

Root canal filling

Ideal root canal filling (Grossman 1988)

- 1. Easy mixing**
- 2. Sufficient working time**
- 3. Good seal**
- 4. X-ray contrast**
- 5. Easy removal**
- 6. No shrinkage**
- 7. Long term volume stability**
- 8. No bacterial growing**
- 9. No permeability for fluids**
- 10. Biocompatibility**
- 11. No staining**

Classification of root canal fillings

- Solid
- Semisolid
- Pastes

Guttapercha

Dried juice of the Taban tree (*Isonandra percha*)
(gutta)

1,4 - polyisoprene

Crystallin structure (60%)

Brittle

Guttapercha

- Beta phase
- Alpha phase 42 – 49 °C

- plastic
- Gamma phase 56 – 62° (amorfni)

Cooling process

very slowly (less than 0,5°C) – alpha phase
normal cooling – beta phase

Composition of guttapercha materials in endodontic

Guttapercha 19% – 22%

Zinc oxide 59 - 79%

Heavy metal salts 1% - 7%

Wax or resin 1% - 4%

Resilon

(Pentron)

- Thermoplastic synthetic polymer
- Points or material for injection

Composition:

Polyester polymers

Bioactive glass

Radioopaque fillers (bismuthum oxichlorid a and baryum sulphate)

Silver or titanium cones

- No good seal
- Silver cones - corrosion

Sealery

Chemically curing plastic materials

Good adhesion to root canal walls as well as solid cones

X-ray contrast

Biocompatibility

Sealers

Zinc Oxide-Eugenol

Chloropercha

Calciumhydroxide

Resins

Glasionomer

Silicone

Sealers

Importance

Filling of the spaces between the solid cones



Seal of the root canal filling

Zinc - Oxid Eugenol

Powder:

Zinc oxide

Liquid:

Eugenol

Acidic resins

Good adhesivity, antimikrobial effect, cytotoxic.
resorbable)

Zink Oxid Eugenol sealers

Pulp Canal Sealer (Kerr, USA))

Tubuli- Seal (Kerr, USA)

Caryosan (Spofa Dental, ČR)

Chloropercha

Powder

Canadian balsam

Resins

Guttapercha

Zinc oxide

Liquid:

Chloroform

Resins

Chloroperča

Vlastnosti:

Good adhesivity

Shrinkage

Toxicity

Calcium hydroxide sealers

Catalystr (paste)

Zinc stearat

Titanium dioxide

Baryum sulphate

or

Eugenol, Eukalypt

others

calciumhydroxide sealers

- Increase of the healing potential of periapical tissues
- Antibacterial effect
- Easy manipulation

But!

Resorbable if not homogeneous

Not suitable for the single cone technique

Resins

- Rezorcin formaldehyd
- Epoxide
- Polyketone
- Metacrylate

Epoxide resin

➤ Base (powder, paste)

Bismuth oxid

Titanium dioxide

Hexamethylentetramine

(Silver)

➤ Catalyst (liquide, paste)

Bisphenoldiglycidylether

Epoxide resins

(advantages)

- Long working time
- Hydrophilic (good penetration)
- Good adhesion to the root canal walls
- Volume stability
- No dissolution
- Antibacterial

Epoxide resins

(disadvantages)

- Difficult removal
- Staining
- Initiatory roxicity

No suitable for the single cone technique !

Polyketone

- Base
- Zinc oxide
- Bismuth phosphate
- Hexamethylentetramine

- Liquid
- Bisphenolglycidylether and other components

Polyketon resins

(advantages and disadvantages)

Advantages

Good adhesion

No contraction

No dissolution

Disadvantages

High stickness

Not removable

Products: Diaket, Diaket A (3M ESPE)

Methacrylate resins

Endo ReZ (Ultradent) – UDMA

For injection – single cone technique

Epiphany (Pentron)

Bis- GMA, etoxy bif- GMA, hydrophilic bifunctional methacrylates

Calcium hydroxide, baryum sulphate, baryum glass silica.

Sealer in combination with Resilon

Glasionomer sealers

➤ Base (powder)

Aluminium silicate glass

➤ Liquid

Polyacrylic acid, polymaleic acid, tartaric acid

Glasionomer sealers

(Advantages and disadvantages)

Advantages:

Curing under wet conditions, chemical bonding to hard dental tissues, no staining

Disadvantages

Short working time, difficult removal,
porous

Products

Ketac Endo (3M ESPE), Endion (VOCO)

Silicon based sealers

Polyvinylsiloxane (ev. in mixture with powdered guttapercha

Biocompatibility

Hydrofilic

Further investigation desirable.

