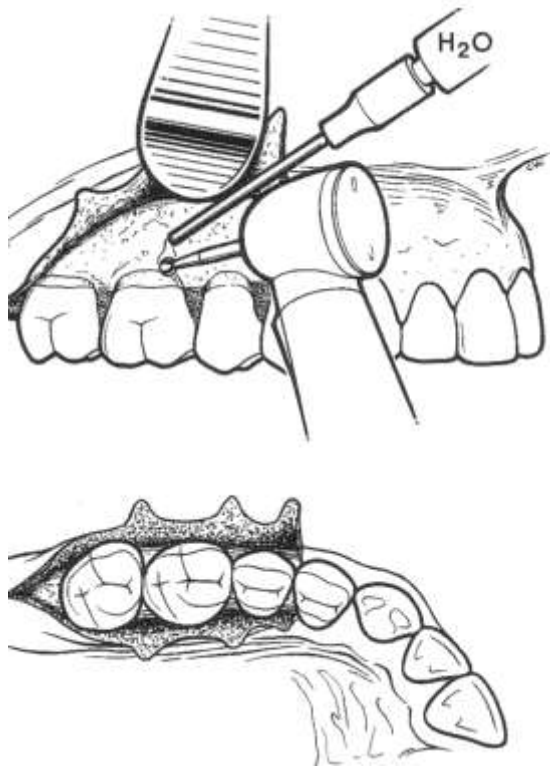


# RIZECTOMIA

- **Definição:** Procedimento cirúrgico que visa a remoção de raízes.
- **Indicações:**
  - Envolvimento extenso de furcas com extensa reabsorção óssea ao redor das raízes
  - Dentes com perfurações ou trepanações no assoalho da câmara pulpar

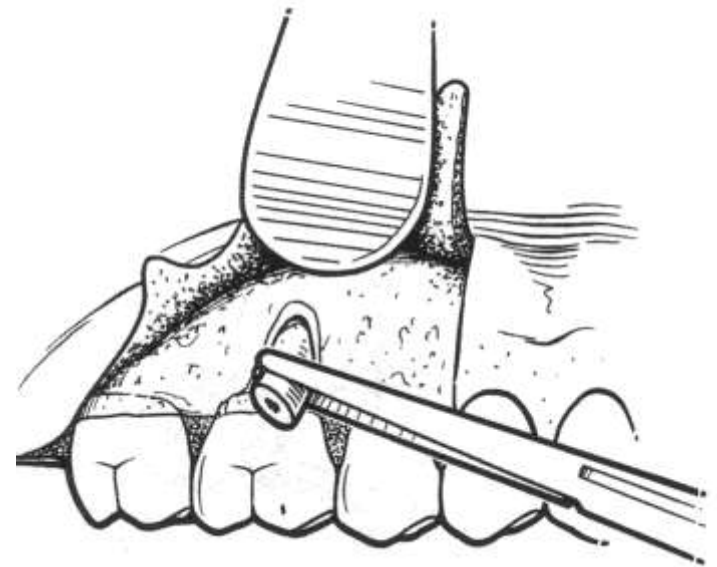
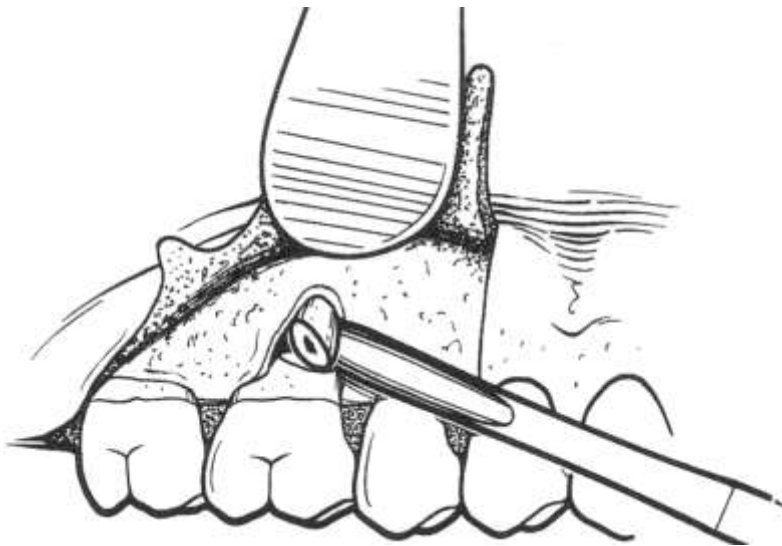
# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

