

Garden of Knowledge and Virtue



SPECIAL EDITION NDSSC 2020 NATIONAL DENTAL STUDENTS'

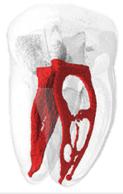
SCIENTIFIC CONFERENCE



GuttaFlow Bioseal as Monocone Obturation Technique in Curved Root Canals. A Scanning Electron Microscopy Study.

Presenters :

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INTRODUCTION

- The obturation with GuttaFlow Bioseal is not clearly investigated due to the newer generation of root filling material.
- > GFB has been evaluated for the:
 - i. sealing ability [1, 2, 3]
 - ii. cytotoxicity [4, 5, 6]
 - m. physicochemical properties [2, 7, 8]
 - *iv.* osteogenic activity [9]
 - v. retreatability [10]
 - vi. fracture strength of root canal treated teeth [11]
- However, scientific evidence related to other aspects in obturation procedure is not present.

OBJECTIVES

To evaluate the:

(i) volumetric percentage of the obturated root canals at the apical, middle and coronal root regions

(ii) extrusion
of root filling
materials
beyond
the apical
foramen

(iii) duration of obturation procedure on mandibular first molars with curved root canals

METHODOLOGY

Selection of samples:

Inclusion criteria:

 Lower first molars
 Intact coronal aspect
 Fully formed apices
 Moderate and severe root curvature based on Schneider's method

- **Exclusion criteria:** External and internal resorption
- ² Severe attrition
- 3. Calcified canal
- 4. Presence of pulp stones
- 5. Presence of crack lines

PART I: Samples selection 20 mandibular first molars

PART 2: Access cavity Standard preparation





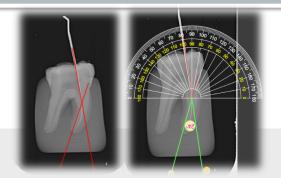
PART 4: Root canal preparation Hyflex CM rotary files at 500 rpm and 2.5 Ncm PART 3: Determination of root canal curvature

According to Schneider's method

10° to 20° (moderate root canal curvature)

 $>20^{\circ}$ (severe root canal curvature)





PART 5: Obturation and restoration
Group 1 - GP cone and GuttaFlow
Bioseal
Group 2 - GP cone and RockoSeal
Automix root canal sealer
The obturation procedure was timed
Obturation radiograph was taken
Restoration with composite resin

 PART 6: Preparation for observation under SEM
 Vertical sectioning to divide mesial and distal roots
 Horizontal sectioning of mesial root to obtain the apical, middle and coronal root regions

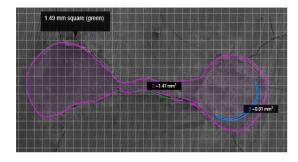






PART 7: Observation under SEM 70x magnification







PART 8: SketchAndCalc Area Calculator software Evaluation of the obturated root canals

PART 9: Data analysis SPSS version 25.0











RESULTS

Figure 1: Apical root region





Figure 2: Middle root region





Figure 3: Coronal root region

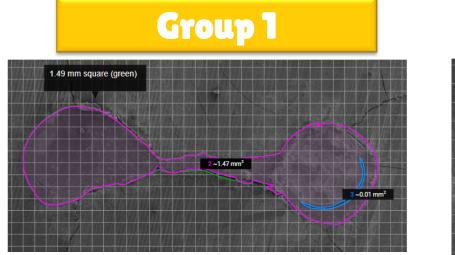




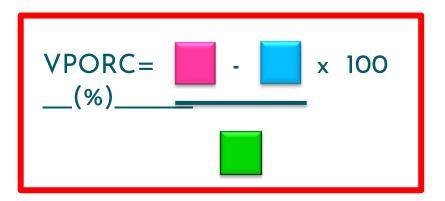
Figure 4: Evaluation of the obturated root canals

