



Irrigation techniques in endodontics - An overview

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ABSTRACT:

Background:

The success of endodontic therapy depends on the extensive removal of microorganisms and the thorough clearance of their by-products from the root canal system including lateral canals. Irrigation aims to remove bacteria, eliminate microbial biofilms and by-products from the root canal system, and prevent subsequent contamination of the intracanal spaces. The reduction of the bacterial load to assure healing is achieved by combining root canal preparation and disinfection. To increase the effectiveness of the root canal disinfection procedures, mechanical debridement is combined with antibacterial irrigants. Recently various irrigant activation techniques that have been aided by machines are introduced. The most common are apical negative pressure irrigation (ANP), passive ultrasonic irrigation (PUI), sonic irrigation (SI), and manual dynamic activation (MDA) techniques.

Materials and Methods:

Study desion: We included systematic reviews and meta analysis. Articles were taken from Pubmed, Medline, Scopus, LILACS (Latin-American scientific literature in health sciences). EMBASE (The Excerpta Medica Database). The Cochrane Database of Systematic Review

Sources of information and Search strategy:

The sources included Endodontic research in databases like MEDLINE (via



PubMed), Scopus, ProQuest, and Cochrane Library (CENTRAL) with no language constraints. Additional search methods included Google Scholar, grey literature, hand searching of the International Endodontic Journal and the Journal of Endodontics

Results:

The meta-analyses with outcome demonstrated irrigant activation technique(IATs)to have a significant penetration of NaOCl into lateral canals over conventional needle irrigation at various levels short of the working length and the overall penetration into lateral canals. The outcome of subgroup analyses of individual IATs demonstrated the most effective and significant penetration of NaOCl (overall) to be passive ultrasonic irrigation.

Conclusion:

Within the limitations irrigation activation techniques(IATs) improved the irrigant penetration into the lateral canals and therefore their use during routine endodontic practice is recommended. Further investigations are required for any clinical recommendations, especially in studies involving curved root canals.

Keywords: Irrigation, root canals, microorganisms, endodontic therapy.

INTRODUCTION:

Endodontics is a specialised field of dentistry focused on the diagnosis and treatment of dental pulp and periapical tissues. At the core of endodontic procedures lies the intricate process of root canal therapy, aiming to alleviate pain and preserve natural teeth(1). An indispensable aspect of this therapy is irrigation, a technique designed to cleanse and disinfect the intricate network of root canals(2).Effective irrigation is paramount in removing vital and necrotic tissue remnants, bacteria, and debris from the root canal system. It plays a pivotal role in achieving the primary goals of endodontic treatment, including the elimination of microbial pathogens and prevention of reinfection(3). One critical aspect of successful endodontic treatment is irrigation, a technique essential for thoroughly cleansing and disinfecting the complex root canal system. The root canals contain a network of tiny spaces that demand meticulous attention to ensure the removal of debris, bacteria, and tissue remnants(4). Irrigation serves as a cornerstone in achieving the primary objectives of endodontic therapy, such as eliminating microbial pathogens and preventing the risk of



reinfection(5). Through effective irrigation, the root canal space can be adequately prepared for subsequent procedures, contributing significantly to the overall success of the treatment. Various irrigation techniques are employed in endodontics, each offering distinct advantages in different clinical scenarios. Traditional syringe and needle irrigation provide precision, allowing practitioners to target specific areas within the root canal system(6). Sonic and ultrasonic irrigation methods utilise sound waves to agitate and enhance the cleaning efficacy of irrigants, reaching challenging anatomical regions.

Passive ultrasonic irrigation (PUI) takes a step further by utilising ultrasonic energy to activate irrigants within the root canal. This activation facilitates the penetration of irrigating solutions into intricate structures, ensuring a more thorough cleansing process(7). The continual evolution of endodontics underscores the importance of refining irrigation strategies. Practitioners must stay abreast of advancements in irrigation techniques to optimise treatment outcomes, promoting not only the disinfection of root canals but also the preservation of natural tooth structure(8). In navigating the complexities of endodontic procedures, a nuanced understanding and adept application of irrigation techniques stand as pillars for achieving successful and enduring results. Several irrigation techniques are employed in endodontics, each with its unique advantages and applications(9). Traditional syringe and needle irrigation offer precision, while sonic and ultrasonic irrigation methods utilise sound waves for enhanced cleaning. Passive ultrasonic irrigation (PUI) employs ultrasonic energy to activate irrigants within the root canal, promoting fluid penetration into intricate anatomical structures(10).