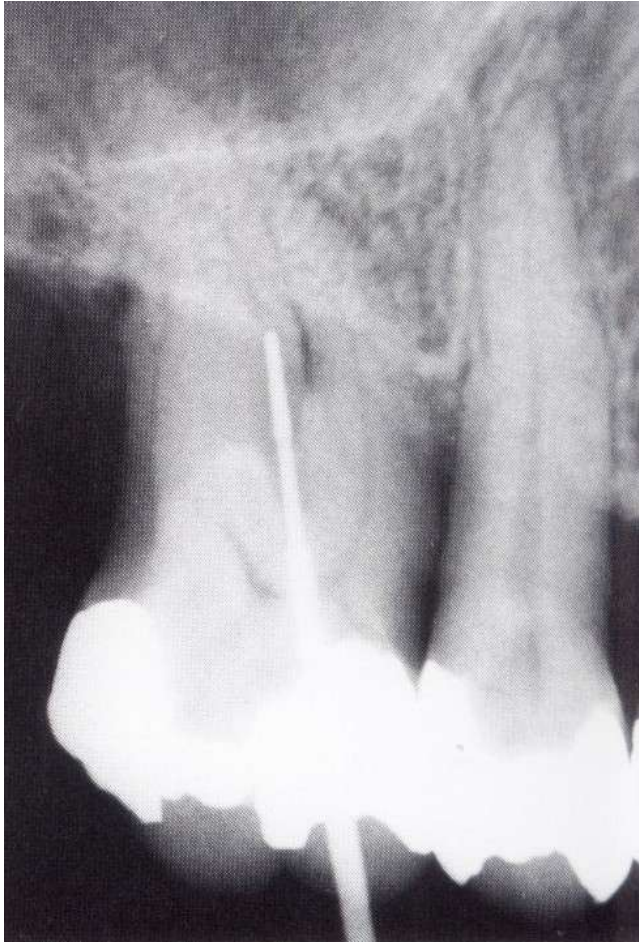
## ✓ Rizectomia



# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

✓ Rizectomia

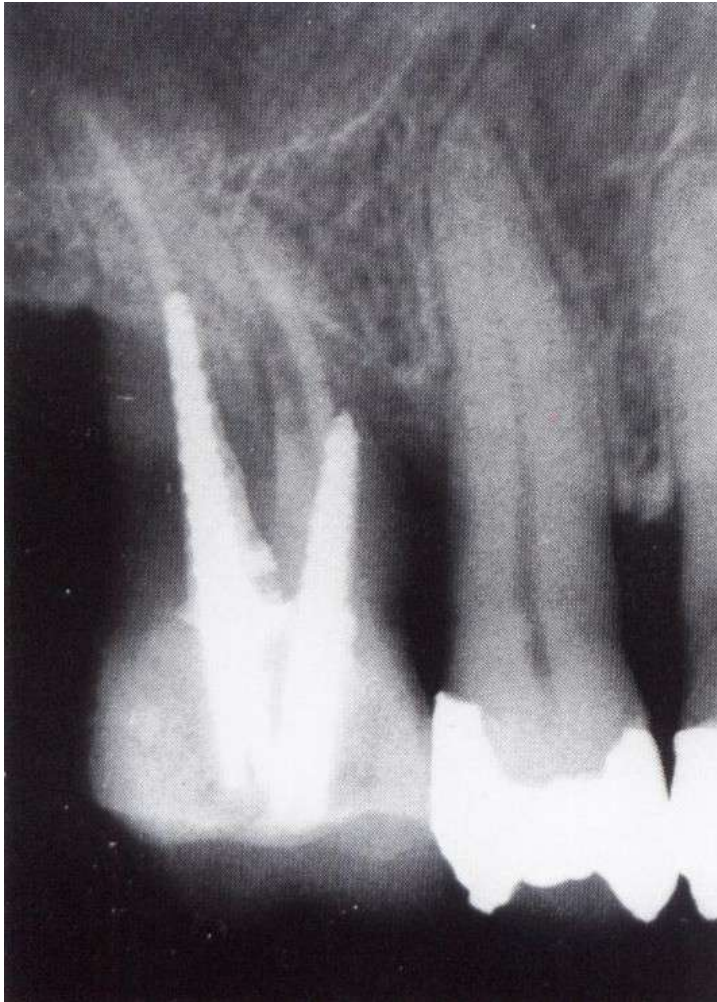












# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

## Rizectomia



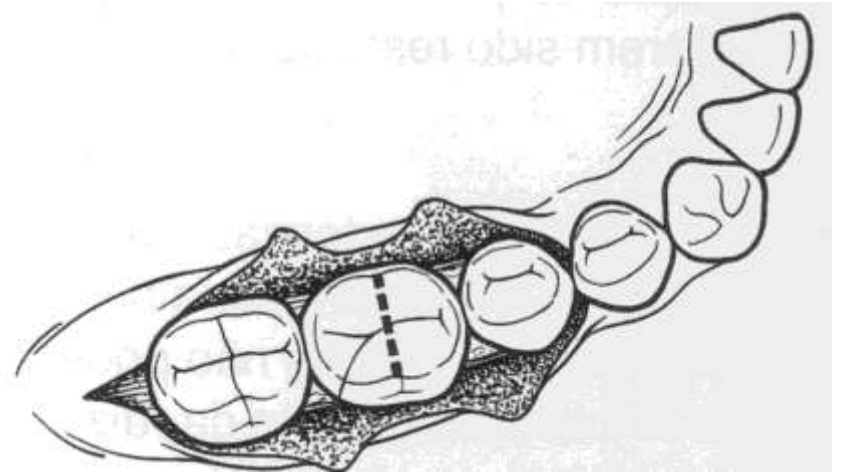
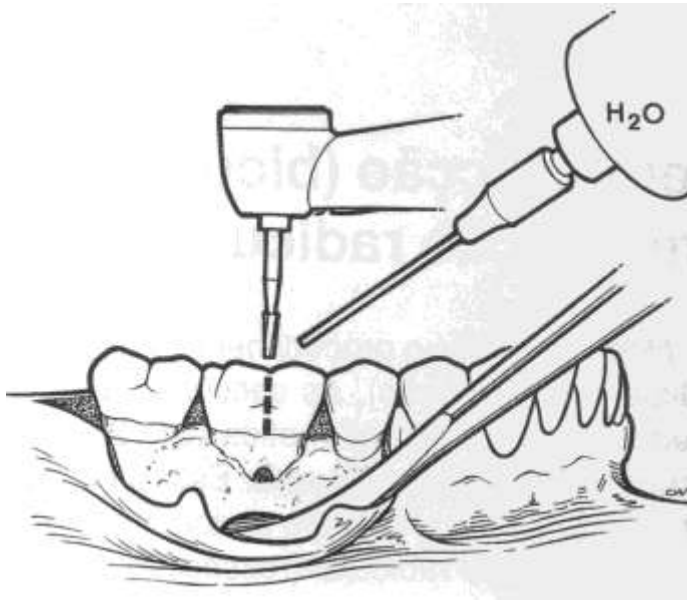
# ODONTOSSECÇÃO

- **Definição:** Procedimento cirúrgico que visa apenas a separação das raízes.
- **Indicações:**
  - Envolvimento extenso de furcas com extensa reabsorção óssea ao redor das raízes
  - Dentes com perfurações ou trepanações no assoalho da câmara pulpar
  - Dentes muito inclinados
  - Dentes com cáries profundas no assoalho da câmara pulpar



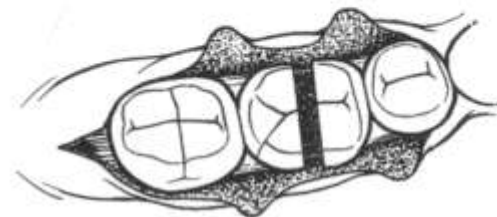
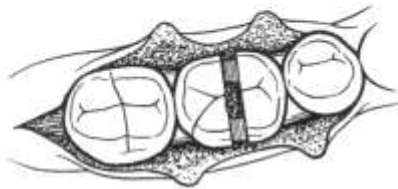
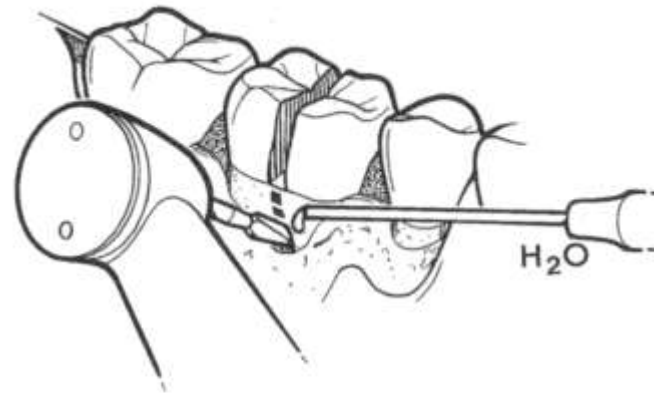
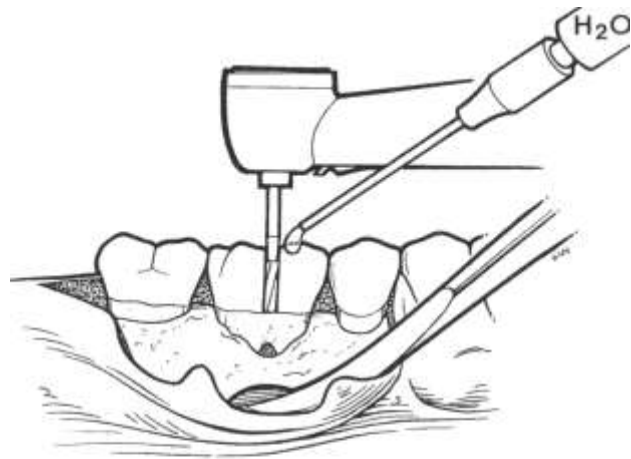
# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

## Hemisseccção



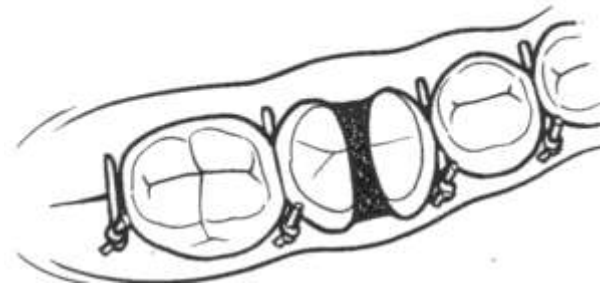
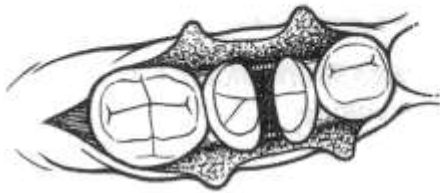
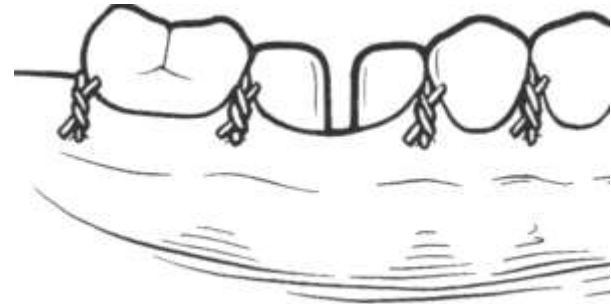
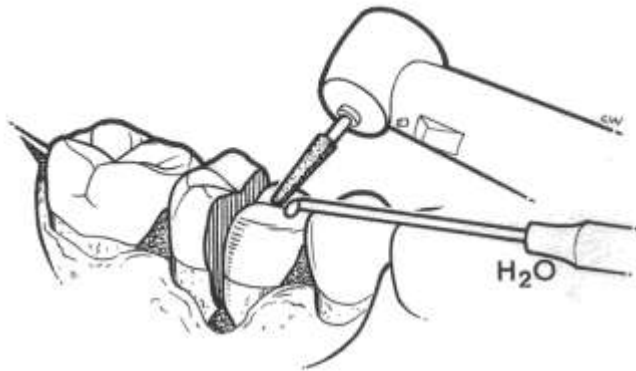
# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

## Hemisseccção



# TRATAMENTO DAS LESÕES ENDOPERIODONTAIS

## Hemisseccção



# TUNELIZAÇÃO RADICULAR

- **Definição:** Procedimento cirúrgico que visa aumentar o tamanho da furca através do contorno do osso ou por remodelação interna das raízes.
- **Objetivo:** Promover espaço para higienização da área da furca
- **Indicação:** Bifurcações de molares inferiores





# REGENERAÇÃO TECIDUAL GUIADA

**ENXERTOS ÓSSEOS TEM ÊXITO  
LIMITADO EM DEFEITOS DE FURCA  
DE CLASSE II E III**

**CONTENÇÃO DO ENXERTO**

**EXCLUSÃO EPITELIAL**

**CONTAMINAÇÃO MICROBIANA**

**VARIEDADES DO ENXERTO**

# Regeneração tecidual guiada

- **Variabilidade de resultados desde 0% a 67%**
- **Via sondeo clinico o evaluacion de reingresso**
- **0.8mm a 4.5mm de melhora de N.I. horizontal**
- **Observações clínicas com RTG tem mostrado resultados mias favoráveis em furcas mandibulares classe II**
- **Limitados relatos de éxito em outros defeitos de classe II e III**

