

Do I Really Need a Root Canal?

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A root canal? Sounds painful...for sure, expensive
What's it really all about?

Several thousand people have asked Oramedics about the need for this type of dental treatment. It's an honest question, so let's see what an honest answer looks like.

First...please...a little background. Teeth are "tough" on the outside, but inside they have a soft core called a nerve chamber. This inner core is made up of nerve tissue and blood vessels that feed the nerve.

Serious irritation of the nerve can be caused by deep decay; or perhaps having a deep filling as a result of that decay, or an injury to the tooth.

If a nerve degenerates completely the tissues die and gangrene develops. The nerve chamber may also become infected in some cases.

This condition...a devital (dead) nerve...usually leads eventually to infection with its resulting pain and swelling. We must be very careful to point out here, however, that just because pain and swelling occur does not necessarily mean a root canal is required.

Literally millions of root canals have been done when in reality there was no need for this procedure. This is because the dental profession frequently misconstrues gum tissue abscesses as being nerve abscesses. Gum tissue infection can be healed and solve the problem without having a root canal .

The biggest problem here stems from the dental profession's over-zealousness in prescribing root canals .

There is obviously some economic pressure behind this zeal: Dentists' motive in prescribing the root canal is certainly at least in part because they are expensive.

On the other hand, a gum abscess can generally be cleared up either by cleaning out the space where the infection exists – which the patient, in most cases, can do for himself if told how – or, in more serious cases, by judicious use of an antibiotic. Either way it is far less expensive, more simple and probably better for natural long-run health than the root canal alternative.

How do you differentiate between a gum abscess and a nerve abscess?

Well, it simply isn't always so easy to do, but if in doubt, try the easier self-help method first. This method uses an irrigating device, called a Water Tip, to flush out the infection. The device fits on any Water Pik® unit.

To know if you are getting good results, watch the symptoms. If the pain and swelling begin to go away, quite likely you are hitting at the root of the problem.

If symptoms persist, it may be that professional care is necessary.

Either way, your mouth will undoubtedly benefit from the added cleaning. (Be sure to do a lot of rinsing with warm, almost hot, salt water solution .)

Before you submit yourself for a root canal, make sure that you really need it

You can tell a lot about this yourself. For example, if a tooth has recently darkened in color in comparison to adjacent teeth, this is usually an indication that nerve damage has occurred.

If the tooth is sensitive to heat but relieved by cold – if hotter liquid, for example, makes it hurt and colder liquid seems to ease or eliminate the pain – this generally points to nerve damage, but not always.

Similarly, if the tooth is sensitive to pressure (as in pushing it toward the jawbone with a fingertip,) this is another indicator of possible nerve damage...but again, it's not conclusive.

Following a period of extra-careful cleaning with a soft toothbrush and lots of salt water... and, if at all possible, use of the special Water Tip and your Water Pik® – if the symptoms persist and both above tests indicate "trouble" you may need to see a dentist.

Before anything is done, insist on a thorough diagnosis of the situation. If a dentist has been consulted to help determine the need for a root canal, be sure the following steps are taken:

1. Careful visual exam of the teeth (looking for color change).
2. Checking for temperature sensitivity (hot/cold).

Note: A more thorough discussion of this whole matter can be *found in the book How To Become Dentally Self-Sufficient*.*

3. Observing any additional sensitivity to pressure; either from biting, tapping or pushing on the suspect tooth.
4. Carefully x-raying the area(s) in question. Don't allow the dentist to prescribe a root canal only from x-ray diagnosis, because they are often nonconclusive in this regard. Many teeth that "showed need" on x-ray, for root canal treatment, subsequently healed without it.
5. The tooth should be checked with an electronic nerve tester: A simple device that measures the nerve's ability to react to a mild electrical stimulus.

STOP

If your dentist has not checked the nerve in this way ... and is recommending a root canal... it would be best for you to discuss this with the dentist. If he does not readily offer to do the test, do not under any circumstances permit the start of root canal treatment

Because, once treatment begins you are totally committed: You cannot change your mind and "back out" halfway through the treatment.

If all five methods of checking all heavily indicate the need for a root canal you can be about 99% sure it's necessary.

If any one or two of the indicators are not conclusive it's generally best to wait for a while. In many cases the situation will "settle down" and resolve itself.

One further note: Many dentists, notably oral surgeons, recommend a surgical approach where they cut into the jawbone to remove the abscess. This is almost never indicated.

**This soft cover book, or a digital version of it may be ordered from www.RobertNara.com. This may be the best dental investment you'll ever make.*