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11/9/05

## Dear Brian,

This is a letter to update you on my experiences with the Endox. Since purchasing the device in May 2003 I have probably carried out some 600 root canal therapies using the Endox with great success.

My protocol differs from that recommended by its inventor and is as follows:

- 1/ Local Anaesthetic administration as apt.
- 2/ Isolate tooth.
- 3/ Access pulp chamber.
- 4/ Gently access canals with QED's Trinity initial rotary file in their Tri Auto ZX handpiece and wipe clean the flutes.
- 5/ Irrigate with Citanest local anaesthetic.
- 6/ Repeat stage 4.
- 7/ Follow Triniti protocols. In this instance I am usually able to access the apices of the root canals with a .06 taper 25mm Triniti rotary file on the second attempt, again using Citanest as an irrigant.
- 8/ Use Endox to sterilize the canals.

This will usually consist of inserting the larger and more durable black electrode to within 2mm of the apices. The three fulgurating charges then released per root canal consist of two on the incisor setting and one on the setting pertaining to that particular tooth.

During this phase the patient will experience a minute twinge on discharge which can make them jump a little but is perfectly capable of coping if warned in advance.

9/ The canals are coated with sealant(currently AH26 although previously Apexit) obturated with SoftCore thermoplastic GP (it's better than Thermafill because it has a metal handle so you can bend it to obtain a better path of insertion).

I allow roughly 20 minutes for incisor, canine and premolar root canal procedures.

I allow 30 minutes for a molar procedure.

I no longer have to pour Tesco's bleach into root canals and keep topping it up during the conventional sterilizing phase which as you know, takes some 45 to 60 minutes!

I look forward to auditing my results when the next tranche of funding becomes available but can tell you now that anecdotally these have been extraordinarily good with very very few re-treatments required.

I have been in practice for 20 years. I was one of the first people in this country to import an intraoral camera when most of my colleagues said that it was not necessary to demonstrate to patients what was wrong with their teeth.

However I would also like to stress that I am not one of the Dental gadget junkies and only buy equipment that can improve standards of care in a cost effective manner.

So far the Endox has been one such piece and I would heartily encourage any of my colleagues in general practice to give it a try.

Yours Sincerely,

Guy Hollis BDS. LDS. Rcs (Eng)