# Problemas com membranas e barreiras

**Manutenção do espaço do sítio**

**Limitado acesso aos defeitos de furca**

**Contaminação microbiana**

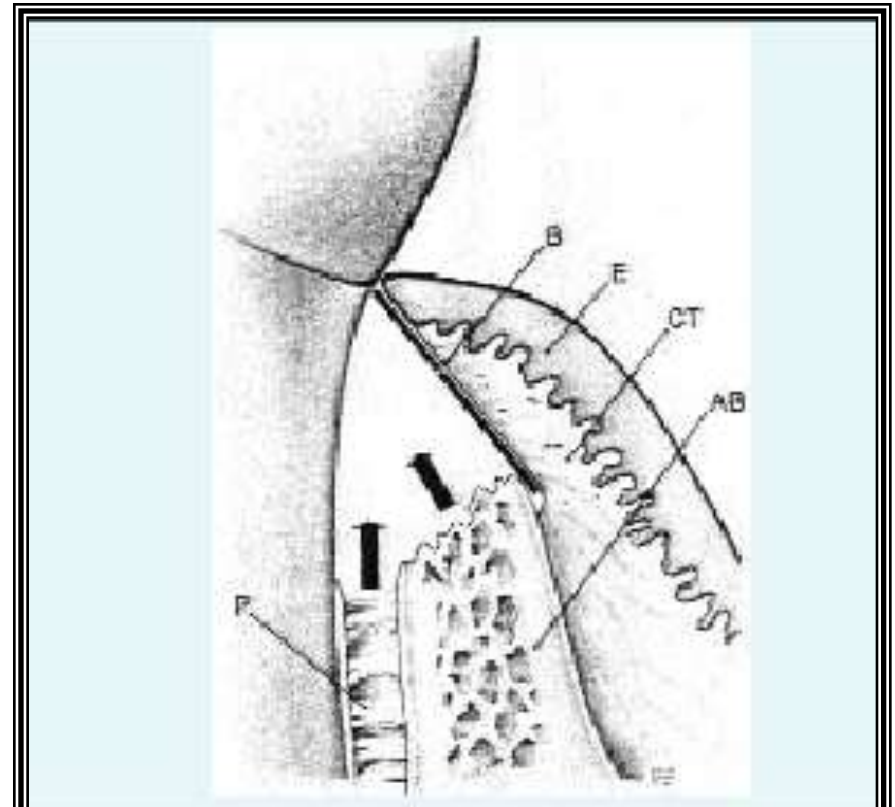
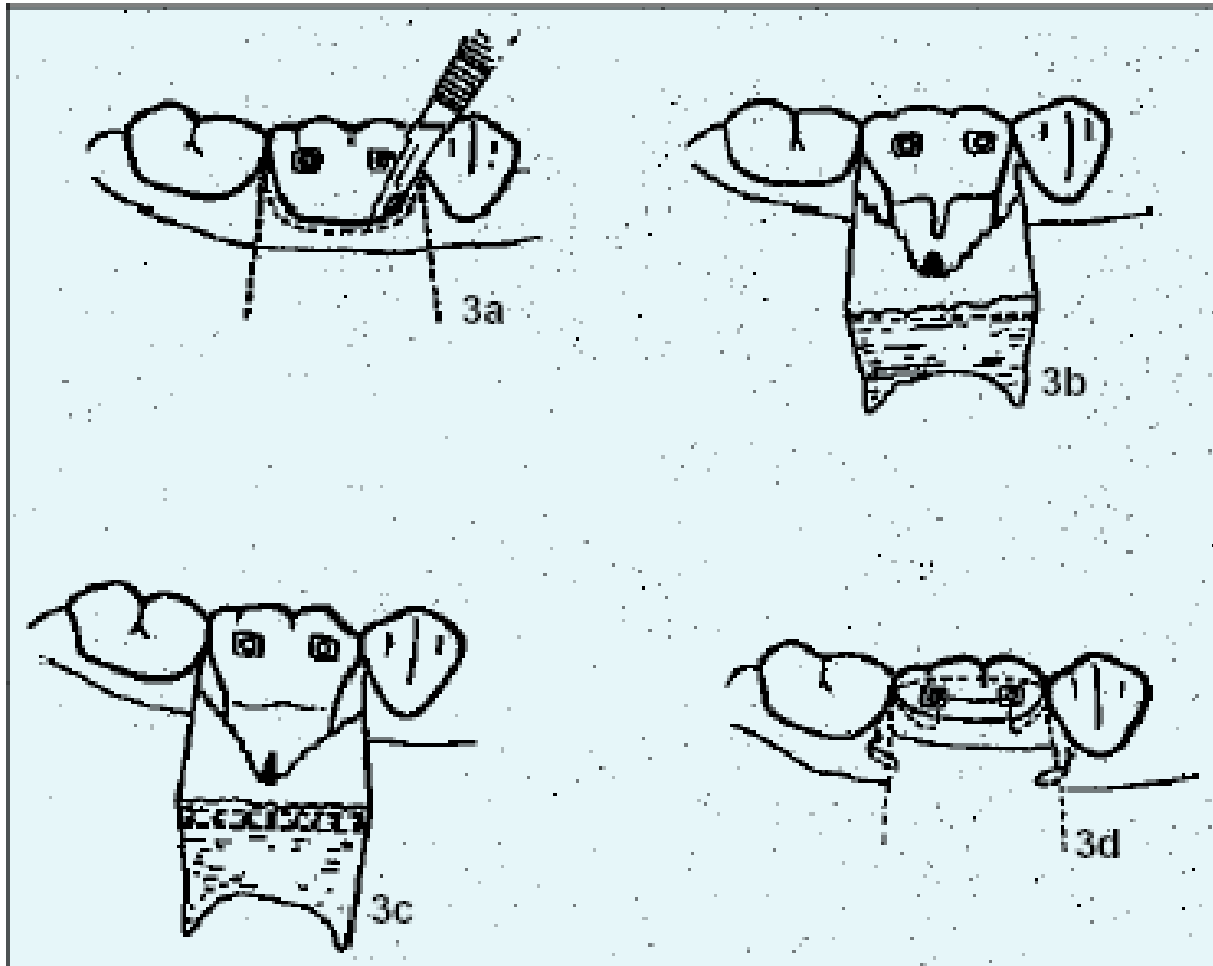


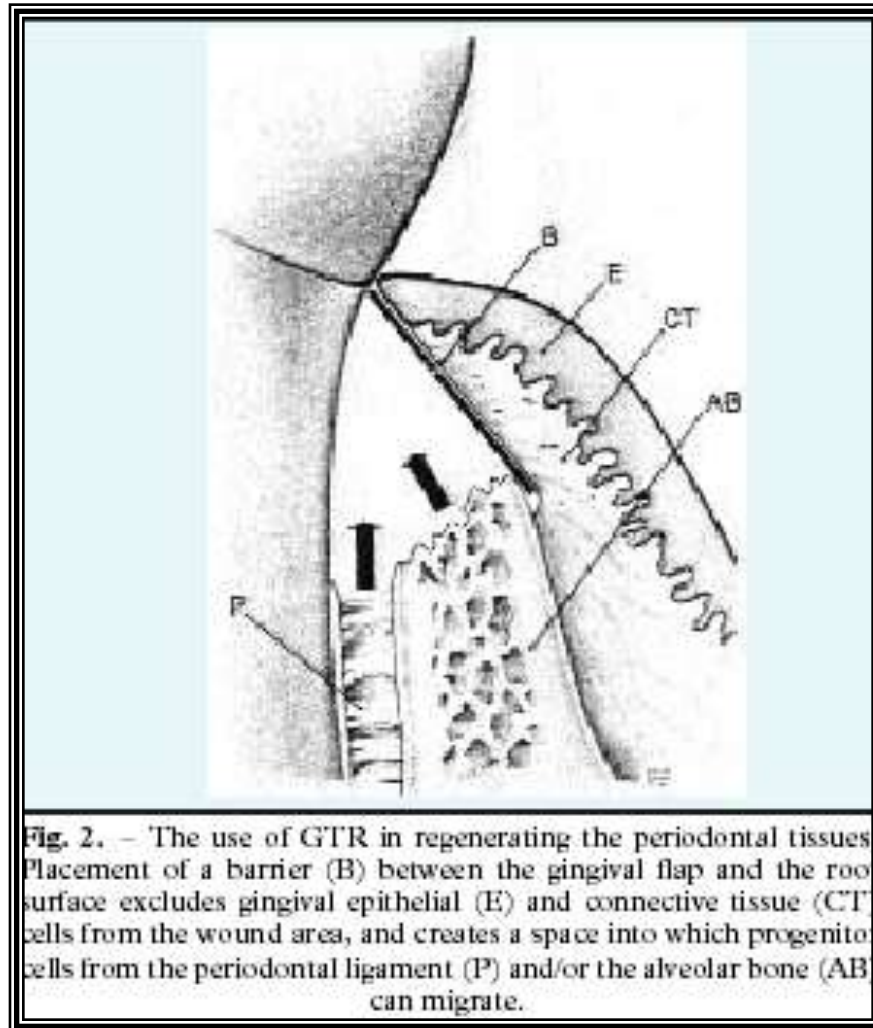
Fig. 2. - The use of GTR in regenerating the periodontal tissues. Placement of a barrier (B) between the gingival flap and the root surface excludes gingival epithelial (E) and connective tissue (CT) cells from the wound area, and creates a space into which progenitor cells from the periodontal ligament (P) and/or the alveolar bone (AB) can migrate.

# Posicionamiento coronal do retalho



**Resultados variáveis e falta de estabilidade a partir de 4 a 5 anos**

# Evolução da terapia regenerativa



**Fig. 2.** – The use of GTR in regenerating the periodontal tissues. Placement of a barrier (B) between the gingival flap and the root surface excludes gingival epithelial (E) and connective tissue (CT) cells from the wound area, and creates a space into which progenitor cells from the periodontal ligament (P) and/or the alveolar bone (AB) can migrate.



