

## **Case Report 30 Years Recall for Pt After Early Extraction Upper Right 1<sup>st</sup> Molar**

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### **Abstract:**

Extraction of first permanent molars is often considered in cases of extensive caries, endodontic or periodontal issues, periapical pathologies, and hypomineralisation. These molars are the most caries-prone teeth in permanent dentition, with over 30% of children aged 11 and older experiencing caries. Hypomineralised first molars, affecting 3.6-19.3% of children, often show enamel disintegration that predisposes to further caries, making early restoration challenging. The treatment is difficult due to issues like inadequate anesthesia and high retreatment rates. For children with severe molar-incisor hypomineralisation, extraction may be a beneficial option to alleviate pain and reduce dental anxiety. However, conflicting opinions exist regarding the timing of first permanent molar extraction. While early extractions can self-correct space discrepancies and prevent malocclusions, issues like tipping and rotation of neighboring teeth may arise, necessitating orthodontic intervention. The timing of extraction is more critical in the mandible than the maxilla due to differences in the eruption paths of the second molars. The ideal timing for extraction remains unclear, and the purpose of this review is to identify the optimal time for first permanent molar extraction to minimize the need for future orthodontic treatment. After 2/3 furcation development of the root of second molar.

### **Keywords:**

First permanent molar extraction, hypomineralisation, molar-incisor hypomineralisation, caries, dental treatment, orthodontic space closure, Saudi population, restorative dentistry, timing of extraction, furcation, second molar eruption, pediatric dentistry.