Root canal fillings - forms

- Points (Cones)
- Materials for injection
- Plastic materials

Instruments

- Lentulo
- Compactors
- Compactors - carriers
- Others

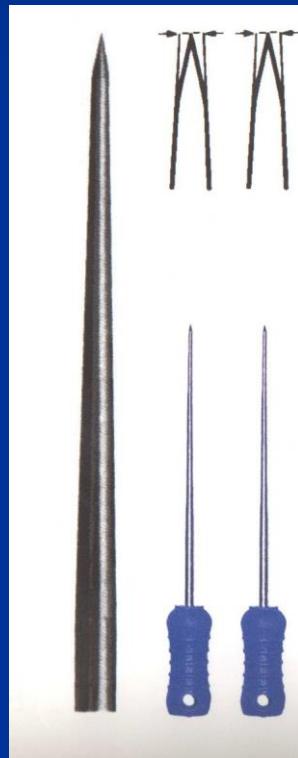
Lentulo



- delivers pastes
- 1,5 – 2 mm ahead
- at most for $\text{Ca}(\text{OH})_2$

Compactors

Spreader



Pointed

Vertical introduction

*Lateral condensation
technique*

Compactors

Pluggers



Not pointed

Vertical insertion

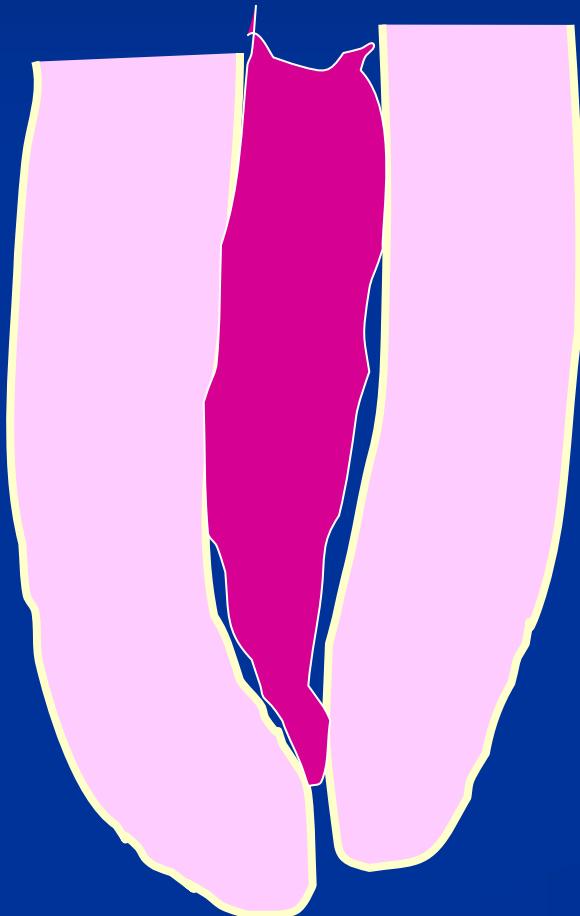
*Vertical condensation
- compaction*

Filling techniques

Cold