Outline of the root canal wall

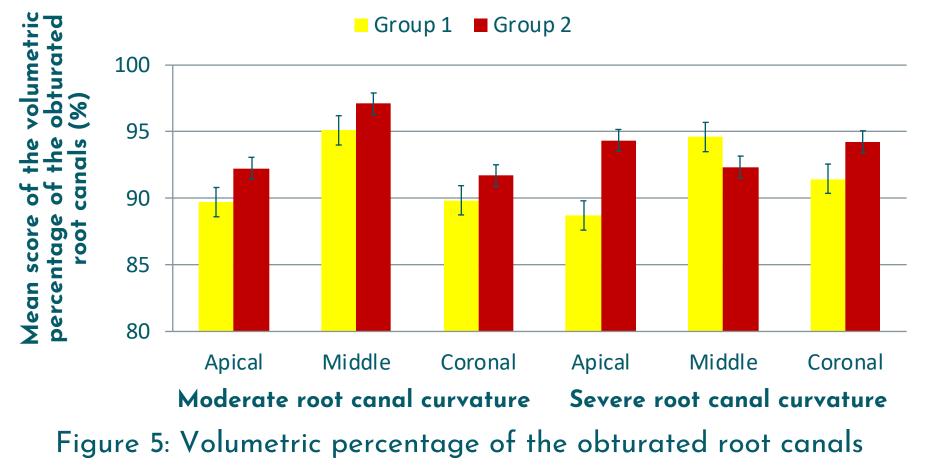
Obturated surface area



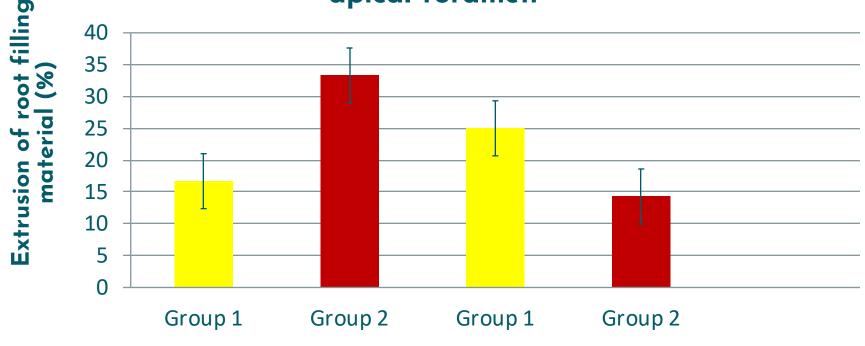
Voids within obturation



Volumetric percentage of the obturated root canals



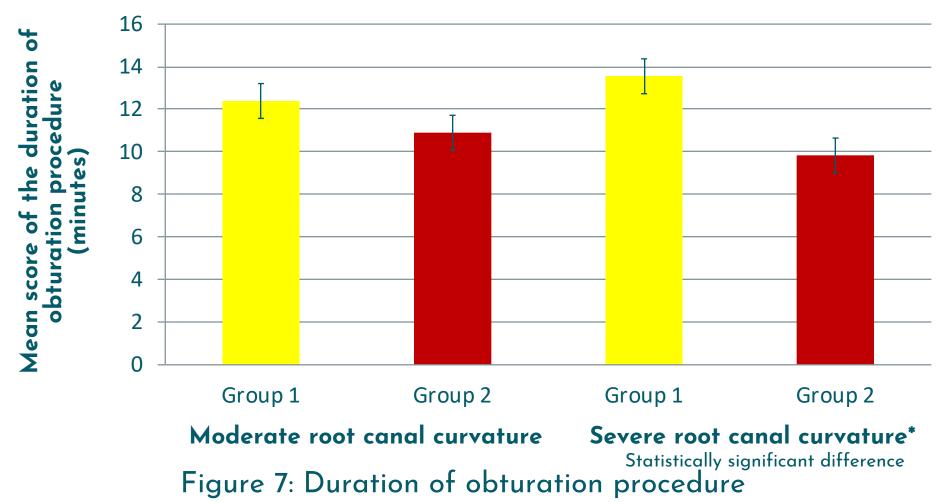
Extrusion of root filling material beyond the apical foramen



Moderate root canal curvature Severe root canal curvature

Figure 6: Extrusion of root filling material beyond the apical foramen

Duration of obturation procedure



DISCUSSIONS

The present study is the <u>first</u> <u>research evaluating other</u> <u>aspects</u> in obturation using GFB on curved mandibular molars.

Obturated root canals in moderate and severe root canal curvatures between GFB and silicone-based root filling material were <u>equivalent at</u> any level of evaluation.



The extrusion of root filling material beyond the apical foramen in moderate and severe root canal curvatures between GFB and silicone-based root filling material were comparable.

These findings could be attributed to the similar obturation technique and material viscosity but the later was not possible to confirm because of beyond the scope of the present study. Perhaps, future research can be done to validate these findings.



Duration of obturation procedure using GFB in severe root canal curvature was slightly longer than the obturation procedure using silicone-based root filling material.

This might not be associated with the status of root canal curvature directly, but rather the **amount of** GP mass from the combination of GP cone and GFB.

Within the limitation of the present study, the conclusions were: The <u>volumetric percentage</u> at the apical, middle and coronal root regions, as well as the <u>extrusion of root filling</u> <u>material beyond the apical foramen</u> between GFB and silicone-based root filling material were <u>comparable</u> <u>irrespective of the status of root canal curvature.</u>

The <u>duration of obturation procedure using GFB in</u> <u>severe root canal curvature was 27.5% longer</u> than the obturation using silicone-based root filling material.

CONCLUSIONS

ii.

CONCLUSIONS

Neither root filling material was able to seal the curved root canal of mandibular molars completely. The root filling materials in the present study can be opted depending on the clinical cases, material availability and clinician preference.

It is hoped that research in this field will point towards improving the limitations in various obturation techniques for future clinical practice.



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THANK YOU!

