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Effect of Two Dentin Desensitizing Agents on the Retention of Cast Copings on Compromised Preparations Using Three Cements

Thesis

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Dedication

This work is dedicated to

*My great **mother***

*And my dear **father & brothers**,*

for without their love and support,

this would not have been possible.

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Table of Contents

Content	Page No.
List of Tables	I
List of Figures and graphs	III
Introduction	1
Review of Literature	3
Aim of study	27
Materials and methods	28
Results	58
Discussion	76
Summary and conclusions	87
References	91
الملخص العربي	

List of tables

Table No.		Page No.
1	Casting alloy used in the study	28
2	Desensitizers used in the study	28
3	Cements used in the study	29
4	Experimental factorial design	43
5	Categories for characterization of failure type after crown removal	55
6	Retentive force mean values (N) using two different dentin desensitizing agents with various cement types (n = 5 per group)	58
7	Retentive force mean values of Gluma, i-Flor and control groups with zinc phosphate cement	60
8	Retentive force mean values of Gluma, i-Flor and control group with Glass ionomer cement	61
9	Retentive force mean values of Gluma, i-Flor and control groups with Resin cement	63
10	Retentive force mean values of Gluma, i-Flor and control groups in respective to the cement type	64
11	Retentive force mean values for Gluma group with different cements	66
12	Retentive force mean values for i-Flor group with different cements	67

13	Retentive force mean values for Control group with different cements	69
14	Retentive force mean values of zinc phosphate, glass ionomer and resin cements with the three groups	70
15	Two way analysis of variance ANOVA test of significance comparing variables affecting retentive force mean values	71
16	Retentive force mean values (N) using two different dentin desensitizing agents with various cement types (n = 5 per group)	72
17	Chi-Square Tests comparing variables affecting retentive force mean values	73
18	Failure types with different desensitizing agents and cements	74

List of Figures and graphs

Figure No.		Page No.
1	Measuring tooth dimensions using a digital caliper.	30
2	Tooth was mounted in its most vertical alignment using a surveyor.	32
3	Diagram showing the dimensions of the prepared tooth.	33
4	Standardized prepared teeth embedded in acrylic resin blocks.	33
5	Automix light body impression material (VPS) was injected into a plastic tube over the putty before application onto the tooth.	35
6	Impression of a prepared tooth in a plastic tube.	35
7a	Lateral view of master stone die.	36
7b	Top view of master stone die.	37
8	Acrylic temporary crown on its relevant prepared tooth.	38
9	Wax pattern on master die.	39
10	Ni-Cr cast coping on its relevant prepared tooth.	42
11	Gluma desensitizer application on prepared tooth.	44
12	i-Flor gel injection into acrylic temporary crown to be applied on prepared tooth	45
13	Zinconol temporary cement application into acrylic temporary crown before cementation on its relevant prepared tooth.	46

14	Temp-Bond NE temporary cement application into acrylic temporary crown before cementation on its relevant prepared tooth.	47
15	Zinc phosphate cement application into the fitting surface of cast coping before cementation on its relevant prepared tooth.	48
16 (a,b)	Cemented cast coping on its relevant prepared tooth in the custom-built loading device of 5 kg.	49
17	Conventional glass ionomer cement application into the fitting surface of cast coping before cementation on its relevant prepared tooth.	50
18	Self-adhesive resin cement (RelyX TM Unicem) application into the fitting surface of cast coping before cementation on its relevant prepared tooth.	51
19	Sample in the universal testing machine.	52
20	Cemented coping was inserted in attachment device for retention test.	53
21	Sample after dislodgement.	53
22	A column chart of retentive force mean values using two different dentin desensitizing agents with various cement types	59
23	A column chart of retentive force mean values for Gluma desensitizer with various cement types (group I).	60
24	A column chart of retentive force mean values for i-Flor desensitizer with various cement types (group II).	62
25	A column chart of retentive force mean values for control group with various cement types (group III).	63

26	A column chart of retentive force mean values for Gluma, i-Flor and control groups with zinc phosphate cement.	65
27	A column chart of retentive force mean values for Gluma, i-Flor and control groups with glass ionomer cement.	66
28	A column chart of retentive force mean values for Gluma, i-Flor and control groups with resin cement.	68
29	A column chart of retentive force mean values for Gluma, i-Flor and control groups with the three cements.	69
30	A column chart of Retentive force mean values for zinc phosphate, glass ionomer and resin cements with the three groups.	71
31	A column chart of Retentive force mean values for Gluma, i-Flor and control groups as function of different cements.	72
32	The fitting surface of cast coping and its relevant prepared tooth surface after debonding representing type 1 failure.	74
33	The fitting surface of cast coping and its relevant prepared tooth surface after debonding representing type 3 failure.	75
34	The fitting surface of cast coping and its relevant prepared tooth surface after debonding representing type 2 failure.	75