Warm

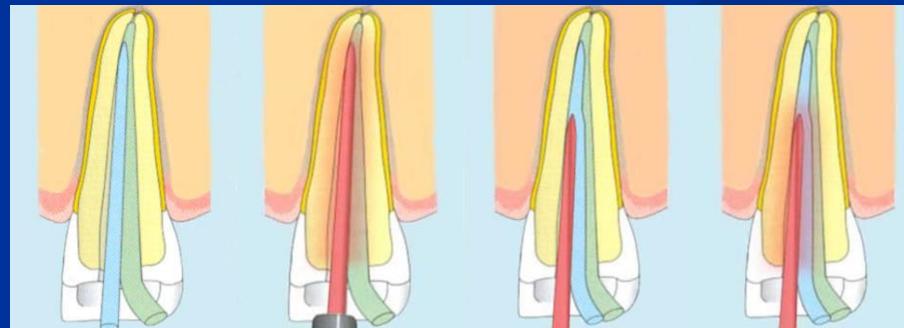
Paste only

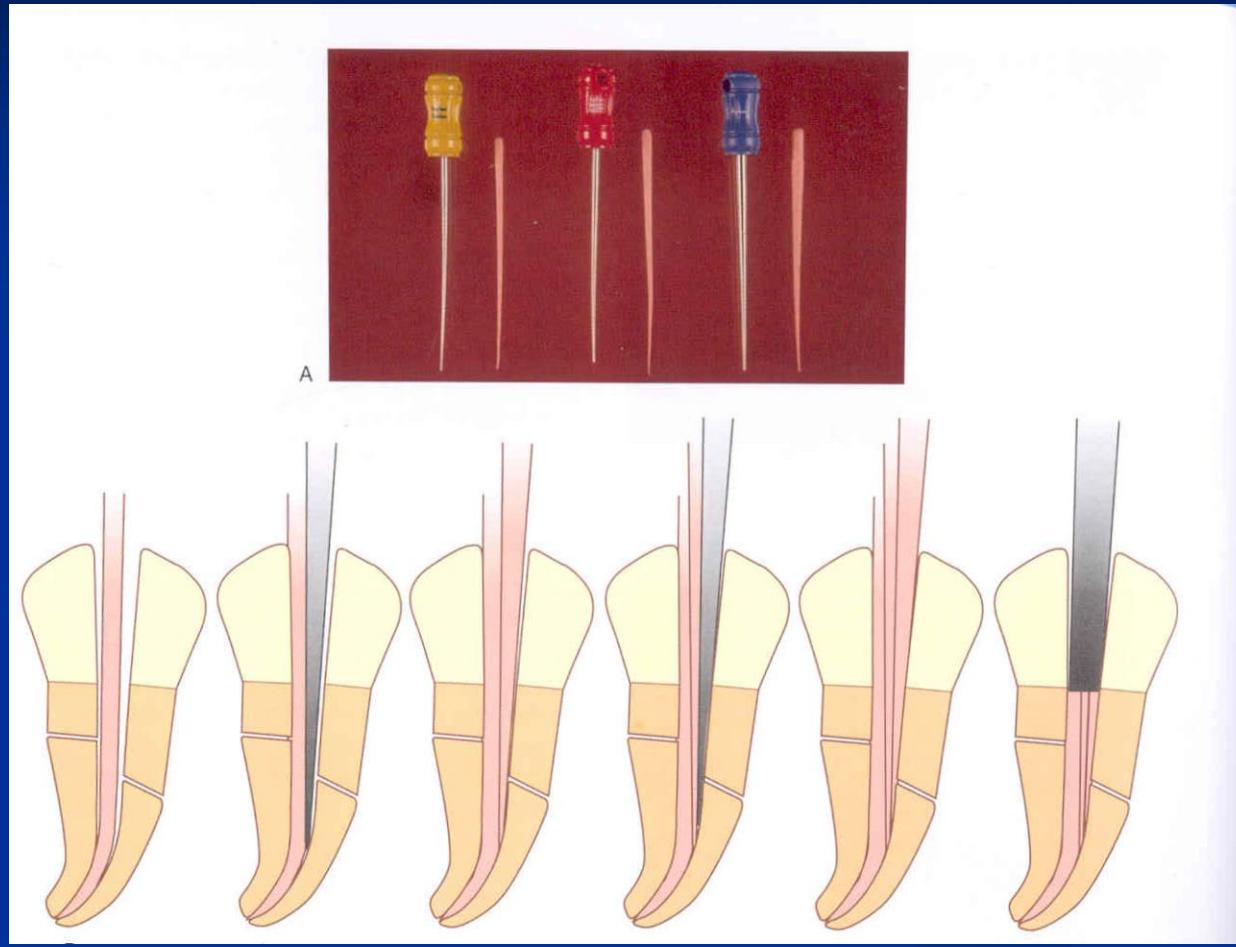


Shrinkage, difficult removal



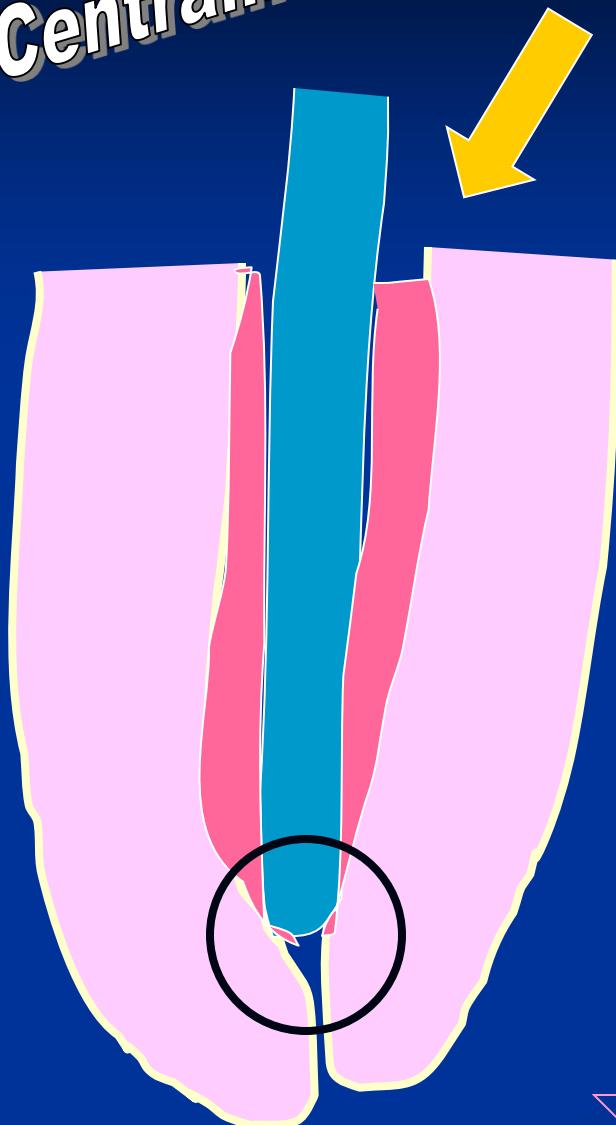
Warm lateral condensation



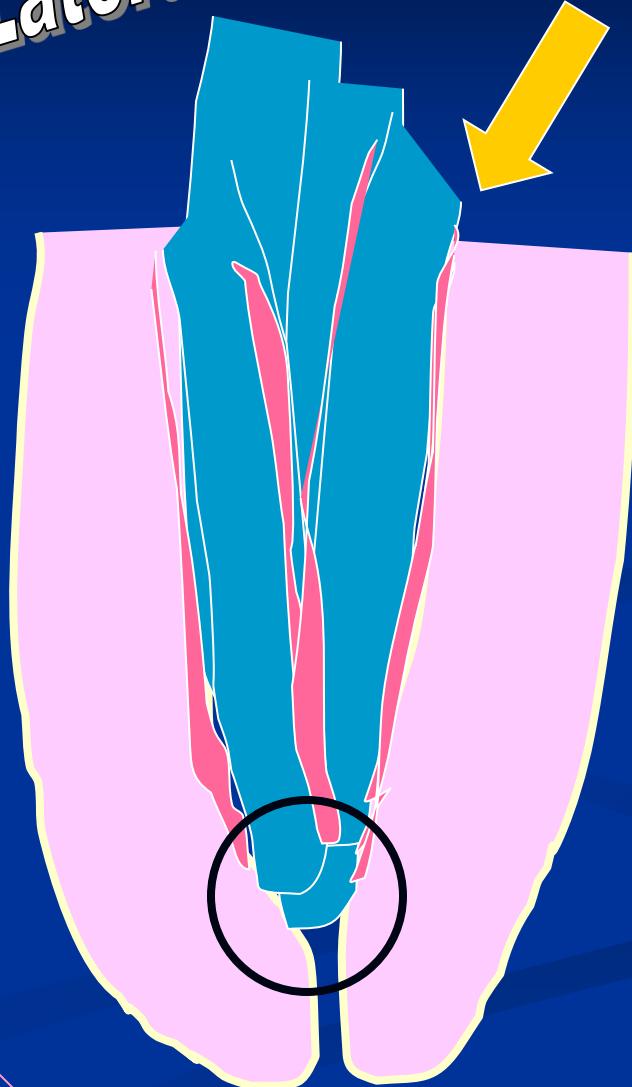




Centrální čep

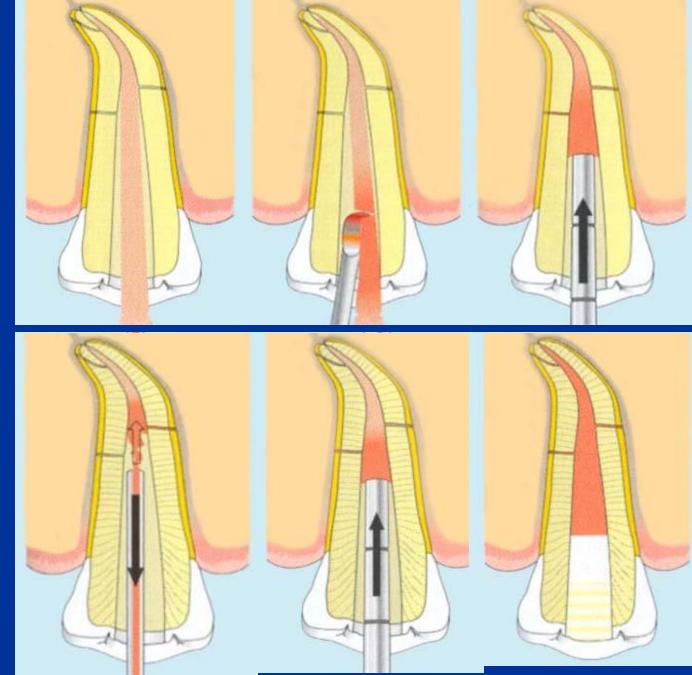


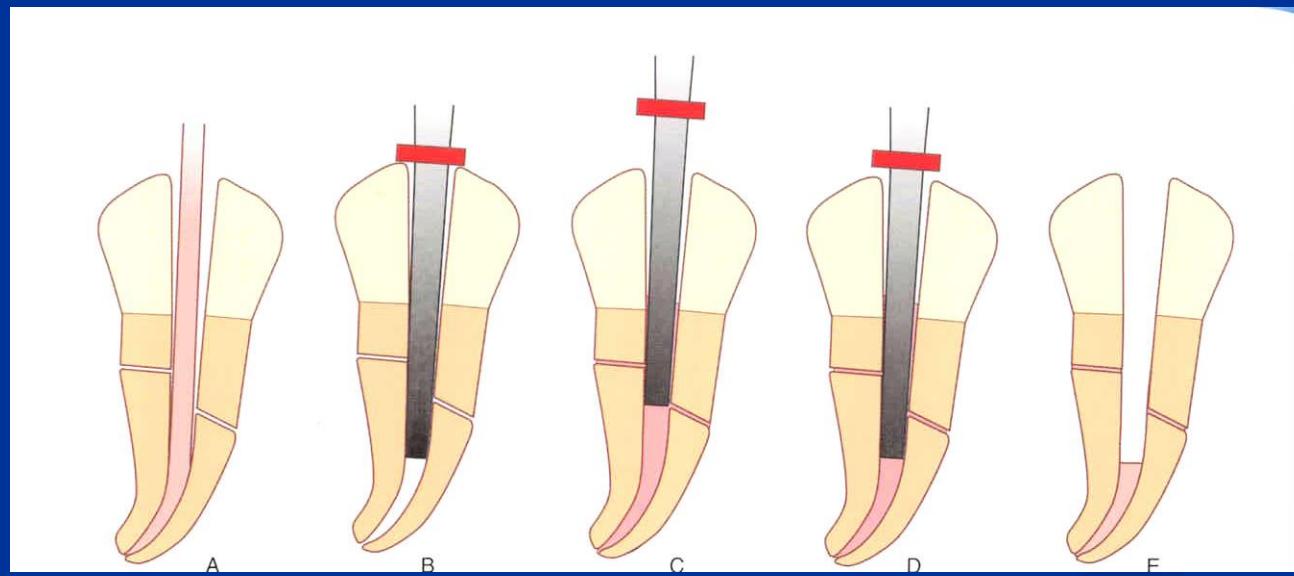
Laterální kondenzace



Vertical condensation

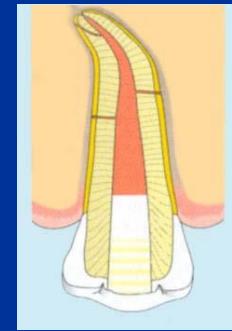
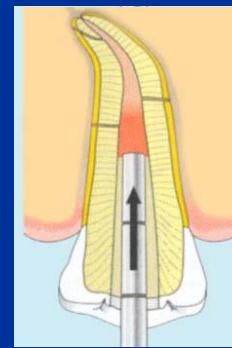
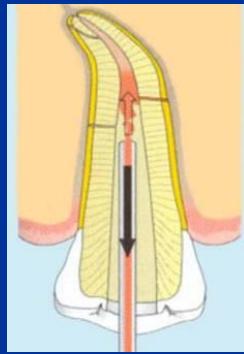
- Risk of overfilling
- Warm