# Terapia combinada

**Consenso de 1994**

**RTG em combinação com enxertos ósseos no tratamento de defeitos de furca de classe II**

**Tratamento de varias categorías de defeitos de furca que incluem :**

**Defeitos de furca acessíveis**

**Defeitos de furca clase III seleccionados**

**Reseccion radicular combinada**

# Considerações básicas

**Tratamento não cirúrgico**

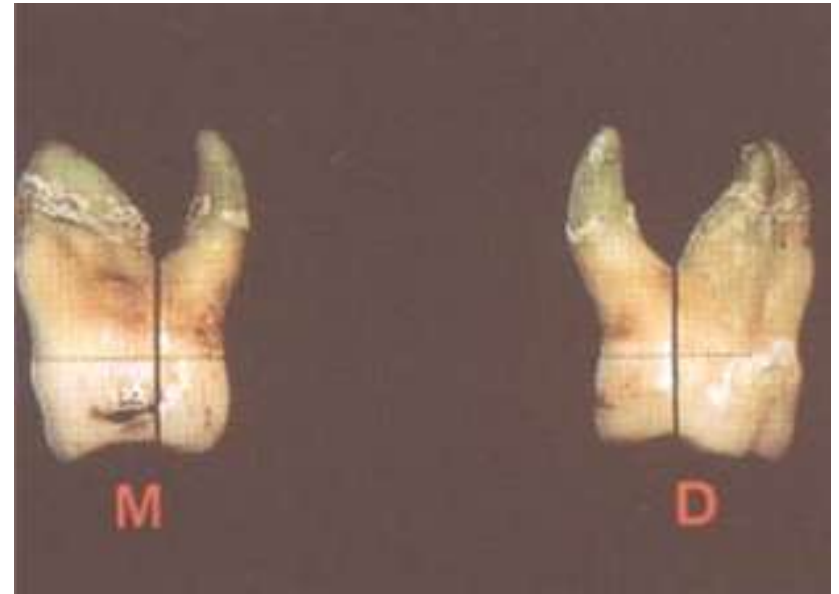
**Controle de placa .**

**R/A/R**

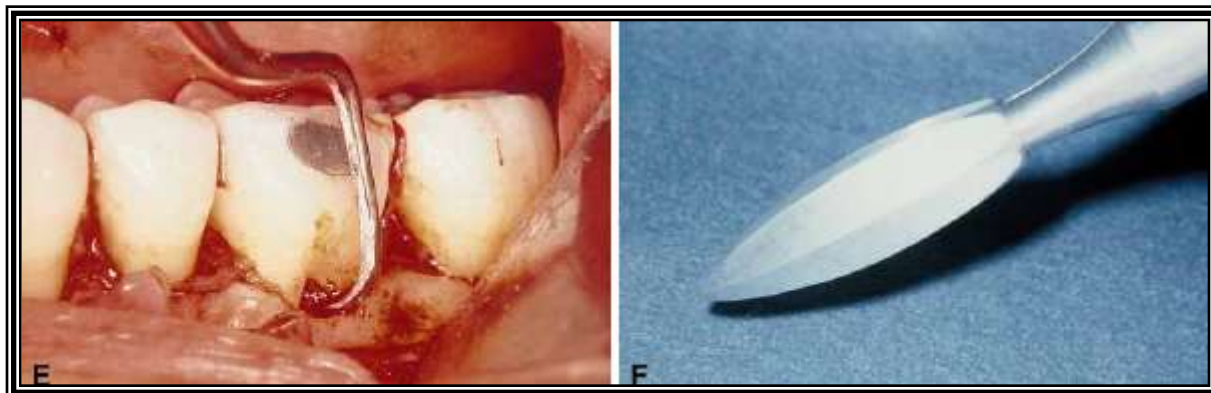
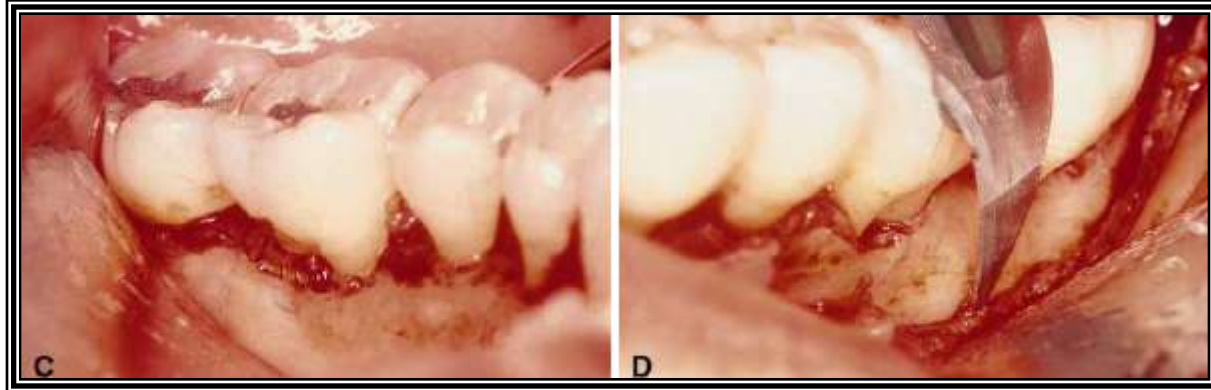
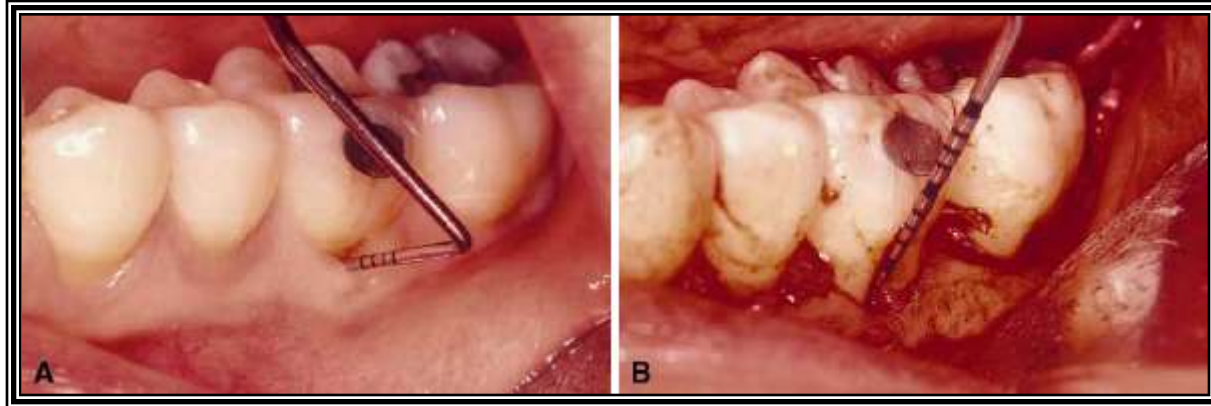
**Terapia oclusiva**

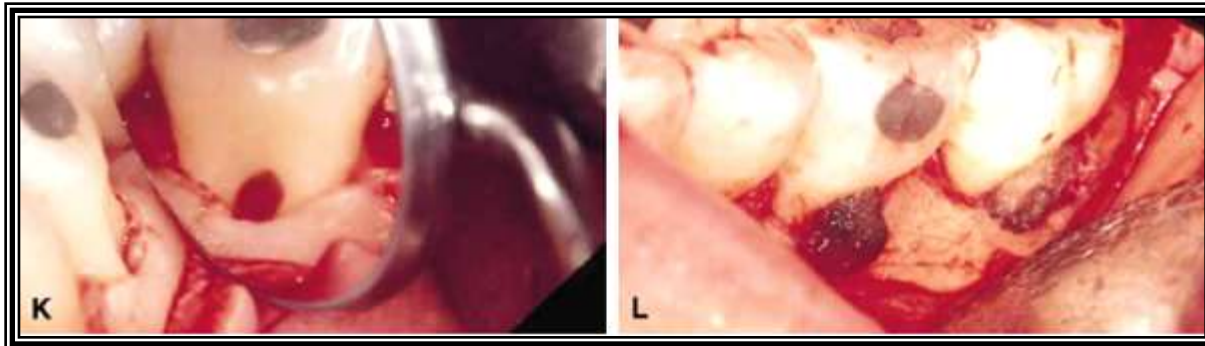
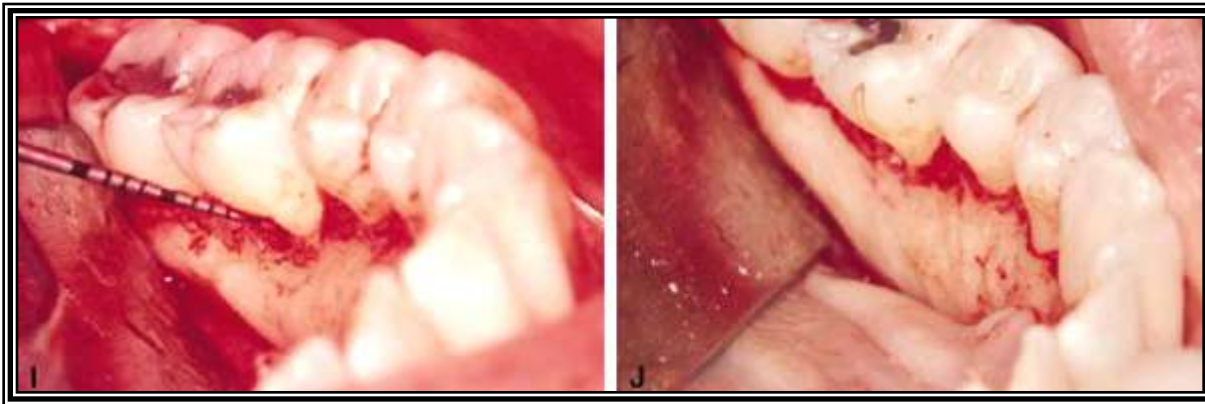
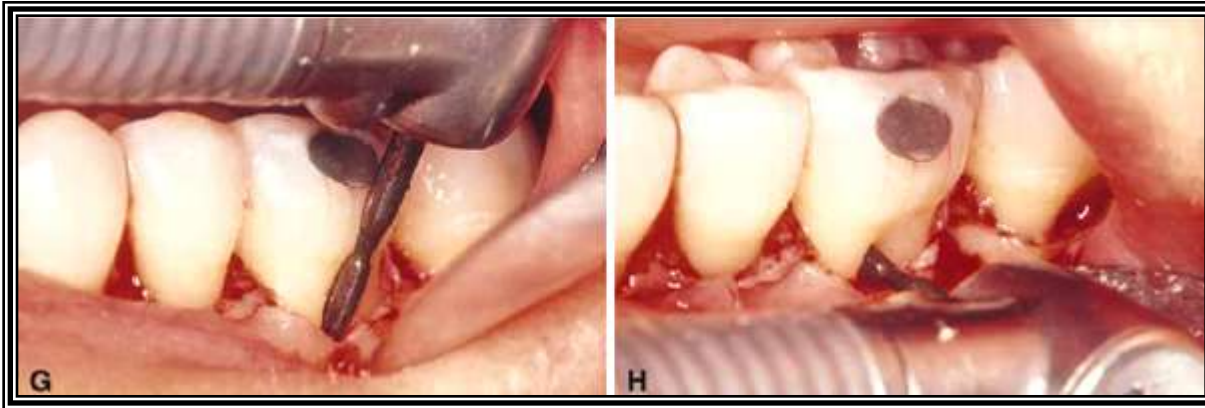
**Reavaliação PS NCI**

