

Feline Odontoclastic Resorptions and Stomatitis



The **feline odontoclastic resorptive lesion (FORL)** is a common feline dental problem. A majority of cats affected are older than four years-old. These resorptions have also been called cavities, neck lesions, external or internal root absorptions and cervical line erosions. FORLs are located usually where the gum-line meets the tooth. The most common teeth affected are the lower first and third molars; however, FORLs can be found anywhere and on any tooth. The cause is unknown.

Patients affected with FORLs may drool, bleed or have difficulty eating. **A majority of affected cats do not show clinical signs.** Most times, it is up to the owner or veterinarian to find the lesions on oral examinations. Diagnostic aids include a periodontal probe or cotton-tipped applicator applied to the suspected FORL. **The lesion often erodes into the sensitive dentin, causing the cat to show pain with jaw spasms when the FORL is touched.**

FORLs can present in many stages:

Initially, in the **class one FORL, an enamel defect is noted.** The lesion is minimally sensitive because it has not entered the dentin. Therapy for the defect usually involves thorough cleaning, polishing and daily teeth brushing with a pet-specific toothpaste.

In **class two, lesions have penetrated enamel and dentin.** Affected teeth may be treated with glass ionomer restoratives, which release fluoride ions to desensitize exposed dentin, strengthen enamel and chemically bind to tooth surfaces. The long-term (greater than two years) effectiveness of restoration at this second stage of lesions has not been proven. Glass ionomer application to the FORL does not automatically stop the progression of the disease.

Radiographs are essential to determine if the lesions have entered the pulp (class three), requiring either root canal therapy or extraction.

In the **class four FORL, the crown has been eroded or fractured.** Gum tissue grows over the root fragments, leaving a painful lesion that bleeds when probed. Treatment of choice is flap surgery and extraction of the root fragments when the tissue surrounding them appears inflamed or painful to the patient.

Cats can also be affected by **stomatitis**, a generalized inflammation of the mouth, called **lymphocytic plasmacytic gingival stomatitis (LPGS).** The cause of this disease has not been determined. Affected cats will show signs including swallowing difficulty, weight loss and drooling. When examining the mouth, you may see a cobble-stone-appearing redness in the back of your cat's mouth. In addition, marked gingivitis and periodontitis exist around the premolars and molars.

Traditional therapy options include thorough cleaning and polishing, gum surgery, extraction, corticosteroids, gold therapy, Flagyl, megestrol acetate and laser treatment.

Intraoral radiographs are taken of all the teeth. **If a tooth is affected by moderate to severe periodontitis typified by greater than 50 percent bone loss, it should be extracted along with all root fragments. *Radiographs should be repeated after extraction to ensure complete tooth removal.***

Medication is prescribed immediately following surgery. Additionally, you will be advised how to brush your cat's teeth daily and follow-up with an irrigation of 2 percent Chlorhexidine.

If the above therapy does not cure the disease within two months, or if the disease is severe, all teeth are removed behind the canines. Total mouth extractions will cure greater than 80 percent of the cats affected.