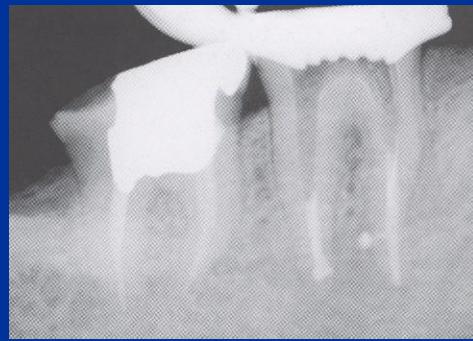
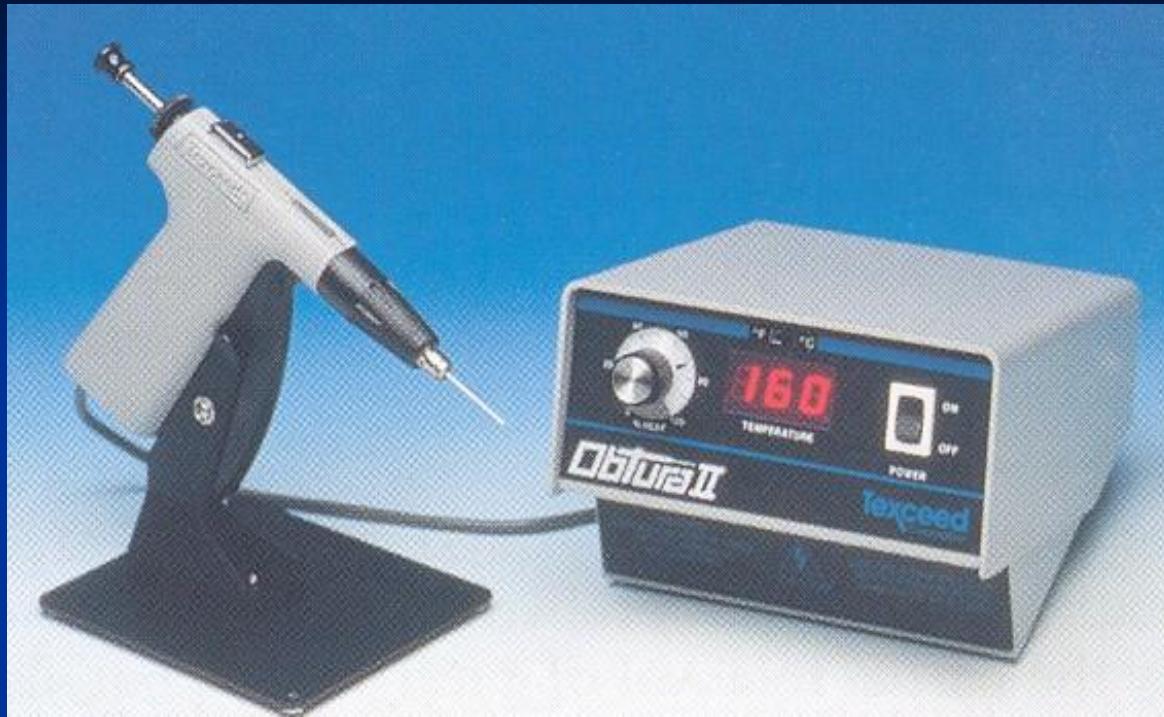


