EXOTIC ANIMAL DENTISTRY

The Normal, The Difficult, And The Failures

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There are many dental oriented exotic animal dentistry cases that go far beyond the "101" almost certain remission of endodontics.

Due to the varied morphological patterns and limitations of oral access these problems become almost impossible to perfect a cure or remission.

CASE #1

Gonial abscess of the mandible in herbivores.

Three African plains antelope and one big horn sheep manifested the same lesion, both unilaterally and bilaterally, etiology unknown (possibly fox tail grass). Surgical excision and drainage both intraorally and extraorally was attempted. Pathology showed: 3+ Fusobacterium, 3+ Bacteroides, 3+ Pepto streptococcus, anaerobids, necro bacillosis. Possible osteomyelitis was a secondary complication. Upon repeated induction for irrigation and drainage the animals died. A one time procedure needs to be developed to cope with this condition.

CASE #2

Necro bacillosis and fusobacterium in Kangaroos.

Two female kangaroos showed infra orbital swellings of approximately 5 cm in diameter. The fetal odor suggested Necro bacillosis, usually a fatal condition in kangaroos. Extra oral incision was made through the lesions. The infected maxillary teeth were removed. On site bacterial present. Periodontal flap surgery was done on the remaining dentition. The entrance site was partially closed and allowed to drain. Both cases were successful.

CASE #3

Gingival hyperplasia in a DeBraza monkey.

After initial diagnosis, two Debraza monkeys were anesthetized and gingivoplasty procedures were performed. One of sharp dissection and one with electrosurgery. Both were successful.

CASE #4

Infra mandibular swelling in a female Rhinoceros

A female rhinoceros was anesthetized with M99 and operated on in her compound with the use of a flashlight to reduce, diagnose, and remit the midmandibular lesion.

Intra oral examination was impossible due to trismus and an extra oral approach was made to the inferior border of the mandible.

A patent sinus tract from the lower permanent molar to the inferior border of the mandible was palpated. The tract was curetted with fine (bed bug) curettes into the root apex and Grossman cement was injected into the apex. The lesion was left open to drain. Lesion has not recurred.

CASE #5

Infra orbital swelling in a pronghorn antelope.

An infra orbital swelling was opened extra orally. Fistulous tracts were shown to emanate from the upper left third premolar. A retrograde alloy was placed into the entire root structure. Etiology was unknown since there was no tooth trauma, caries, or coronal fracture. The case failed and was reopened and retreated. The antelope died three months later and examination of the skull showed no fill of bone over the lesion.

CASE #6

Fracture of the anterior one-half of the mandible of a land turtle.

The anterior one-half of the mandible of a land turtle was replaced with the use of methyl methacrylate, cyanoacrylate, threaded wire and threaded pins. Occlusal equilibration was preformed. Case was successful as of one year.