**Seleção da técnica**

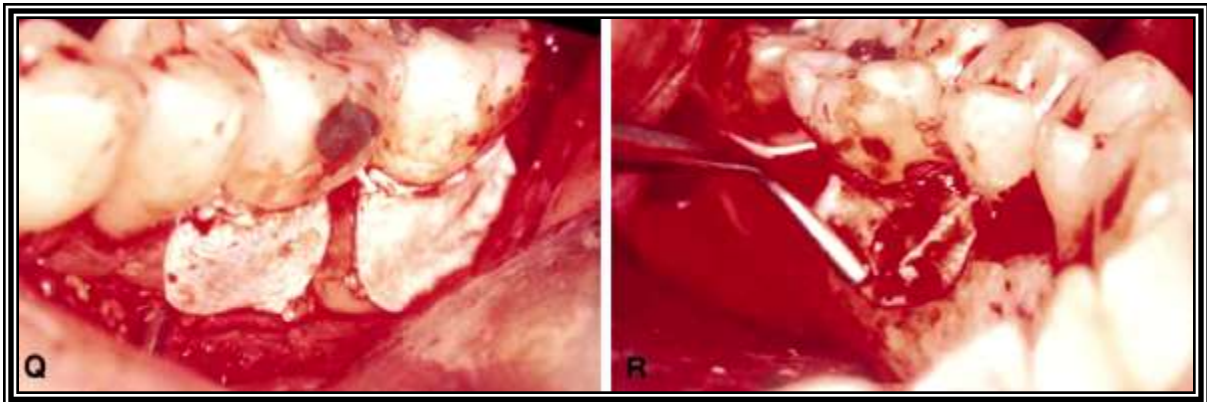
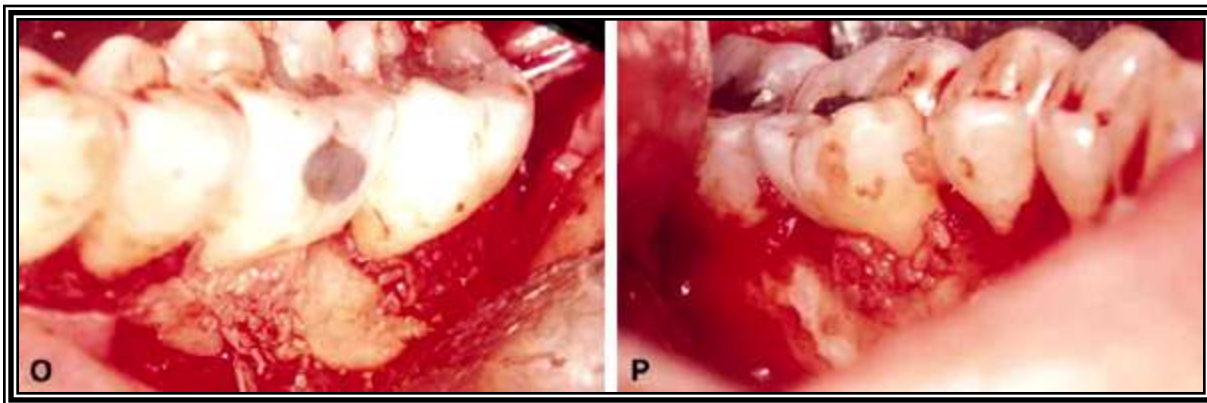
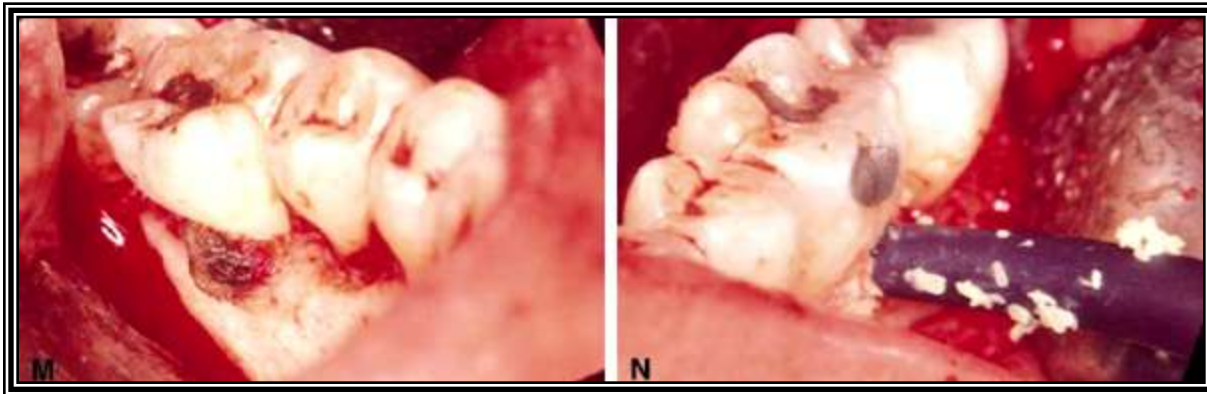