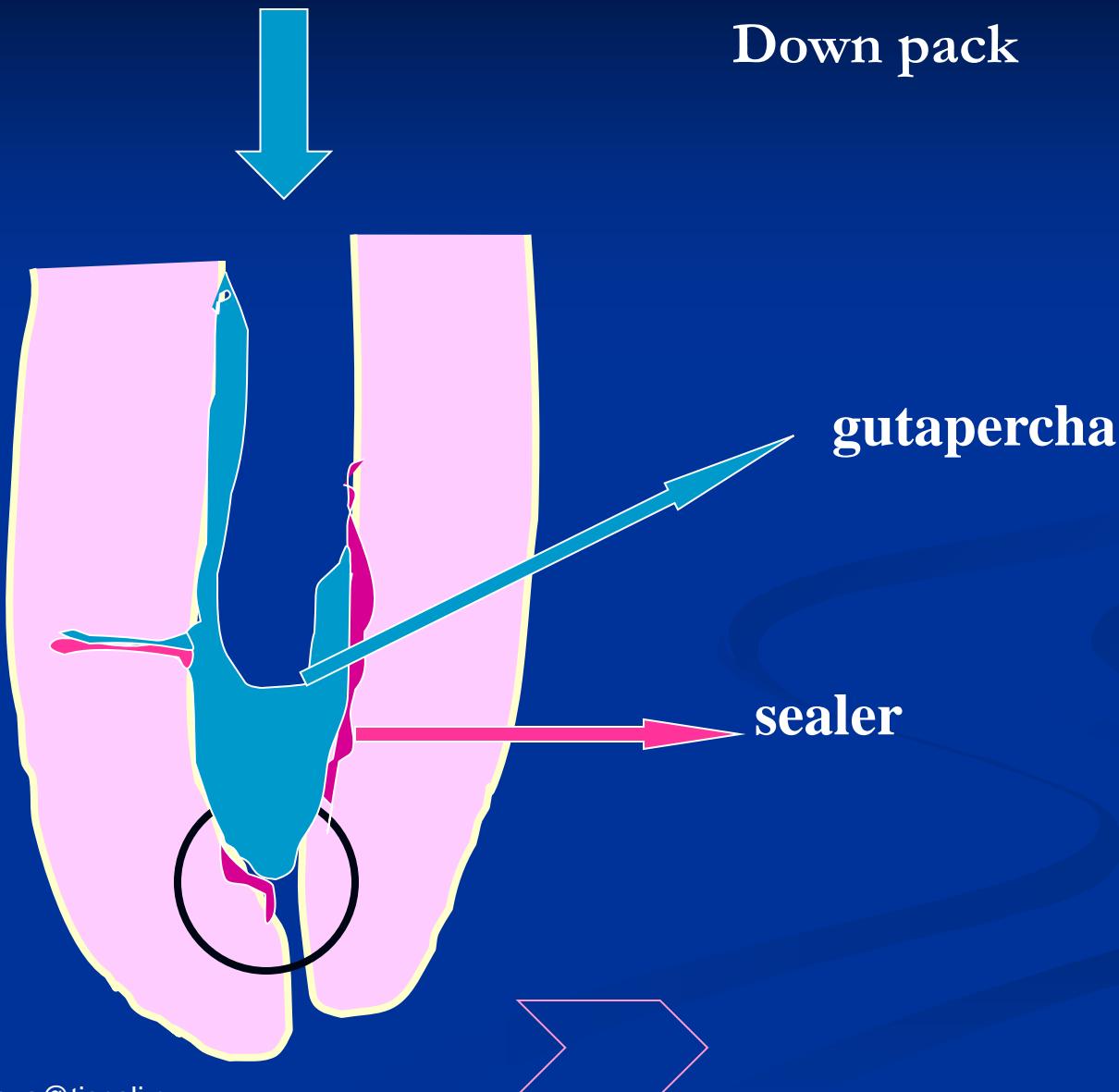


Injection of heated guttapercha

- Fast
- Risk of overfilling
- Warm



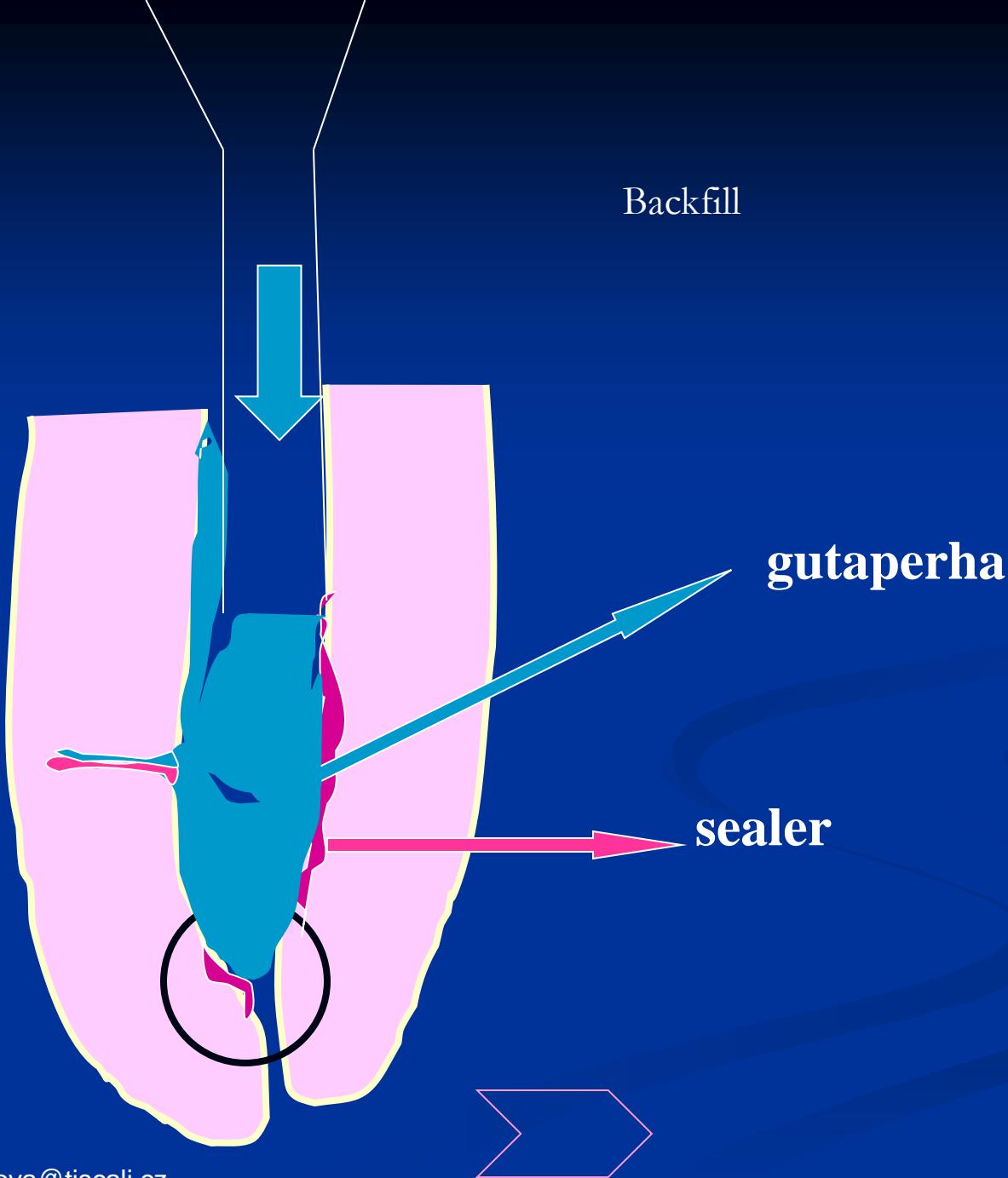


