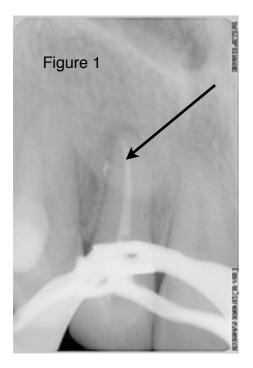
The significance of lateral canals re-visited



To the best of my knowledge the true significance of lateral canals in endodontics has not been established. It is true that an endodontist derives satisfaction from filling these canals (Figure 1), but is it really clinically significant? In the case shown in Figure 1 the infection is centered around the peri-apical area, not around the lateral canal so picturesquely filled. It remains to be seen whether the periapical lesion will heal.



In Figure 2 an immediate postoperative radiograph after root canal treatment clearly shows a periradicular radiolucent lesion, most probably centered around the portal of exit of a lateral canal, which had **not** been filled.



A two year post-operative radiograph, Figure 3, shows complete healing of the peri-radicular area, despite the lateral canal never having been filled.

Figure 4 shows the pre-operative view of a failed root canal treatment in a teenager. Note the large radiolucency on the mesial aspect of the central incisor.

Figure 4



The root canal was re-treated and the final radiograph (Figure 5) showed the filling of the lateral canal.



Figure 5

A five year post-operative view (Figure 6) showed excellent healing, in direct contact with the extruded root canal filling material. In this case it is clear that the pathological lesion had healed in spite of the extruded material, and perhaps even as a direct result of the extruded material.

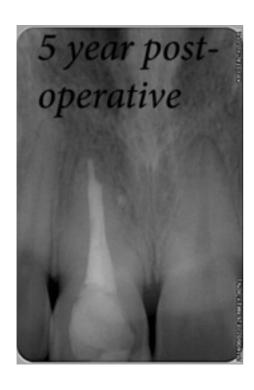


Figure 6

These three cases beg the question of how important it is to fill lateral canals? Filling lateral canals is an art form, at best, an obsession with some. It is neither a scientific, predictable, technique nor a prerequisite for success. One can simply never know whether one had filled all lateral canals.

Perhaps it is nothing more than an amusing side effect of good root canal treatment.