# CASO 1

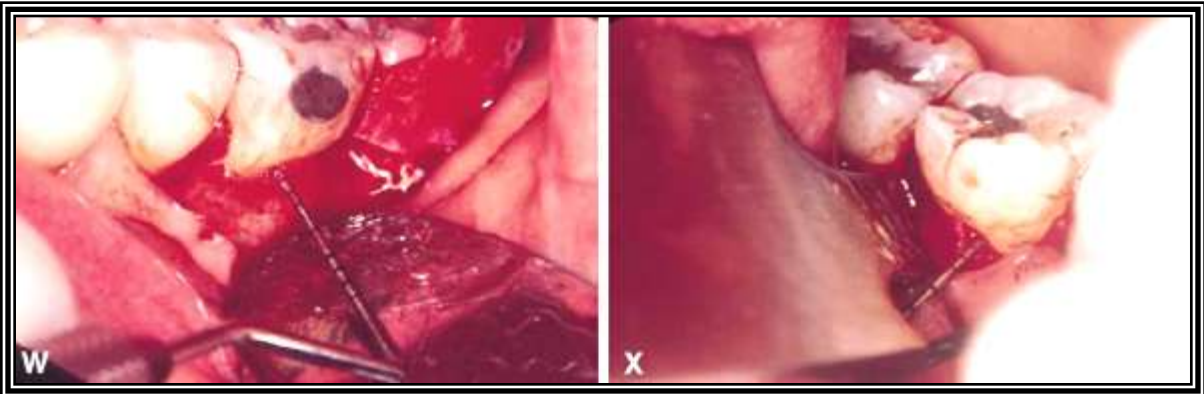


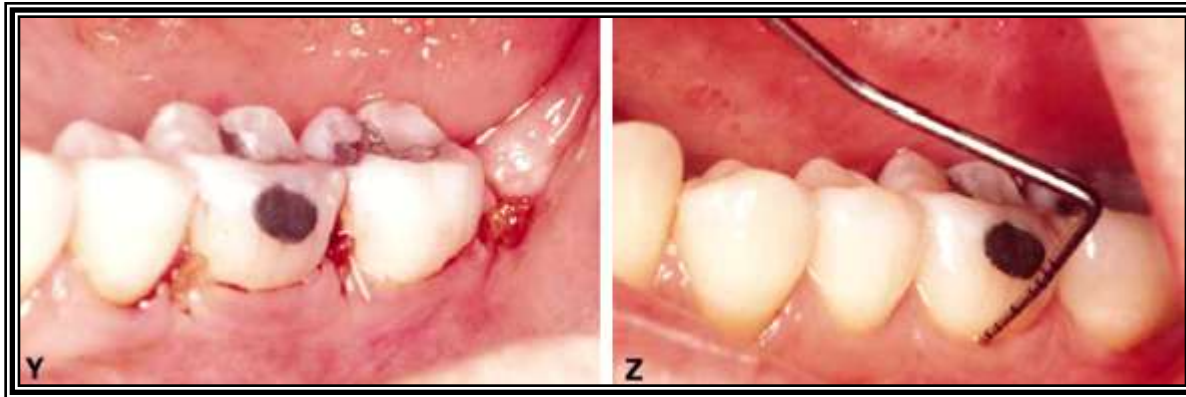




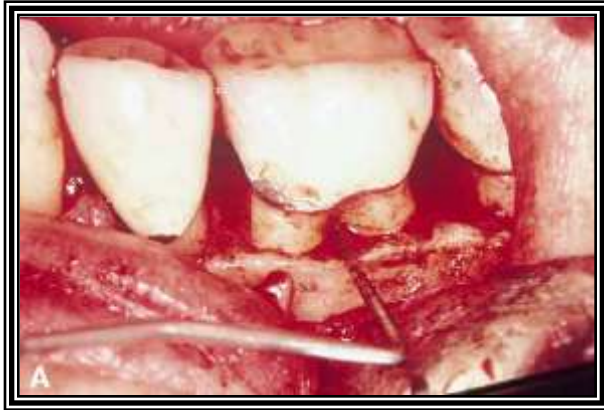








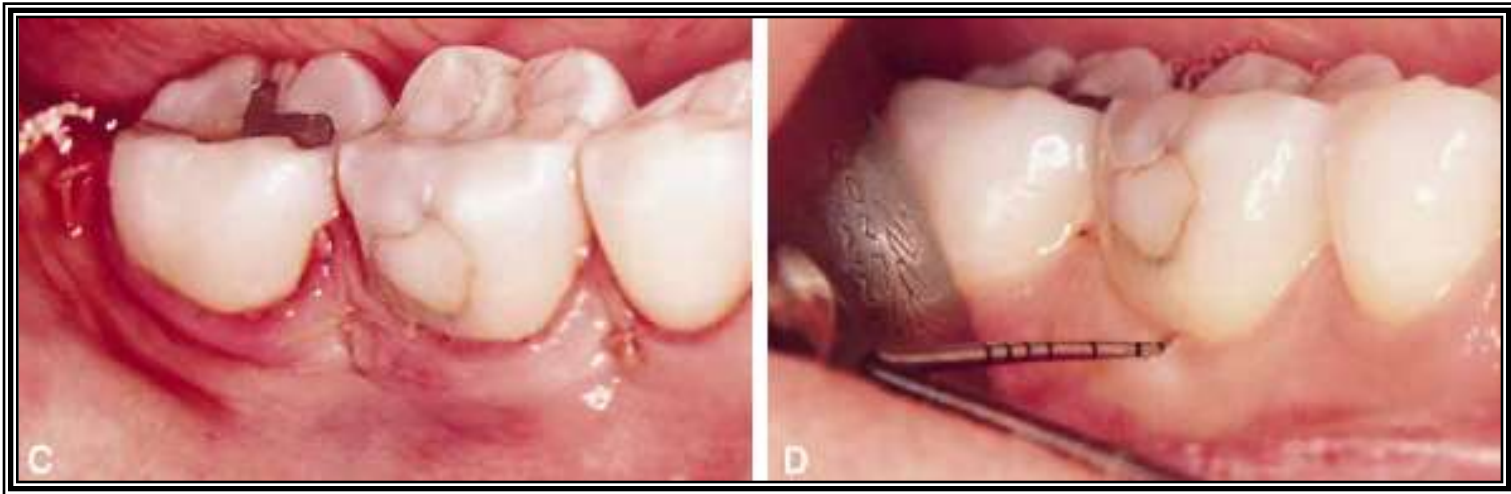
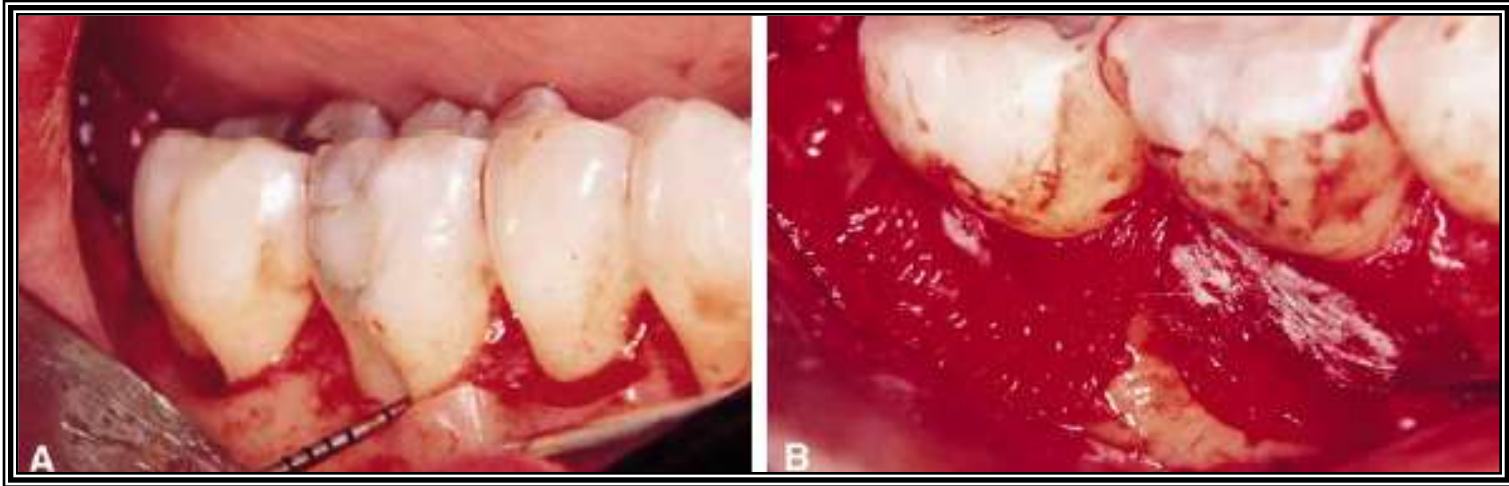
# CASO 2







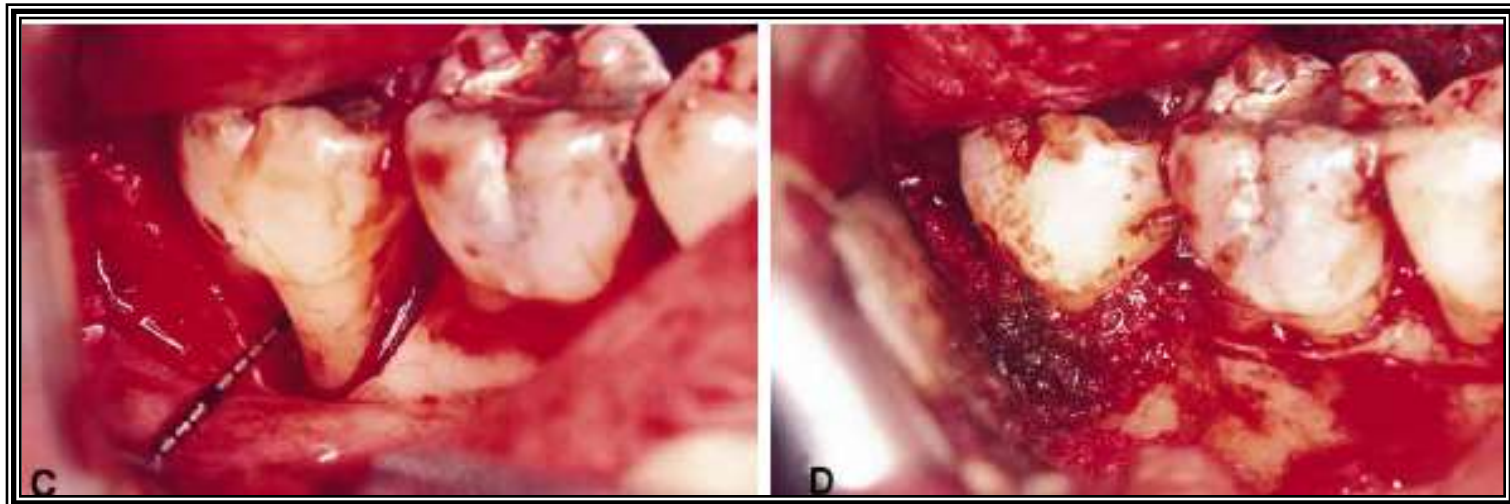
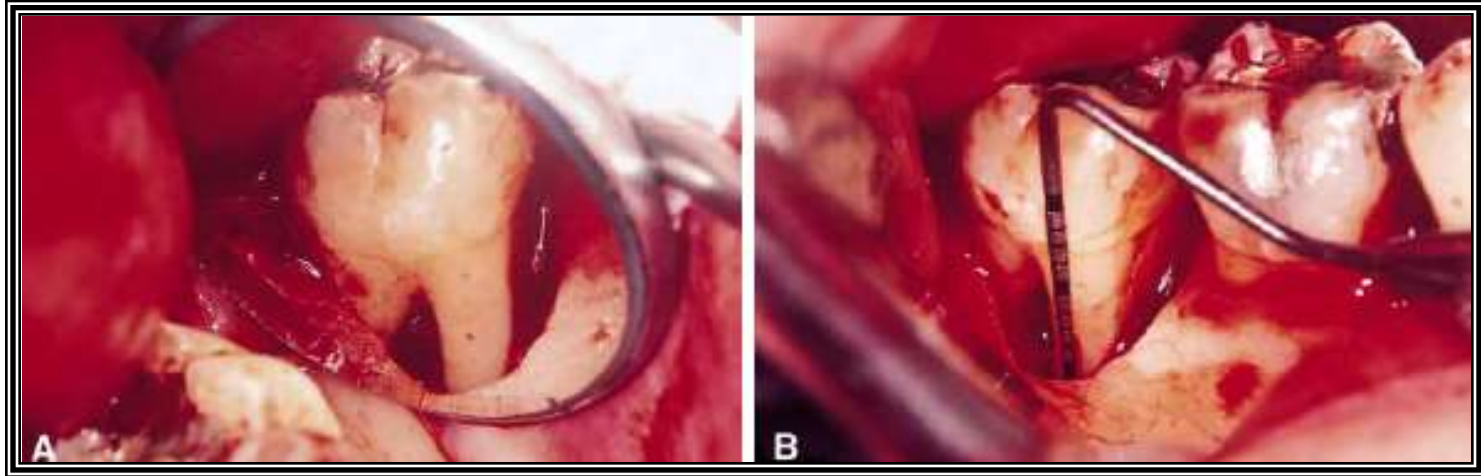
# CASO 3