Understanding and implementing these irrigation techniques are crucial for endodontic practitioners to optimise treatment outcomes, ensuring the thorough disinfection and preservation of the natural tooth structure(11). As endodontics continues to evolve, the refinement of irrigation strategies remains integral to advancing the efficacy and success of root canal therapies. The aim of this study is to evaluate the different irrigation techniques in endodontics.

Different techniques used for irrigation in endodontics:

Several irrigation techniques are employed in endodontics to ensure thorough cleaning and disinfection of the root canal system. Some prominent techniques include:



1. Syringe and Needle Irrigation:

Description: Traditional method involving the manual injection of irrigating solutions into the root canal using a syringe and needle.

Advantages: Precise delivery to targeted areas, cost-effective.

2. Sonic and Ultrasonic Irrigation:

Description: Utilises sound waves (sonic) or ultrasonic energy to agitate and enhance the effectiveness of irrigating solutions(12).

Advantages: Improved cleaning in complex anatomical structures, enhanced debris removal.

3. Passive Ultrasonic Irrigation (PUI):

Description: Involves the use of ultrasonic energy to activate irrigants within the root canal, promoting fluid penetration.

Advantages: Enhanced irrigant distribution, effective removal of debris, especially in areas difficult to reach.

4. Positive Pressure Irrigation:

Description: Applies positive pressure to irrigants using specialised devices, facilitating deeper penetration into the root canal system(13).

Advantages: Improved irrigant flow, increased effectiveness in debris removal.

5. Negative Pressure Irrigation:

Description: Creates a vacuum to draw irrigants into the root canal system, enhancing the removal of debris.

Advantages: Efficient debris removal, reduced risk of irrigant extrusion.

6. Ultrasonic Activated Irrigation (UAI):

Description: Combines ultrasonic activation with continuous irrigation to enhance the cleaning process.

Advantages: Increased irrigant flow, improved removal of organic and inorganic debris.

7. EndoVac System:

Description: Utilises negative pressure irrigation with specialised tips to actively remove debris and irrigants.(14)

Advantages: Improved fluid exchange, reduced risk of apical extrusion.

8. Multisonic System:



Description: Integrates sonic and ultrasonic technologies for simultaneous irrigation and debridement.

Advantages: Comprehensive cleaning, enhanced effectiveness in complex canal systems.(15)

Choosing the most suitable irrigation technique often depends on the specific characteristics of the root canal system, the complexity of the case, and the practitioner's preferences. The continuous evolution of irrigation methods underscores the commitment to refining techniques for optimal outcomes in endodontic therapy.

Significance of irrigation in endodontic treatments:

Debridement and Cleaning:

Purpose: To remove vital and necrotic tissue remnants, bacteria, and debris from the root canal system.

Significance: Ensures a clean and disinfected environment within the root canal, reducing the risk of persistent infection.

Purpose: Targets and eliminates microbial pathogens within the root canal.

Significance: Essential for preventing reinfection and promoting the long-term success of endodontic treatment.

Dentin Smear Layer Removal:

Purpose: Addresses the dentin smear layer created during instrumentation.

Significance: Removal of the smear layer enhances the penetration of disinfecting agents into dentinal tubules, improving the overall disinfection process.

Enhanced Penetration:

Purpose: Facilitates the penetration of irrigants into complex anatomical structures and lateral canals.

Significance: Reaches areas that may be challenging to access with instrumentation alone, ensuring a thorough cleaning process.

Activation of Irrigants:

Purpose: Activates irrigants using techniques like ultrasonics to enhance their effectiveness.



Significance: Improves the fluid dynamics within the root canal, leading to better debris removal and disinfection.(16)

Reduction of Residual Medicaments:

Purpose: Assists in removing residual medicaments or remnants from previous treatment phases.

Significance: Prepares the root canal space for subsequent procedures, promoting optimal treatment outcomes.

Minimization of Apical Extrusion:

Purpose: Aims to reduce the risk of irrigant extrusion beyond the apex.

