

Intraoral Treatment of Dental Disease in Pet Rabbits



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KEYWORDS

• Incisor teeth • Cheek teeth • Dental instruments • Extraction • Coronal reduction

KEY POINTS

- The intraoral treatment of dental disease in pet rabbits must follow a complete clinical examination, intraoral inspection under general anesthesia, and diagnostic imaging.
- Intraoral inspection and dental procedures require specific instruments and equipment suitable for rabbits.
- Extraction of incisor teeth represents the only definitive and completely effective treatment of severe malocclusion. Rabbits adapt easily to absence of incisors, and the prognosis is good.
- Coronal reduction of incisor teeth must never be performed using trimmers, clippers, or similar instruments because they frequently lead to complications such as fractures, damage of the apical germinative tissue, pulp exposure, endodontic infection, and periapical abscessation; this is a meaningless procedure in cases of severe malocclusion.
- Coronal reduction of clinical crowns of cheek teeth is aimed at restoration of the coronal length and the occlusal planes *as close as possible* to normal anatomy.

INTRODUCTION

The proper planning of dental treatment is feasible after thorough diagnosis using modalities such as intraoral examination (ideally stomatoscopy), radiography, and other advanced imaging. In many cases, treatment immediately follows diagnosis in order to avoid a second anesthetic procedure. Discussion with the owner about long-term prognosis and aftercare is imperative.

Intraoral dental procedures represent an important part of treatment of dental disease in pet rabbits. Treatment includes elimination of dental spurs, restoration of a more normal occlusal plane, extractions, and gingival suture.

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PLANNING DENTAL TREATMENT

Common Presentations

The 3 most common clinical presentations of dental disease in pet rabbits relate to overgrowth of the incisors; reduced food intake, anorexia, or dysphagia; and presence of a facial swelling.¹⁻³ One, 2, or all 3 of these conditions can be present at the same time. Although dental disease affecting the cheek teeth is more frequent, diseases affecting the incisors are more apparent to the owners. In the most common pattern of malocclusion, diseased incisors enhance the normal curvature of the reserve and clinical crowns. The mandibular incisors tend to elongate labially, and usually do not produce secondary lesions because they are rostral to the upper lip and nose.¹ The maxillary incisors tend to elongate and curve palatally^{1,2} and possibly damage the lips and/or the palate (**Fig. 1**). Elongated incisors may fracture at different levels of the clinical crown, or even below the gingival level. In cases of advanced dental disease, growth may be slowed or arrested. Dental disease of the incisors also affects the reserve crown. Abnormal elongation and apical deformity of maxillary primary incisors may lead to partial or complete obstruction of the nasolacrimal duct. Epiphora, dacryocystitis, additional ocular lesions, or facial dermatitis are possible sequelae.^{1,4-6}

Rabbits with acquired dental disease of the cheek teeth may present at different stages,^{2,7} but symptoms may not be consistent with the degree of disease.² The earliest stage is elongation of clinical crowns. Clinical signs are usually not present at this stage, even though some symptoms, such as the rabbit being reluctant to eat hay or other hard food, may be inferred from a detailed history. This condition is caused by the elongated apex impinging on its sensory nerve supply.⁷ At a further stage, elongation of the clinical crowns and the abnormal occlusal plane appear as so-called step mouth on the intraoral examination.^{1,2,7} Extraoral signs may also appear, such as slight deformity of the ventral profile of the mandibular cortical bone following elongation of reserve crowns.^{1,3,7,8} In advanced stages, excessive curvature of clinical crowns of mandibular cheek teeth typically occurs, but is not limited to the lingual direction. In contrast, the maxillary cheek teeth usually curve in the buccal direction, which can result in spur formation and lesions of the lingual or the buccal mucosa.

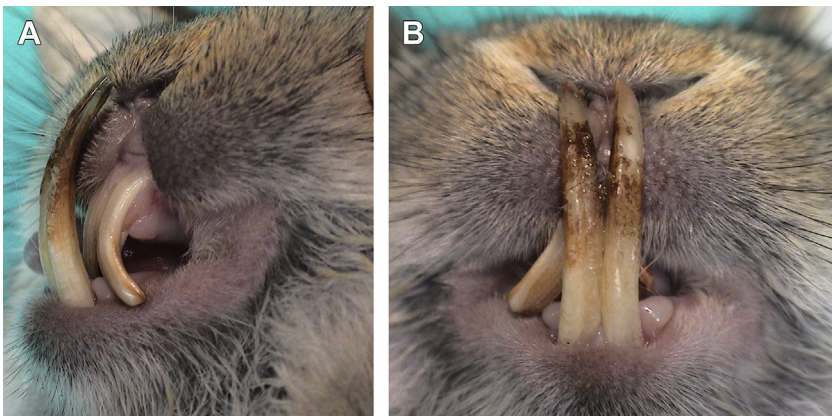


Fig. 1. Common presentation of malocclusion of incisor teeth in a pet rabbit, lateral (A), and rostral (B) views. The mandibular incisors tend to elongate labially, whereas the maxillary incisors tend to elongate and curve palatally with possible damage to the lips and/or palate. (Courtesy of Vittorio Capello, DVM, Milano, Italy; with permission.)

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