

## Questions

If you have any other questions that have not been answered by this leaflet, please make sure that you contact your doctor.

## Contact details

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**Telephone:** Lister Department, Stevenage ☎ 01438 284060  
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Monday to Thursday, 8.30am - 5pm  
and Friday, 8.30am - 1pm.

Out of these working hours please contact:  
Luton and Dunstable Hospital out of hours service ☎ **01582 491166**  
and **ask for the maxillofacial doctor on call.**

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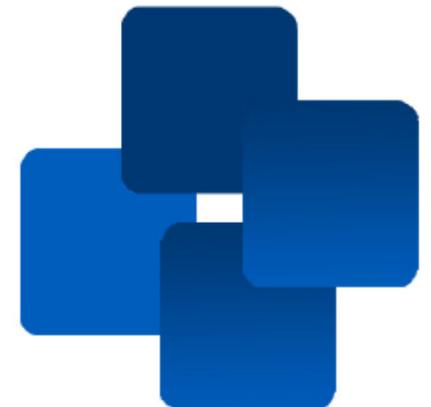
[www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)

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## Patient Information

### Apicectomy

Oral and Maxillofacial  
Department



The purpose of this leaflet is to help you understand what an apicectomy is, and the benefits and risks of this procedure.

## What is an apicectomy?

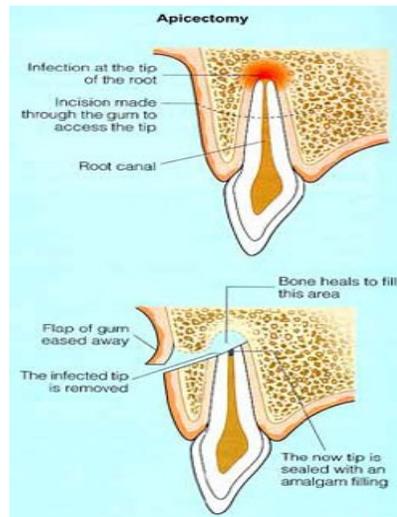
This procedure is performed to eliminate infection in the root of a tooth. It involves lifting a flap of gum and removing a window of bone over the root tip of the tooth. About 3mm of the root tip is removed and the infection is scooped out until the bone area is clean.

A small hole is prepared in the newly cut root surface for a retrograde root filling (RRF). The surgeon will then put a special filling material (amalgam) containing calcium into this hole aiming to seal the root tip of the tooth. This will hopefully prevent the effects of the bacteria from creating further infections.

This is not always 100% successful due to the presence of other minor canals stemming from the main canal. The other complicating factor is that the teeth requiring the surgery may have more than one canal and for the treatment to be successful all the canals need to be adequately sealed.

## What are the reasons for having an apicectomy?

- If the root canal anatomy is not amenable by conventional endodontic treatment.
- If there is a blockage in the canal which cannot be removed and prevents access to the whole of the root canal system
- If there is a suspected root fracture or re-absorption or other pathology requiring direct inspection.
- If root filling has been extruded through the tip of the tooth into the bone which is causing signs and symptoms of irregularities.



## What are the success rates of an apicectomy?

The success rate for apical surgery is known to be related to the quality of the root canal treatment for that tooth. Generally the success rate for incisor and canine teeth is between 60 and 80%. On a pre-molar or molar tooth it is about 35%.

## What are the risks of an apicectomy?

- It may not be successful.
- The gum around the tooth involved and on the teeth on either side of the affected tooth may shrink.
- The roots of neighbouring teeth that are close by may be damaged during the surgical procedure.
- In lower posterior teeth the nerve which supplies your lower lip is at risk of either temporary or permanent damage as a result of the surgery. Generally, if this is very close to the tip of the tooth the surgeon will advise you against having this type of treatment.
- In posterior upper teeth the sinus, which lies above the roots, may become involved and if this becomes infected you may develop sinusitis.
- Sometimes the wound can break down leaving you with a small hole leading into the bony window (the small hole made using a dental drill during your surgery to access the root tip). Generally these heal up on their own but further surgery may be required.

## Can a post crown on the offending tooth be removed?

Yes, providing its removal would not carry a high risk of damaging the tooth.

## Are there any alternatives to apicectomy?

Yes. Generally, it is possible for root canal treatment to be done by your dentist, or an endodontic specialist, as an alternative to apical surgery. This has a higher success rate (greater than 85%) and results in a well condensed root filling of the entire canal system of that tooth.