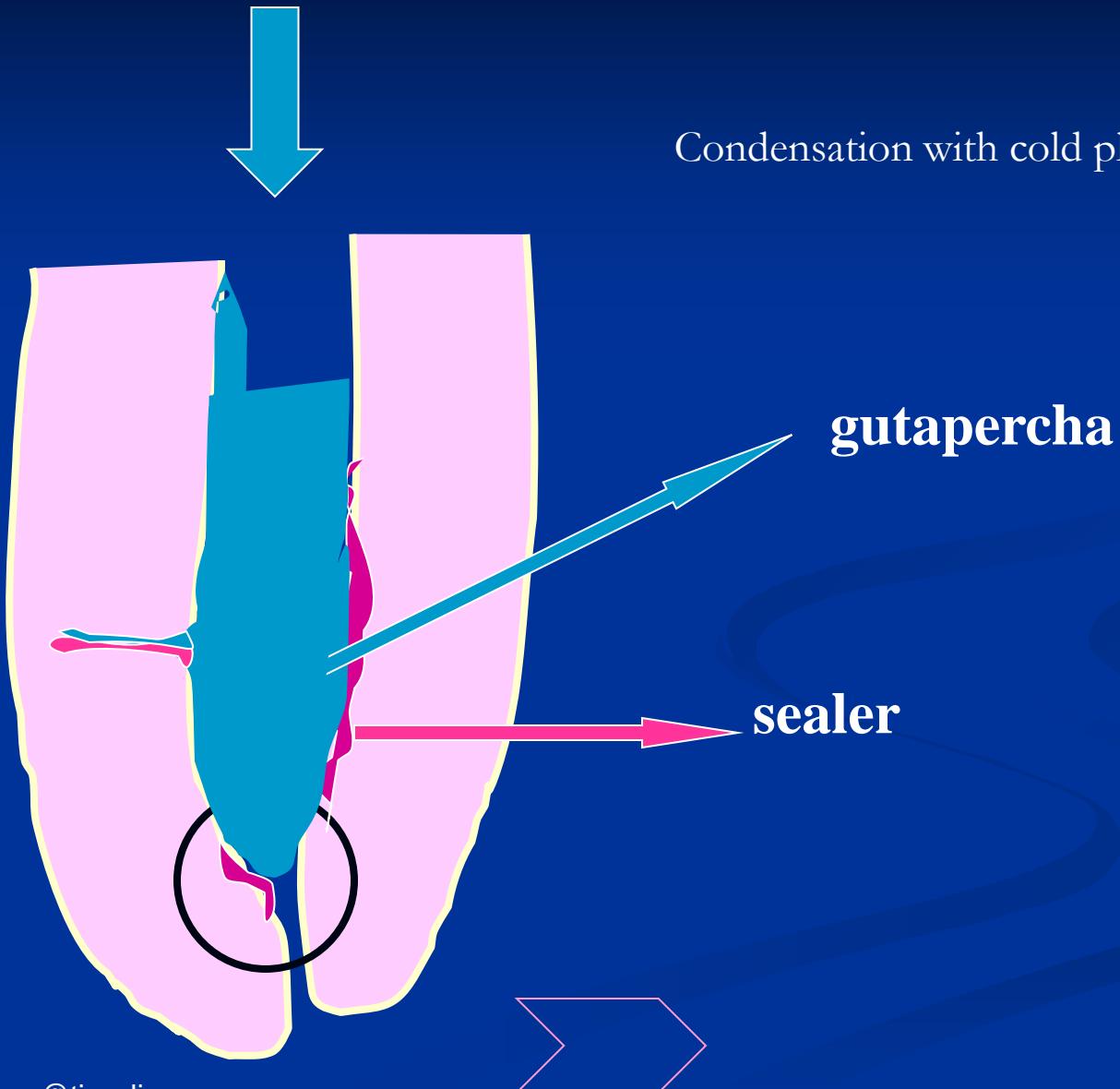


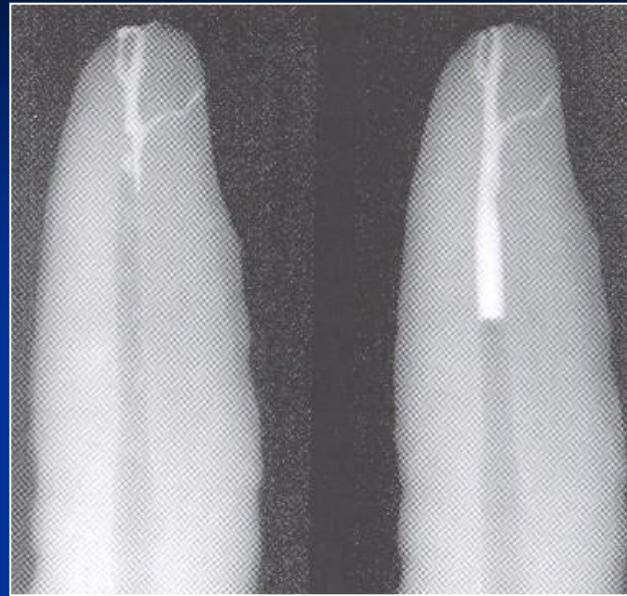
Down pack

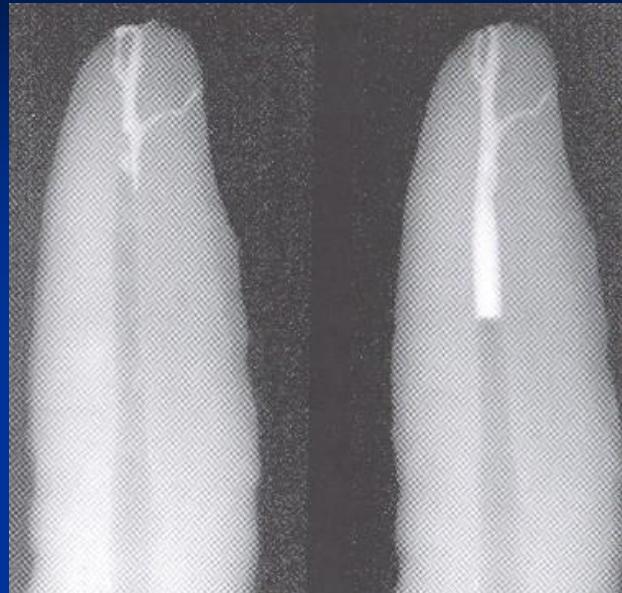
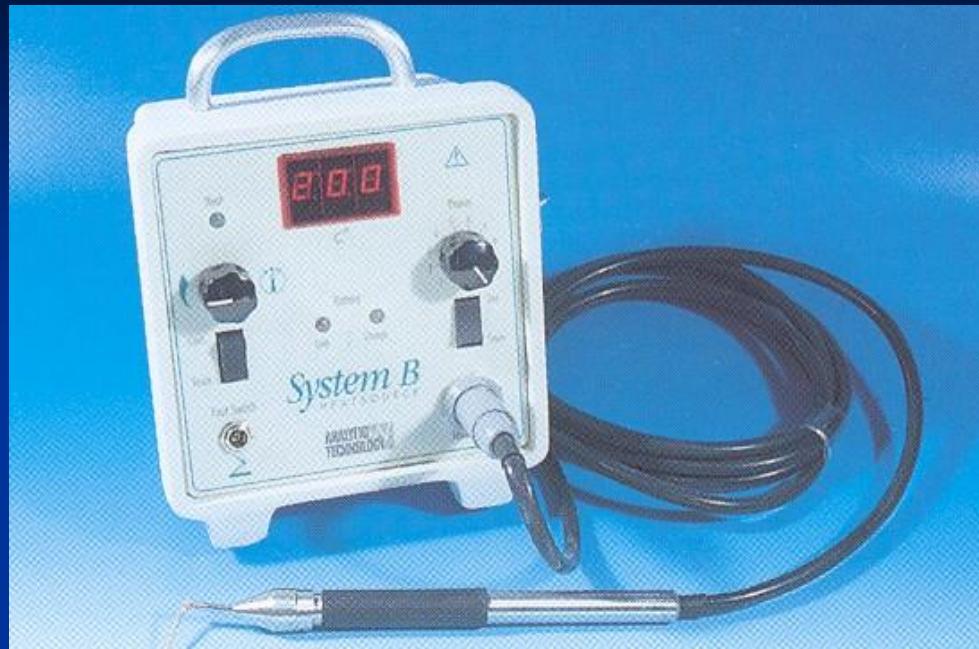
gutapercha