The longevity of fixed prosthesis depends on retention and marginal integrity of restorations. Optimal retention is one of the main requirements for successful restoration when minimal amount of tooth structure is left. This led to the development of new luting cements such as adhesive resin based cement, modified glass-ionomer luting cement, which were claimed to possess higher bonding potentials to dentin. ⁽¹⁾

The cementation of artificial crown is commonly accompanied by sensitivity, so the clinical application of desensitizing agents has become prevalent.⁽²⁾ However it was reported that the use of desensitizing agents affects the bonding between dentin and luting material. Durable bonding between dentin and luting materials in such cases is one of the most important factors for avoiding detachment of restorations as well as the prevention of microleakage, secondary dental caries and tooth fracture. Some ingredients contained in dentin desensitizers may induce chemical interaction with dentin organic substances, and this may affect the sealing and bonding characteristics of the luting agents. ⁽³⁾

The retention of restorations can be compromised by short or over-tapered tooth preparations.⁽⁴⁾ Previous studies have primarily focused on the mechanical analysis of the relationship between degree of taper, surface area, surface roughness, preparation length, or luting agents on the force necessary to remove cemented castings from machined dies.^(5,6) The geometric form of the prepared tooth and the prosthesis mainly determines the retention of the casting, but the clinical success of the restoration also depends on the integrity and the mode of attachment of the intervening cement layer. ⁽⁵⁾

Introduction

The purpose of this study was to test the effect of using two dentin desensitizers on the retentive strength of cast copings cemented with different luting agents on teeth prepared with controlled surface areas and high convergence angle.

In the oral environment, failure of retention of crowns and fixed partial dentures (FPDs) occurs under a combination of masticatory forces repeated over a period of time. These are mainly direct compressive forces and some resultant shear lateral forces. In addition, there is a small component of tensile force.⁽⁷⁾

Retention

Certain forces (e.g., when the jaws are moved apart after biting on very sticky food) act on a cemented restoration in the same direction as the path of placement. The quality of a preparation that prevents the restoration from becoming dislodged by such forces parallel to the path of placement is known as retention.⁽⁸⁾

Several factors influence the retention; factors in a prepared tooth, the type of cement, and factors in a restoration manufacturing. The factors influencing the retention in a prepared tooth are the surface area, the height of the prepared surface, the degree of convergence of the opposing walls of the preparation, and the texture of the prepared area.⁽⁸⁻¹⁰⁾

Some factors influence the retention that are functions of the cementing medium, the type of cement, the effect of a planned opening in the restoration, the influence of variations in the viscosity of the cement, variations in the seating force, variations in the duration of the force, variations in the time laps between the cementing and the unseating procedures, the angle of unseating force, and the values of the compressive strength and shear strength of various cementing media.⁽¹⁾

Other factors influence the retention in a restoration manufacturing as the relative adaptation of the restoration to the prepared tooth surface, and the texture of the internal surface of the restoration.⁽⁵⁾

Most laboratory testing for crown retention, however, uses direct tensile force. **Patil et al** in 2012⁽¹¹⁾ studied the effect of polymerizable and non-polymerizable desensitizing agents on crown-retentive-strength using zinc-phosphate, glass-ionomer and compomer cements. The high noble cast crowns were removed along the path of insertion by using a universal testing machine. Prime and Bond NT and Gluma Desensitizer were used. Compomer cement exhibited the highest retentive strength and all dentin treatments resulted in significantly different retentive values. Zinc phosphate was the least retentive. Crown retentive values of Compomer cement were improved with Prime and Bond NT and Gluma Desensitizer. Retentive values of zinc phosphate cement with Prime and Bond NT were decreased and not affected with Gluma Desensitizer. Retentive values of Glass ionomer cement were not affected by any of the desensitizers used in the study.

Retention of cast copings

The retention of restorations can be compromised by short or over-tapered tooth preparations. The retention of crowns was shown to depend on the taper. The relation between the degree of axial wall taper and the magnitude of retention was first demonstrated experimentally by Jorgensen in 1955. The relation was found to be hyperbolic, where retention rapidly decreases as taper increases. The maximum retention was found to be between 6 and 12 degrees. In