

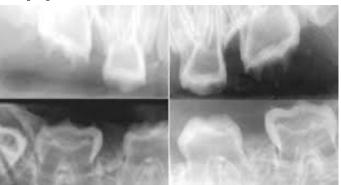
Dentinogenesis Imperfecta

Courtney Sprayberry DEN1114 - D219

What is it?

- Translucency
- Discoloration: blue/gray or yellow/brown
- Teeth are brittle, soft, and damage easily
- Teeth are sometimes placed abnormally
- Enlarged(type III)/missing pulp chambers

(types I and II)





Three Types:

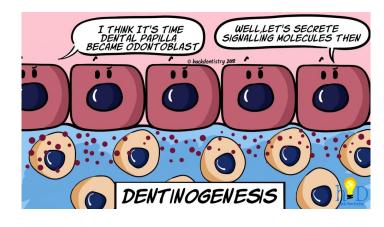
Dentinogenesis imperfecta I	Osteogenesis imperfecta with opalscent teeth	Dentinogenesis imperfecta
Dentinogenesis imperfect II	Isolated opalscent teeth	Hereditary opalscent teeth
Dentinogenesis imperfect III	Isolated opalscent teeth	Brandywine isolate

^{*}Type II is most common and is also associated with hearing loss.

Cause:

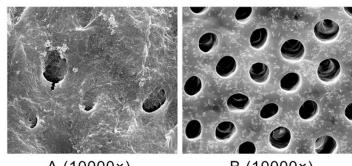
Genetics/Gene mutation (DSPP)

- In MOST cases, at least one parent is affected
- The DSPP makes the 3 proteins responsible for normal dentin formation
- Environmental/systemic upset
- Reported incidence of about 1 in 7,000



Dental Impacts:

- Appearance, speech problems
- Teeth are much weaker than normal, which leads to: breakage, wear, and loss of teeth
- Enamel pitting
- Can affect primary and permanent dentition
- Abscess/pain



A (10000×)

B (10000×)



Treatment:

- Depends on type and severity of problems
- Some can be treated with simple restorations, veneers/crowns (if teeth can support them)
- Periapical abscesses are common, causing need for RCT (if possible) or apicoectomy
- Many must resort to partial/full dentures or implants

Before and After (Crowns)