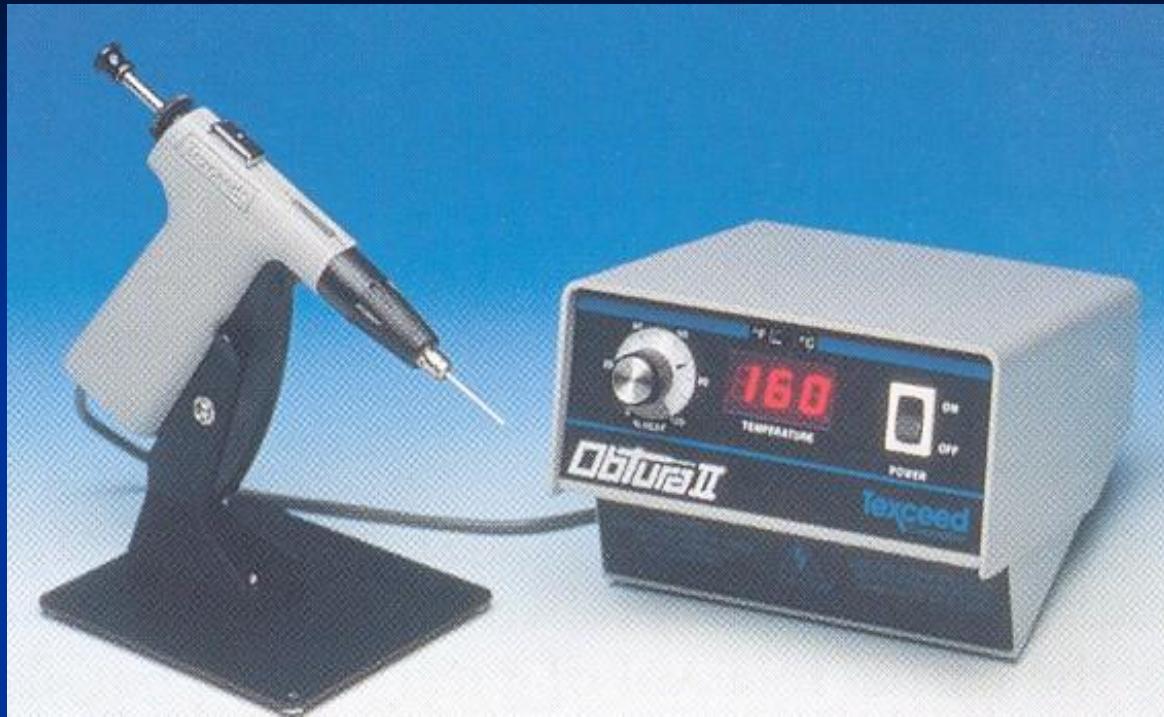
sealer











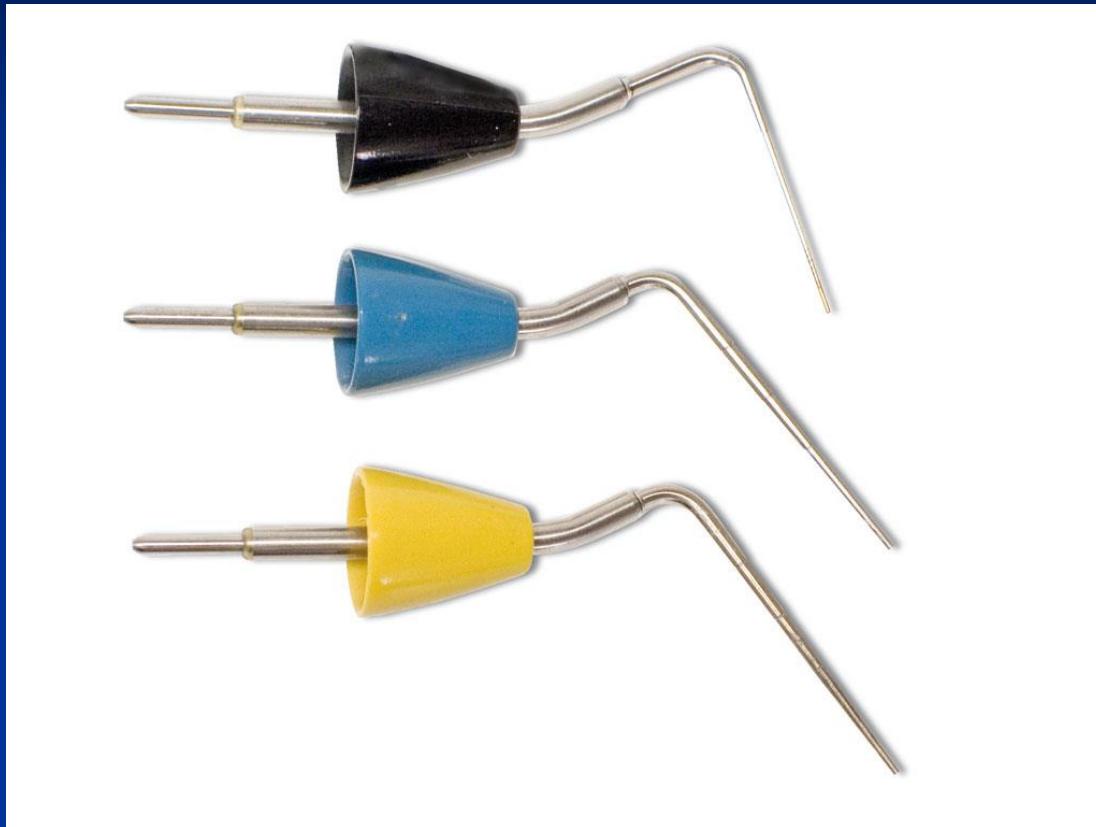




BeeFill



Pluggery



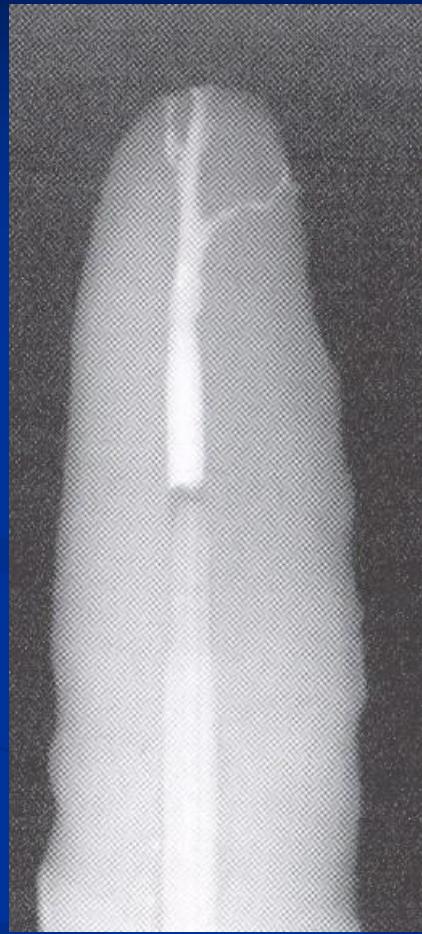
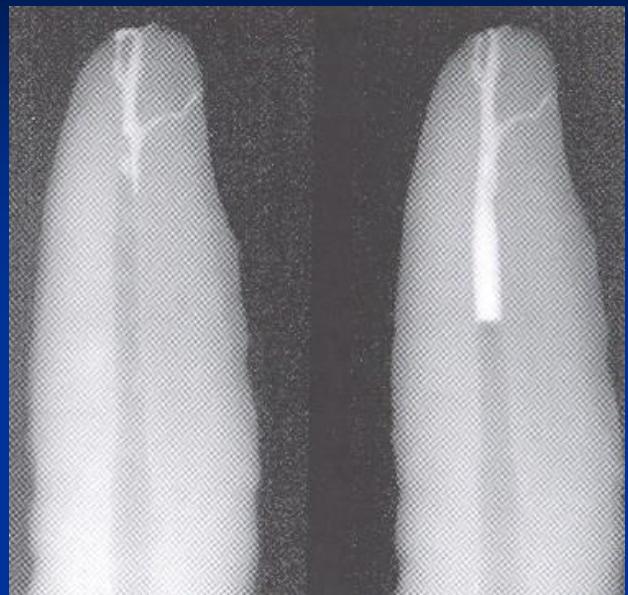
ISO 40/.03 standard

