Case Report

Replantation: Delayed After Avulsion - A Case Report

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Abstract
Avulsion is the most unfortunate condition for both dentist and the patient. Replantation is the treatment of choice for most of the cases. Well prognosis depends on the extra-oral dry time as in this case report it was more than 48 hours. Radiographic follow up is reported over a period of 12 months following avulsion of tooth # 11 which shows no signs of replacement resorption till date. Rendered long term prognosis was expected as majority of cases reported earlier delayed replantation show early signs of resorption but it was a fortunate outcome as no evident replacement resorption was noticed till date in this particular case. The avulsed tooth maintained function and esthetics satisfactorily and the young adult was quite happy with the treatment outcome.

Key Words
Avulsion, Replantation, Delayed Resorption

Introduction
Avulsion of teeth is defined as total displacement of the tooth out of its socket. Incidence of avulsion constitutes 0.5 to 16 % of all traumatic injuries in the permanent dentition[1]. Avulsion is more commonly seen in children and young adults, at an age when the alveolar bone is resilient and provides only minimal resistance to extrusive forces. The maxillary central incisors are the teeth most commonly affected[2]. Prolonged extra oral storage of an avulsed tooth before replantation will lead to total necrosis of periodontal ligament. Replantation of a tooth beyond 5 minutes has been defined by Andreasen[3] as delayed Replantation. This can lead to complications like inflammatory resorption and replacement resorption[4]. The reported clinical success rate of delayed replanted avulsed teeth has been low. One of the causes for this poor rate is the lack of recognition that avulsed teeth are presented in the dental office under different conditions that require different treatments. There are two main reasons for delayed replantation of avulsed teeth. People present at the site of injury are usually lay persons who rarely know how to manage an avulsed tooth[5]. Avulsion injuries are associated with soft tissue laceration and bleeding. The extent and time elapsed after injury is an important criterion to be considered before predicting the prognosis of injury following trauma. Avulsed teeth with non-vital periodontal ligament can be replanted and will remain functional for several years[6]. This article describes the management of avulsed maxillary central incisors of a young adult after an extra-oral dry time of more than 48 hours.

Case Report
An 11 years old male patient reported to the OPD of Department of Pedodontics and Preventive Dentistry, JCD Dental College, Sirsa with a history of trauma following fall from a swing in playground during school. The patient was carrying an avulsed tooth which was unfortunately stored dry in a piece of paper for almost more than 48 hours. The patient was apparently normal and conscious after injury. The intraoral examination revealed fair oral hygiene and avulsed