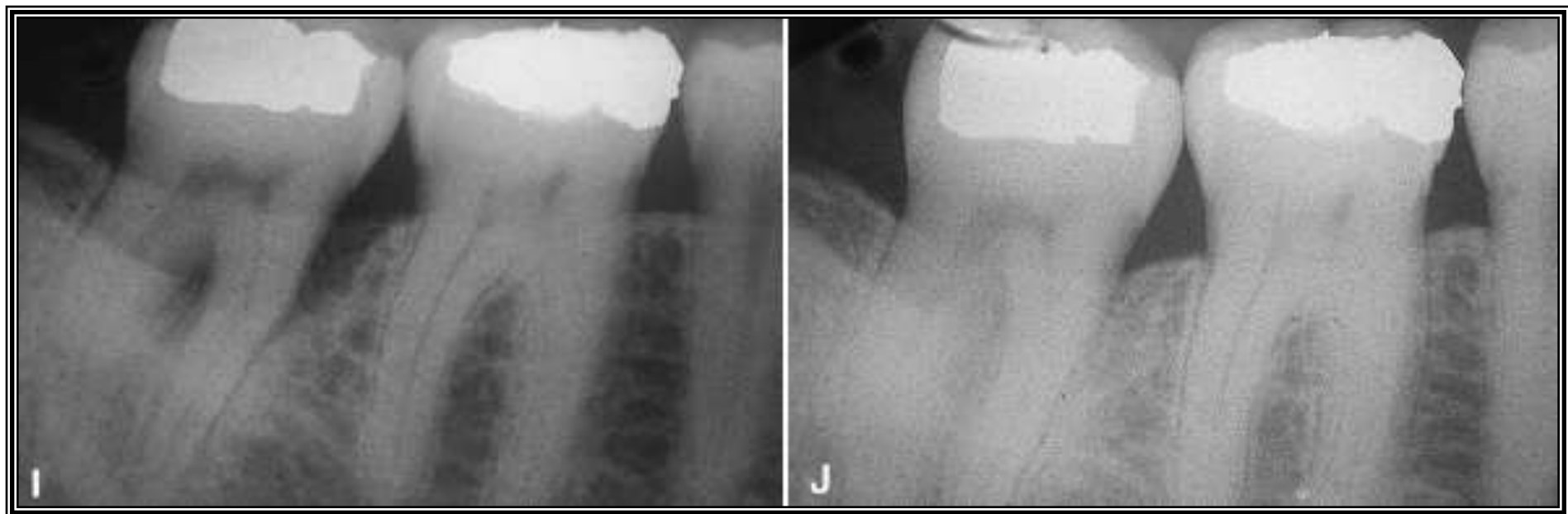




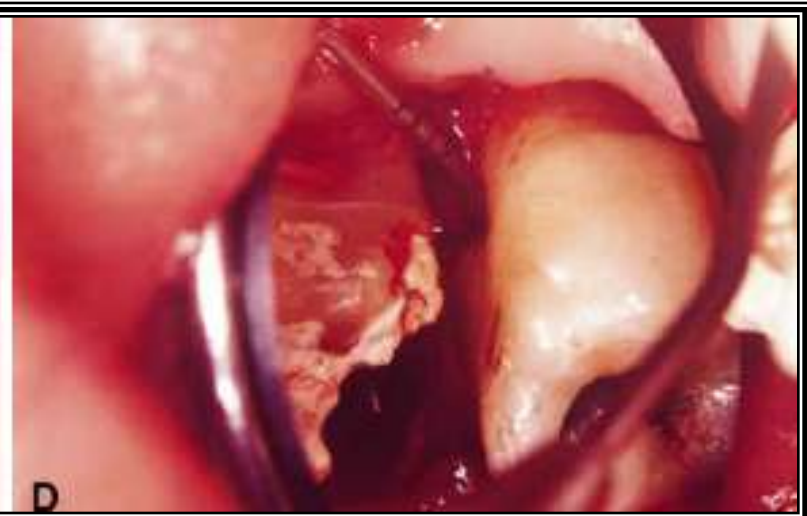
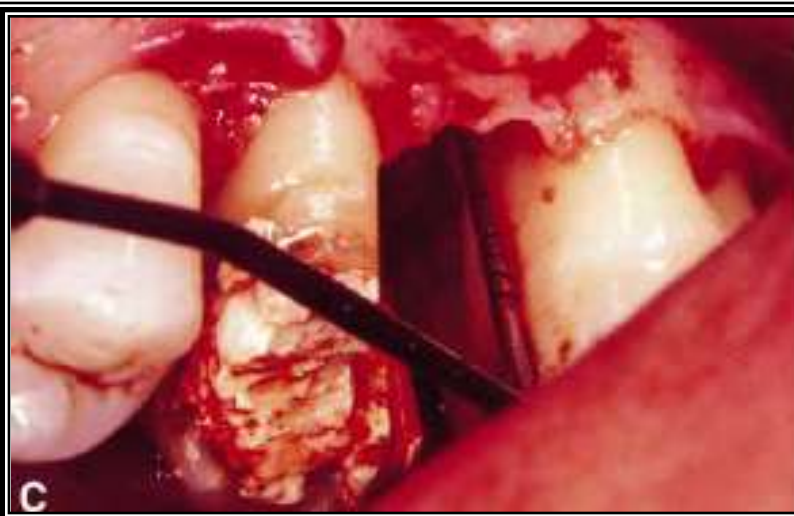
# CASO 4



