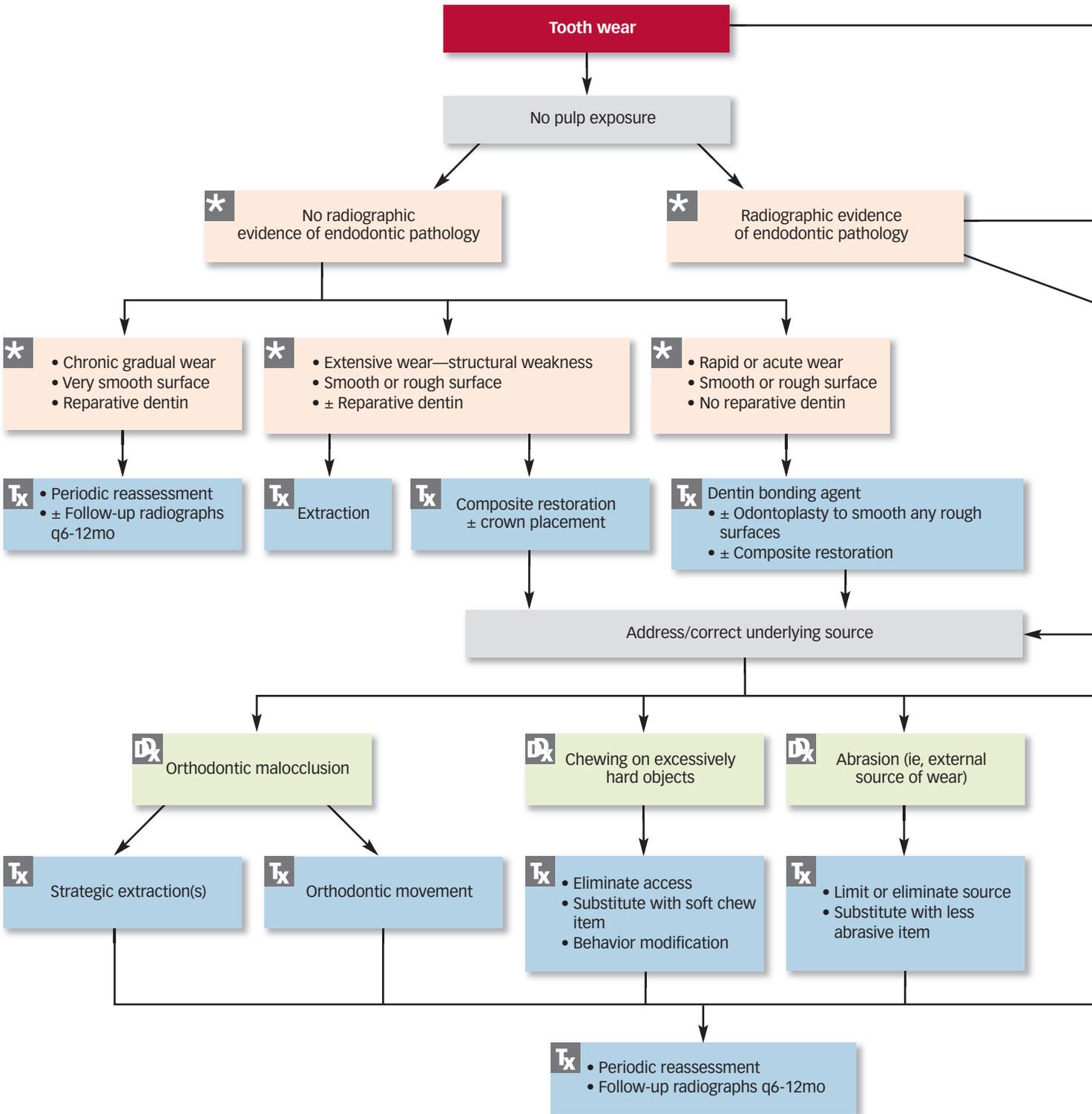
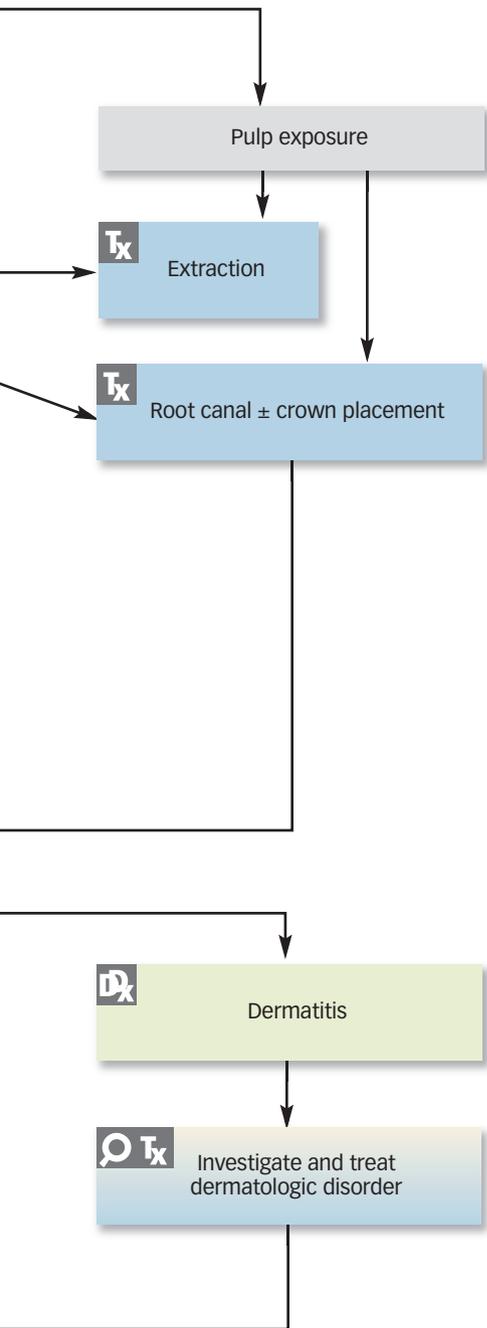


Dental Wear: Attrition & Abrasion





TOOTH WEAR TYPES

- **Abrasion** is mechanical wear of teeth from external forces (eg, brushing, dental instruments), also defined as wear from chewing on abrasive objects (eg, tennis balls, hair).
- **Attrition** is gradual physiologic wear resulting from natural mastication.
- **Pathologic attrition** is excessive wear caused by heavy chewing, biting, or grinding against other teeth (eg, orthodontic malocclusion).

Fast Facts

- **Dental explorers** have a sharp tip that helps determine whether a worn surface is smooth from gradual wear or rough from minor fractures; it can also probe for pulp exposure. Its use is mostly reserved for anesthetized patients; diligent caution should be used with nonanesthetized patients.
- **Reparative dentin** is denser than regular dentin, lacks organized tubules, is produced during tooth wear, and acts as a protective barrier. Pulp recedes behind the deposited mineralized layer and remains shielded from exposure.
- **Intraoral radiographs** are essential for evaluating compromised teeth.
- **Odontoplasty** is the adjustment of tooth contours. Sharp edges can be smoothed with hand or powered instrumentation. Small surface defects can be restored with dental composite.
- **Signs of endodontic pathology** may include wider-than-normal pulp canals from odontoblast death and delayed maturation, strictured or obliterated pulp canals from accelerated calcification (can occur during pulpitis), periapical radiolucency, or internal or external root resorption.

Differential Diagnosis	Treatment
Investigation	Results

See Aids & Resources, back page, for references & suggested reading.