Significance: Minimises potential postoperative complications and enhances patient safety.

Biofilm Disruption:

Purpose: Targets and disrupts bacterial biofilms that may adhere to the root canal walls.

Significance: Biofilm disruption is crucial for effective microbial control and preventing persistent infections.

Irrigation is integral to the success of endodontic treatment as it ensures thorough cleaning, disinfection, and preparation of the root canal system. The meticulous removal of debris, bacteria, and contaminants contributes to the overall efficacy of the treatment and promotes the long-term health and preservation of natural teeth.(17)

While irrigation is a crucial step in endodontic treatment, there are potential drawbacks and challenges associated with this process:

1. Irrigant Extrusion: Risk of irrigant extrusion beyond the apex. May cause postoperative discomfort, tissue irritation, or injury to surrounding structures.

2. Ineffective Debridement in Complex Anatomy: Difficulty in reaching and cleaning complex anatomical structures, such as isthmuses and lateral canals. Residual debris in intricate areas may lead to persistent infections.

3. Dentin Damage from Agitation: Excessive or improper use of ultrasonic or sonic irrigation may cause dentin damage. Weakening of dentin structure, potentially leading to instrument separation or perforations.



4. Limited Penetration of Irrigants: Challenges in achieving complete penetration of irrigants into dentinal tubules. Inadequate disinfection of dentinal tubules, increasing the risk of persistent infection.

5. Incompatibility with Materials: Some irrigants may be incompatible with certain materials used in endodontics. Material degradation or compromised treatment outcomes may occur.

6. Potential Allergic Reactions: Patients may experience allergic reactions to specific irrigant components. Allergic responses can lead to discomfort, swelling, or other adverse effects.

7. Residual Smear Layer: Incomplete removal of the smear layer. Hindered penetration of disinfecting agents, potentially reducing treatment effectiveness.

8. Instrument Clogging: Irrigation needle or canal blockage due to debris accumulation. Compromised irrigant delivery, hindering the cleaning process.

9. Inadequate Root Canal Disinfection: Insufficient contact time or concentration of irrigants. May result in incomplete disinfection, leading to persistent microbial presence.

Addressing these drawbacks requires a careful and skillful approach to irrigation in endodontics, including proper technique selection, awareness of anatomical complexities, and consideration of patient-specific factors. Vigilance in managing potential challenges contributes to the overall success and safety of endodontic procedures.

MATERIALS AND METHODS:

Study design: We included systematic reviews and meta analysis. Articles were taken from Pubmed, Medline, Scopus, LILACS (Latin-American scientific literature in health sciences). EMBASE (The Excerpta Medica Database). The Cochrane Database of Systematic Review

Inclusion criteria: Laboratory studies with at least one irrigation technique as the trial arm; Studies employing a direct observation and/or radiographic approach to assess the effectiveness of the aforementioned irrigation activation techniques.



Exclusion criteria: Studies conducted on animal teeth, resin blocks, root-filled teeth, and open canal systems. Review articles, case series, and case reports.

Sources of information and Search strategy:

The sources included Endodontic research in databases like MEDLINE (via PubMed), Scopus, ProQuest, and Cochrane Library (CENTRAL) with no language constraints. Additional search methods included Google Scholar, grey literature, hand searching of the International Endodontic Journal and the Journal of Endodontics

RESULTS AND DISCUSSION:

The meta-analyses with outcome demonstrated irrigant activation technique(IATs)to have a significant penetration of NaOCl into lateral canals over conventional needle irrigation at various levels short of the working length and the overall penetration into lateral canals. The outcome of subgroup analyses of individual IATs demonstrated the most effective and significant penetration of NaOCl (overall) to be passive ultrasonic irrigation. The efficacy of irrigation is assured once the irrigant is in contact with the entire root canal system. The optimum penetration of NaOCl into the lateral canals is essential for effective debridement, dissolution, and disinfection where mechanical instrumentation cannot be established. Hence, several IATs were established for better distribution of NaOCl throughout the canals, resulting in the success of root canal therapy.(18)

Endodontic irrigation is a fundamental aspect of root canal therapy, pivotal in achieving successful treatment outcomes. The primary goal is to thoroughly clean and disinfect the intricate root canal system, eliminating debris, bacteria, and organic tissue remnants.(19)

Various irrigation techniques are employed, each with its unique advantages and applications. Traditional syringe irrigation involves manually applying irrigants using needles or cannulas. This method is effective but might not adequately reach all areas within complex canal systems.