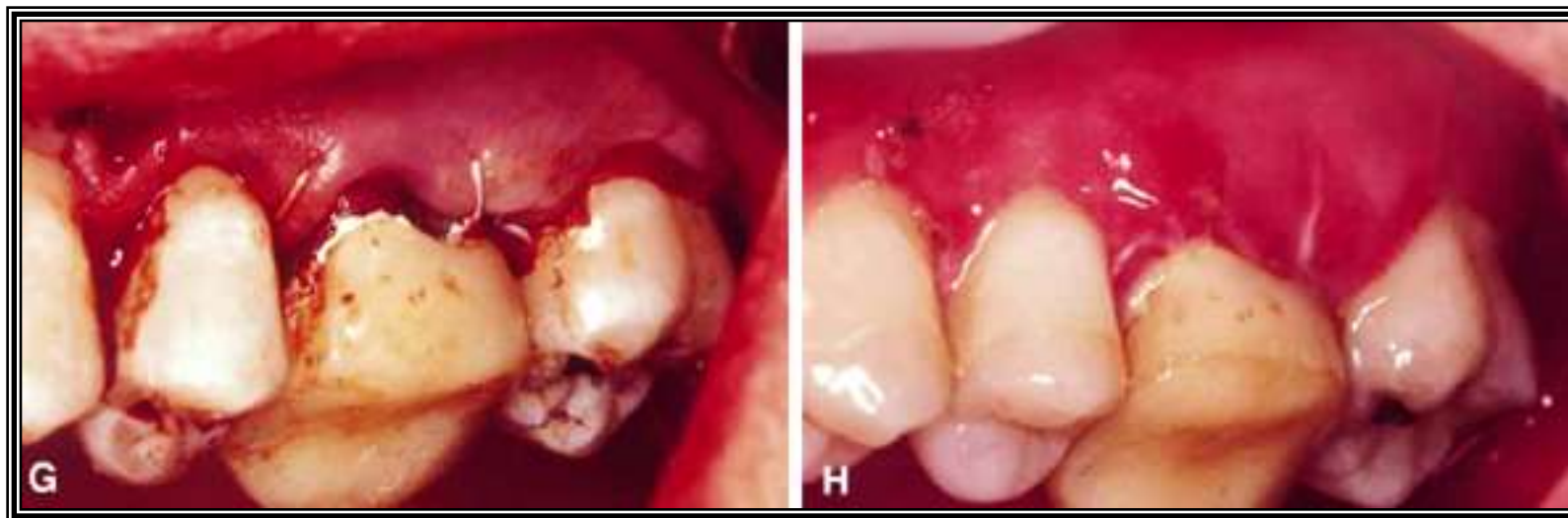
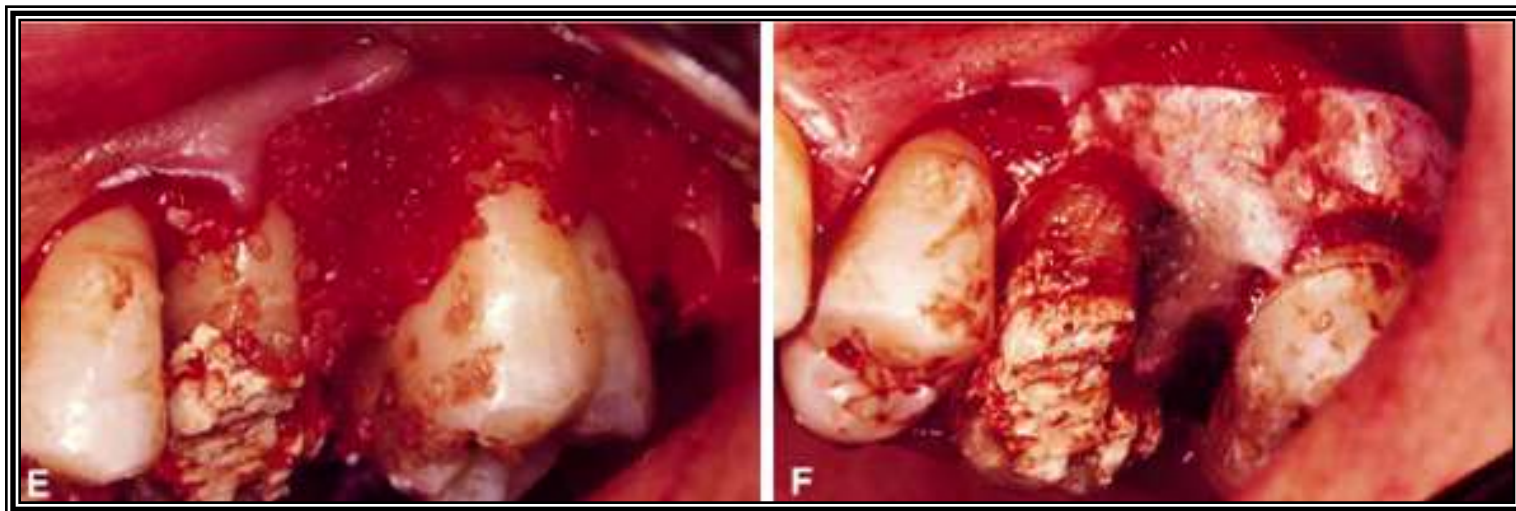


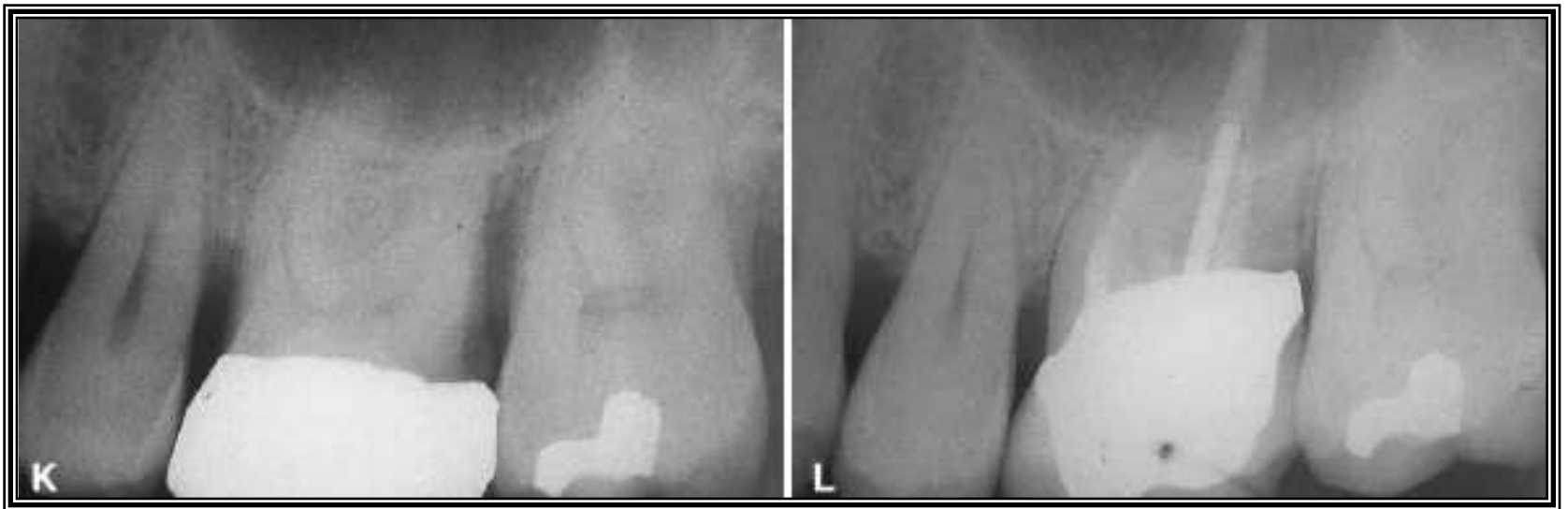


# CASO 5



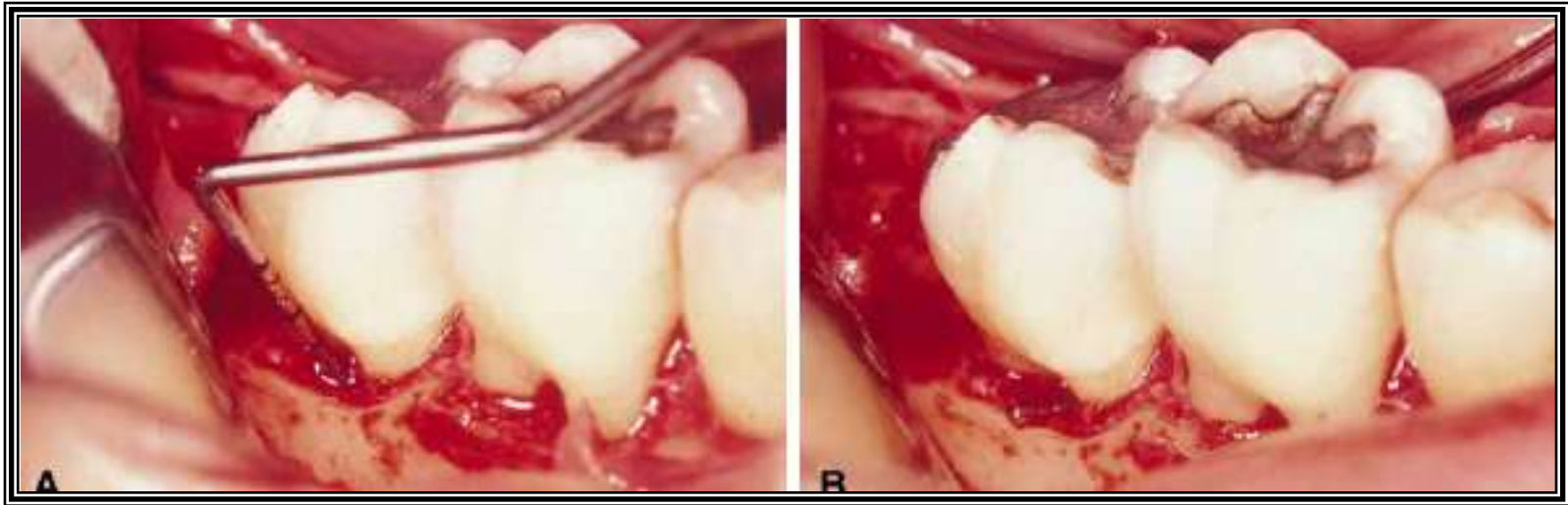


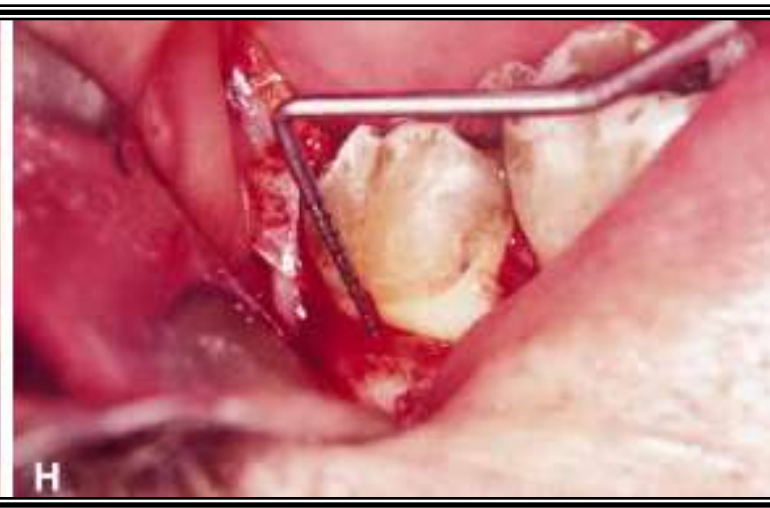






# CASO 6







# MUITO OBRIGADO

