

## 2. ACUTE DIFFUSE PULPITIS. ETIOLOGY AND TREATMENT METHODS



**Author:** Cernopischi Artiom

**Scientific advisor:** Chetrus Viorica, MD, Associate Professor, Sofia Sîrbu Department of Odontology, Periodontology and Oral Pathology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction. Dental pulp inflammation (pulpitis) represents the most commonly encountered emergency in dentistry, characterized by severe pain, and it occupies one of the first places in dental conditions, with a major risk towards periodontal complications leading to tooth loss. Acute diffuse pulpitis evolves rapidly and often in an intense manner, characterized by extensive inflammation of the dental pulp. This condition can be triggered by a variety of factors, including deep cavities, dental injuries, bacterial infiltrations, or other forms of pulp irritation. Clinical experience has shown that the microorganisms causing tooth decay are the most common etiological factor in the disease of the pulp tissue. Therefore, the medical approach in choosing appropriate treatment methods, as well as their subsequent practical implementation, represents essential steps in the correct management of acute diffuse pulpitis.

**Aim of study.** The examination of etiological factors that contribute to the onset of acute diffuse pulpitis and the identification of treatment methods to prevent complications.

**Methods and materials.** In this study, 13 patients diagnosed with acute diffuse pulpitis, aged between 18 and 45 years, including 7 women and 6 men, were included in the analysis and treatment. The patients were evaluated through clinical examinations, based on which a comprehensive diagnosis and treatment plan were formulated. Thus, 9 patients were treated by the vital extirpation method and 4 patients by the non-vital extirpation method, with the use of paraformaldehyde-based mummifying paste.

**Results.** After the treatment, favorable results were obtained in 13 patients, of which one patient treated with the non-vital extirpation method did not show up on time and experienced complications. Therefore, the vital method is better to use because it can be performed in a single session.

**Conclusion.** In the practical applications, we concluded that treating acute diffuse pulpitis through vital extirpation and three-dimensional sealing of the root canals yields high-performance results and minimizes post-treatment complications.

**Keywords**. Acute diffuse pulpitis, treatment, vital extirpation, non-vital extirpation.