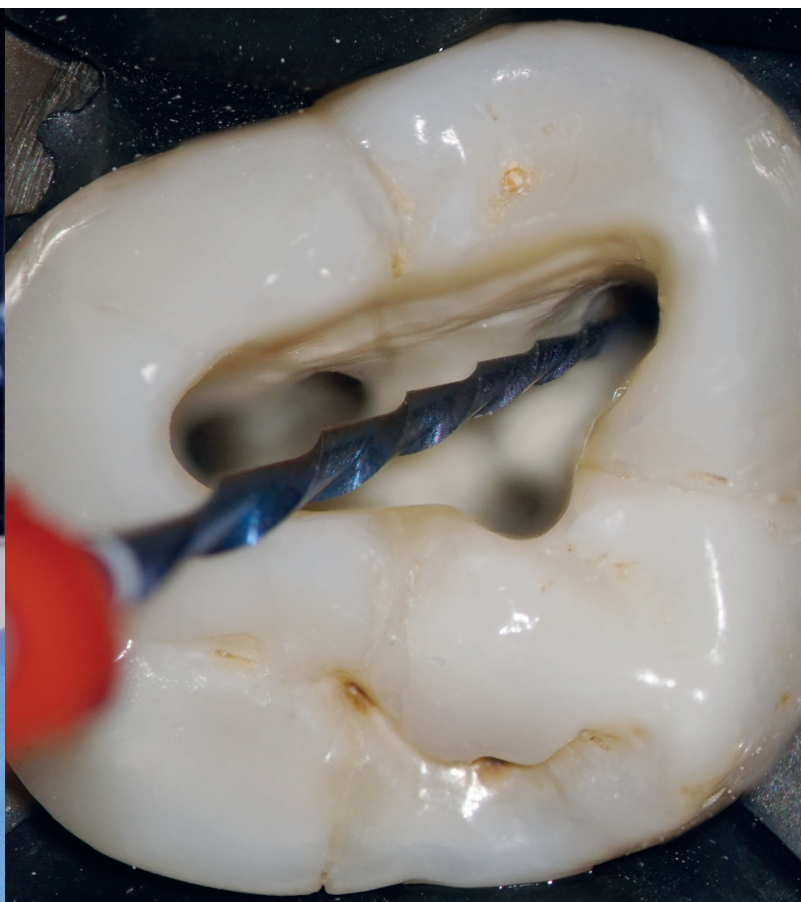


Personal experiences of RECIPROC® *blue* in endodontic practice—from Romania

Marc Chalupsky, DTI



Dr. Sergiu Nicola One of the worst things that can happen during a root canal procedure is an instrument breaking. The curvature of particular root canals makes using stiff endodontic files impossible and creates unwanted complications. With its newly released line of RECIPROC® *blue* files, VDW has made a breakthrough in endodontics. Owing to a revolutionary production process, RECIPROC® *blue* files are more flexible and less fracture-prone than any other files.

Dental Tribune spoke with Dr. Sergiu Nicola, a leading endodontist based in Bucharest in Romania, about his experiences with using the RECIPROC® *blue* file.

Dr. Nicola, you run an established practice specialized in endodontics in Bucharest. Could you

please introduce yourself and tell us more about your daily cases?

I graduated from the Faculty of Dentistry of the Carol Davila University of Medicine and Pharmacy in Bucharest in 2003 before receiving a Master of Endodontics in 2008. I have specialized my practice to endodontics since 2006, and I mostly deal with non-surgical root canal retreatments.

Many of your colleagues continue to perform conventional preparation, while you have been working with rotary and reciprocating instruments, as well as endodontic motors. Why did you switch, and what would you tell colleagues who have not yet switched?

Well, with the large volume of cases in my office, I soon discovered that I should use rotary preparation instead of manually shaping the root canals. Rotary preparation is a great deal faster and allows me to focus on other important things, like increasing the irrigation. My experience with reciprocating instruments began in 2008, prompted by an article published by Dr Ghassan Yared regarding canal preparation with only one NiTi instrument. Seeing Dr Yared's root canal treatments performed with only the F2 ProTaper, often without a glide path, moving in a reciprocating motion helped me understand that using a file in a reciprocating motion enhances its ability. Soon thereafter, several studies showed that a reciprocating file was more resistant to fracture than classically rotating files. The only drawback was that the only motor available for reciprocating instruments was a brushed motor and I personally destroyed a number of them. But, in 2011, VDW launched the RECIPROC® file and a new motor—the VDW RECIPROC® motor—that was a brushless motor, virtually eliminating wear and tear. I was probably the first person to buy the motor in Romania.

What files are most suitable for narrow invisible canals and medium to wide visible canals?

There is no narrow invisible canal. The minimum diameter in an MB2 canal, which is the most challenging one to prepare, is about 0.15 mm at 1 mm short of working length. This means that it is difficult to bypass coronal interferences in order to reach the working length. The calcified canals are only calcified at the point of entry, usually to a depth of 1–2 mm. Armed with this knowledge, I use a pre-flare introductory file, a ProTaper to quickly eliminate coronal interferences and go through the primary calcifications, then RECIPROC®. However, I often start negotiating the calcified canals directly with RECIPROC®, even though it appears to be too thick a file to be used in a narrow thin canal. The ability of the file to self-centre and its stiffness are very helpful. With the new RECIPROC® *blue*, the file is more flexible than ever before and the need for other super-elastic files is diminished.

What combination of instruments from preparation to obturation do you usually prefer?

I use an S1 ProTaper for quickly eliminating coronal interferences and then a R25. Most of the time, I reach the working length in a couple of minutes, which allows more time for irrigating.

For how long have you been using RECIPROC® *blue*, and what do you like most?

I have been using it since September 2016. I really like that it feels softer and more flexible than the regular RECIPROC®, allowing me to use it in vital cases.

Could you tell us more about some of the cases in which you have used RECIPROC® *blue*?

In vital and necrotic cases, I use RECIPROC® *blue*, but I still start with the old R25 in retreatments, since it is a little bit stiffer and I can apply more pressure when working out the old root canal fillings. For example, a great way to remove the plastic carriers is to forcefully push the R25 into them, as it shreds the carrier quite quickly.

What should one pay attention to when preparing irregular shaped canals with RECIPROC® *blue*?

When I deal with a severely curved canal or with a double curvature, after each insertion of the RECIPROC® *blue* file, I usually scout 2–3 mm ahead with either a manual or a rotary narrow file. This is because RECIPROC® *blue* files, being so active and fast, have a tendency to generate a great deal of debris. In narrow or multiple curvature canals, this can sometimes block the canal.

Would you recommend RECIPROC® *blue* to your colleagues?

First of all, I would recommend switching to reciprocation instead of rotary use of files. Reciprocation offers a whole new world in the mechanical preparation of the main root canals. It is safer, faster and most likely cheaper, since there are fewer files involved. If dentists want to try a reciprocating system, why not start directly with the best system currently available on the market in my opinion—VDW RECIPROC® and VDW RECIPROC® *blue*? And I say this without having any financial interest whatsoever.

Dr Nicola, thank you for your time.