Passive ultrasonic irrigation (PUI) utilizes ultrasonic energy to agitate irrigants, enhancing their penetration into hard-to-reach areas and improving cleaning efficacy. Sonic irrigation, using sonic energy, and laser-activated irrigation employing laser energy are other innovative techniques aimed at maximizing disinfection and cleaning effectiveness.(20)

These techniques often utilize irrigants like sodium hypochlorite, chlorhexidine, and EDTA. Sodium hypochlorite is widely used due to its potent antibacterial properties and organic matter dissolution capabilities. Chlorhexidine provides additional antimicrobial action, while EDTA aids in removing the smear layer, enhancing canal disinfection, and improving material adhesion.(21)

Selecting the optimal irrigation technique depends on various factors, including the complexity of canal anatomy, the presence of infections, and the preferences of the endodontist. Often, a combination of techniques is employed to ensure thorough cleaning and disinfection.(22)

The impact of these irrigation techniques goes beyond immediate cleaning. Proper disinfection reduces post-treatment complications, promotes healing, and significantly enhances the success rates of endodontic therapies. Moreover, successful root canal treatment preserves natural dentition, preventing the need for extraction and maintaining oral health.

Ultimately, the meticulous use of irrigation techniques plays a pivotal role in achieving optimal outcomes in endodontic treatments, ensuring the successful resolution of infections and the preservation of the patient's oral health.

CONCLUSION:

In conclusion, irrigation techniques in endodontics represent a cornerstone in achieving successful root canal treatments. These methods, ranging from traditional syringe irrigation to innovative approaches like passive ultrasonic, sonic, and laser-activated irrigation, serve the crucial purpose of thoroughly cleaning and disinfecting the intricate root canal system.



The choice of irrigation technique, coupled with appropriate irrigants like sodium hypochlorite, chlorhexidine, and EDTA, significantly impacts treatment outcomes. Thorough cleaning, removal of debris, bacterial elimination, and smear layer removal are essential aspects that contribute to the success and longevity of endodontic therapy.

Ultimately, the meticulous use of irrigation techniques not only ensures effective cleaning and disinfection but also reduces post-treatment complications, enhances healing, and preserves natural dentition. This comprehensive approach, supported by evidence-based practices, paves the way for successful outcomes, improved patient satisfaction, and sustained oral health in endodontic treatments.

Within the limitations irrigation activation techniques(IATs) improved the irrigant penetration into the lateral canals and therefore their use during routine endodontic practice is recommended. Further investigations are required for any clinical recommendations, especially in studies involving curved root canals.

REFERENCES:

1. Sinha N, Dodwad PK, Singh B. Irrigation in Endodontics “Flush Them Right”: Instruments Shape, Irrigants Clean. LAP Lambert Academic Publishing; 2012. 136 p.
2. Josic U, Mazzitelli C, Maravic T, Fidler A, Breschi L, Mazzoni A. Biofilm in Endodontics: In Vitro Cultivation Possibilities, Sonic-, Ultrasonic- and Laser-Assisted Removal Techniques and Evaluation of the Cleaning Efficacy. *Polymers* [Internet]. 2022 Mar 25;14(7). Available from: <http://dx.doi.org/10.3390/polym14071334>
3. Kayalvizhi G, Subramaniam B, Suganya G. Topical application of antibiotics in primary teeth: an overview. *J Dent Child* . 2013 May-Aug;80(2):71–9.
4. Ali R, Okechukwu NC, Brunton P, Nattress B. An overview of electronic apex locators: part 2. *Br Dent J*. 2013 Mar;214(5):227–31.
5. Gorduysus MO, Gorduysus M, Annamma LM. Effectiveness of a novel chelating agent in removing calcium hydroxide using conventional and passive ultrasonic irrigation techniques. *J Clin Exp Dent*. 2023 Oct;15(10):e827–34.
6. A B, C D, G L, E S. Current Trends in Regenerative Endodontics: A Web-based Survey. *J Endod* [Internet]. 2023 Nov 25; Available from: <http://dx.doi.org/10.1016/j.joen.2023.11.013>
7. Silva WO, Amoroso-Silva P, Olivares P, Alcalde MP, Alves FRF, Marceliano-Alves MF. Enhancing debris removal in curved canals: a comparative evaluation of XP-endo



