Day 1: Friday, 29 June 2018

09:00–11:00
Invasive cervical resorption: A clinical approach
Dr Elisabetta Cotti

Invasive external cervical resorption is a dangerous form of invasive root resorption with an etiology that is still unclear, but often related to traumatic injuries of the teeth, ranging from mild to acute events. If not detected and treated, it may lead to tooth loss. This pathology is not easy to detect and define, and diagnosis requires a careful clinical examination, an evaluation of the history of the tooth and the use of advanced radiographic techniques. As far as treatment is concerned, the resorptive process should be interrupted. Root canal therapy may be required, and it should ensure good disinfection of the root canal system and optimal sealing of endodontic–periodontal pathways. Further treatment may require surgical intervention. Bioactive cements are useful in this treatment approach.

11:30–13:00
Guided endodontics: Possibilities and limitations
Dr Gergely Benyőcs

Guided endodontics could be a future tool for both specialists and general practitioners to carry out more conservative endodontic treatment in a feasible way. In this presentation, Dr Gergely Benyőcs will share his experience in guided endodontics, considering the most recent evidence in the literature. He will point out the possibilities and limitations of this procedure, illustrated by successful cases and failures.

14:00–16:00
Endodontists—The last best hope for natural tooth
Dr John Mounce

Day 2: Saturday, 30 June 2018

09:00–10:30
Root canal therapy or vital pulp therapy? Success determined by proper diagnosis
Dr Jenner Oscarly Argüeta Zepeda

When it comes to the prevention or management of periapical pathosis, the job of an endodontist involves more than just providing root canal therapy. The primary aim should be a first-step intervention focused on the treatment of the disease located in the pulp tissue, providing a proper environment to allow recovery of the damaged tissue.

The main goal of this lecture is to provide clinical and scientific information regarding the clinician’s decision between a conventional root canal therapy and giving the pulpal tissue the opportunity to survive, with subsequent multiple benefits for the patient.

At conclusion of the lecture, participants should be able to:

- list the clinical criteria for a reliable long-term prognosis for vital pulp therapy clinical cases;
- assess the biological mechanisms that current materials provide for pulp tissue recovery and reparative/reactive dentine bridge formation; and
- describe all factors to be considered in deciding whether a case is a good candidate for root canal therapy or a vital pulp therapy procedure.
11:00–13.00
Pain and infection management in a contemporary endodontic office
Dr Jorge Vera
This lecture is designed to address common problems in diagnosis encountered when dealing with patients presenting with symptoms mimicking odontogenic pain. Most of those patients have undergone multiple dental interventions, which have resulted in exacerbation of their symptoms rather than relief. Neurovascular orofacial, and neuropathic pain syndromes are some examples.

The second part of the lecture will deal with common anaesthetic problems and how to solve them, as well as a rationale for the use of analgesics and antibiotics in an endodontists office.

14:00–16:00
Improve your microscope skills to improve outcomes
Dr Carlos Aznar Portoles
The dental operating microscope is widely used in endodontics, but not always in the most effective manner. In this lecture, Dr Carlos Aznar Portoles will describe how the endodontist and his or her team can use the microscope most efficiently. He will provide guidance on how the clinician can improve his or her microscope skills and will describe common mistakes and how they negatively affect the workflow. He will describe how proper use of the microscope can improve clinical results, reduce stress, and help avoid neck and back pain, which is common among dental practitioners.

16:30–18.00
The role of bioceramics in clinical endodontics
Dr Josette Camilleri
Bioceramics are a new range of endodontic materials. These materials have a specific chemistry and microstructure. They are based on tricalcium silicate and contain additives to enhance the material properties in clinical use. It is important that a clinician be able to differentiate between the various material types and appreciate that the material’s composition plays a role in its performance clinically.

Day 3: Sunday, 1 July 2018

09:00–10:30
Reliable adhesive post-endodontic restoration in the hands of the endodontist
Dr Daniel Černý
For a long time, endodontists have been sending patients back to their referring dentists even though the root canal system was only temporarily closed, consequently facing a risk of reinfection of the previously disinfected root canal system. In his practice, lecturer Dr Daniel Černý identified this concern over ten years ago and this led to redefining the roles within his team. Since 2006, endodontic treatment is not completed without creating an adhesive seal through a buildup of granular dual-cure composite and fiber-reinforced composite posts. Based on approximately 5,500 completed cases and long-term data, Černý will demonstrate clear and precise workflow protocols with fewer complications and tips on how to avoid critical mistakes, in this lecture.

11:00–13:00
Improving retreatment outcomes
Dr Mario Zuolo
This lecture will focus on clinical protocols and new technologies for the management of teeth indicated for gutta-percha retreatment. Key points for canal location and removal of obturation material from the root canal and apical repreparation will be discussed in introducing more adequate and predictable treatment protocols that can be applied in everyday clinical practice. Several cases will be described and analysed step by step in order to demonstrate selection of the best retreatment protocol to preserve the teeth. The prognoses will be illustrated with clinical cases and contemporary literature.

14:00–17:00
The Art of Endodontics
Dr Stephen Buchanan