- Finisher and Passive Ultrasonic Irrigation. *Clin Oral Investig* [Internet]. 2023 Nov 1; Available from: <http://dx.doi.org/10.1007/s00784-023-05342-2>
8. Choudhari S, S P, Venkata Teja K. Antimicrobial Efficacy of a Novel Automated Irrigation Device As Compared to Conventional Needle Irrigation Against *Enterococcus faecalis*: An In Vitro Study. *Cureus*. 2023 Sep;15(9):e45200.
 9. Olivi G, De Moor R, DiVito E. *Lasers in Endodontics: Scientific Background and Clinical Applications*. Springer; 2016. 298 p.
 10. de Rabello DGD, Valera MC, Corazza BJM, Dos Santos LM, Carvalho CAT. Clinical efficacy of endodontic protocols on reducing cultivable bacteria and endotoxin in infected root canal in patients submitted to head and neck radiotherapy: a randomised clinical trial. *Clin Oral Investig* [Internet]. 2023 Dec 1; Available from: <http://dx.doi.org/10.1007/s00784-023-05283-w>
 11. Ibrahim GI, Jawad HA. Investigating the effect of Er,Cr:YSGG laser agitation of sodium hypochlorite on the removal of mature biofilm in the complex root canal systems using atomic force microscopy. *J Dent Res Dent Clin Dent Prospects*. 2023 Nov 11;17(3):154–61.
 12. Szabó EV, Huszta B, Polyák M, Ruksakiet K, Bernáth R, Ghidán Á, et al. Antimicrobial efficacy of sodium hypochlorite and hyper-pure chlorine dioxide in the depth of dentin tubules in vitro. *BMC Oral Health*. 2023 Nov 27;23(1):930.
 13. Akçay A, Gorduysus M, Gorduysus MO, Annamma LM, Müftüoğlu S. A Comparative Evaluation of the Cleaning Efficacy of Five Different Root Canal Irrigation Devices: A Histological Study. *Eur J Dent* [Internet]. 2023 Nov 23; Available from: <http://dx.doi.org/10.1055/s-0043-1774325>
 14. Fontanezi BS, Bronzato JD, Mohara NT, de-Jesus-Soares A, Frozoni M. Assessment of the root surface temperature during the use of intracanal agitation systems: In vitro study. *Braz Dent J*. 2023 Jul-Aug;34(4):44–53.
 15. Basrani B. *Endodontic Irrigation: Chemical disinfection of the root canal system*. Springer; 2015. 316 p.
 16. Camilleri J. *Endodontic Materials in Clinical Practice*. John Wiley & Sons; 2021. 320 p.
 17. Torabinejad M, Walton RE. *Endodontics: Principles and Practice*. Elsevier Health Sciences; 2009. 496 p.
 18. Dragidella A, Kameri A. Comparative Effects of Er:YAG Laser, Sodium Hypochlorite, and QMix on Root Canals Infected With and. *J Lasers Med Sci*. 2023 Oct 11;14:e43.
 19. Parhar M, Bansal P. Development of a High Penetration Safe Irrigant from. *Int J Appl Basic Med Res*. 2023 Sep 25;13(3):149–52.
 20. Rao PD, Sandeep AH, Madhubala MM, Mahalaxmi S. Comparative evaluation of effect of nisin-incorporated ethylenediamine tetraacetic acid and MTAD on endodontic biofilm



eradication, smear layer removal, and depth of sealer penetration. Clin Oral Investig [Internet]. 2023 Nov 24; Available from: <http://dx.doi.org/10.1007/s00784-023-05285-8>

21. Karatas E, Hadis M, Palin WM, Milward MR, Kuehne SA, Camilleri J. Minimally invasive management of vital teeth requiring root canal therapy. Sci Rep. 2023 Nov 21;13(1):20389.
22. Wang Y, Hofmann M, Ruf S, Zhang J, Huang Q. Intentional replantation and dental autotransplantation of mandibular posterior teeth: Two case reports. Medicine . 2023 Nov 17;102(46):e35822.