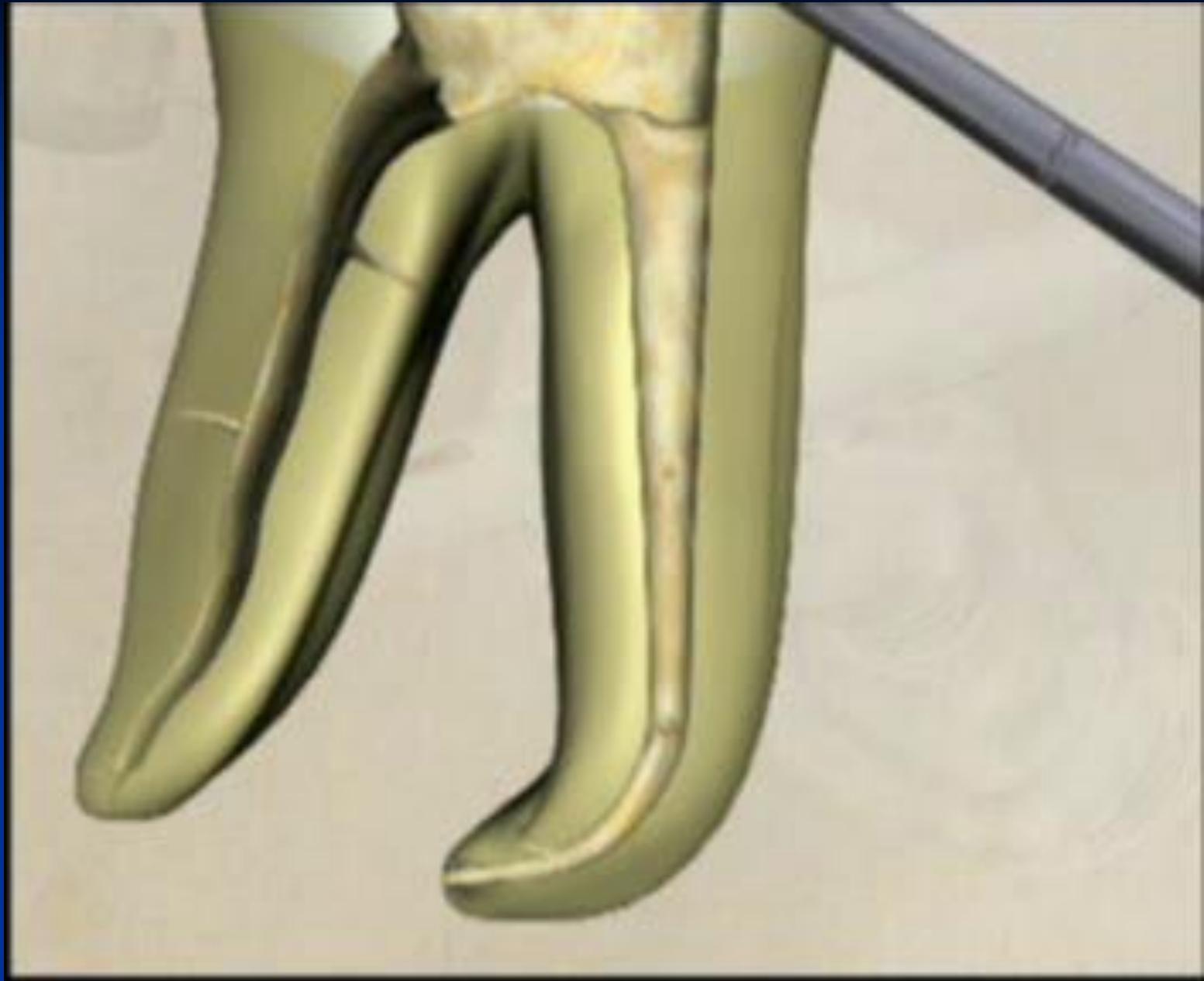
ISO 60/.06 soft

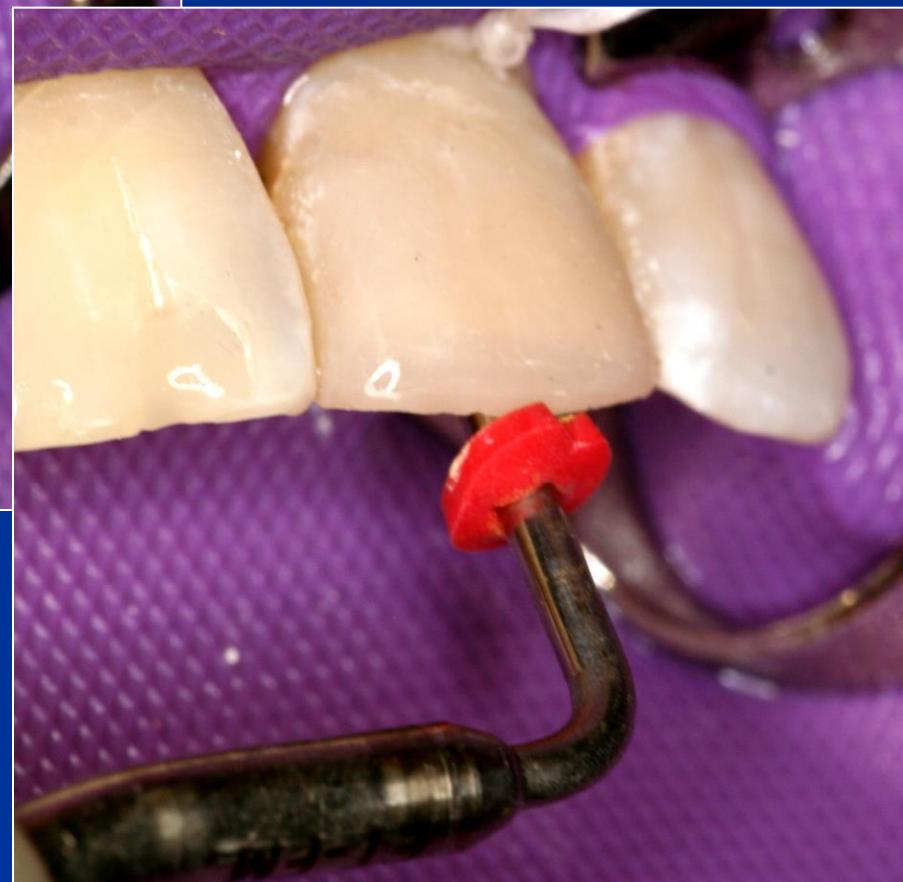
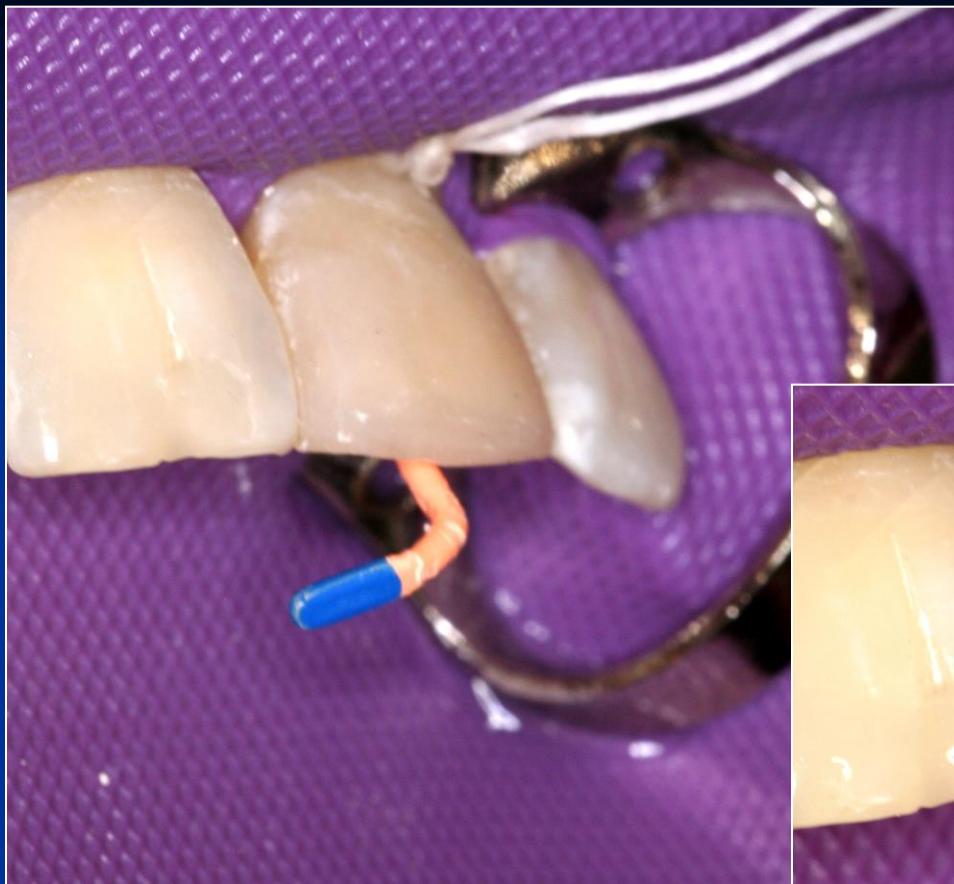
ISO 50/.05 soft





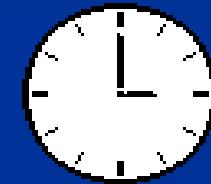
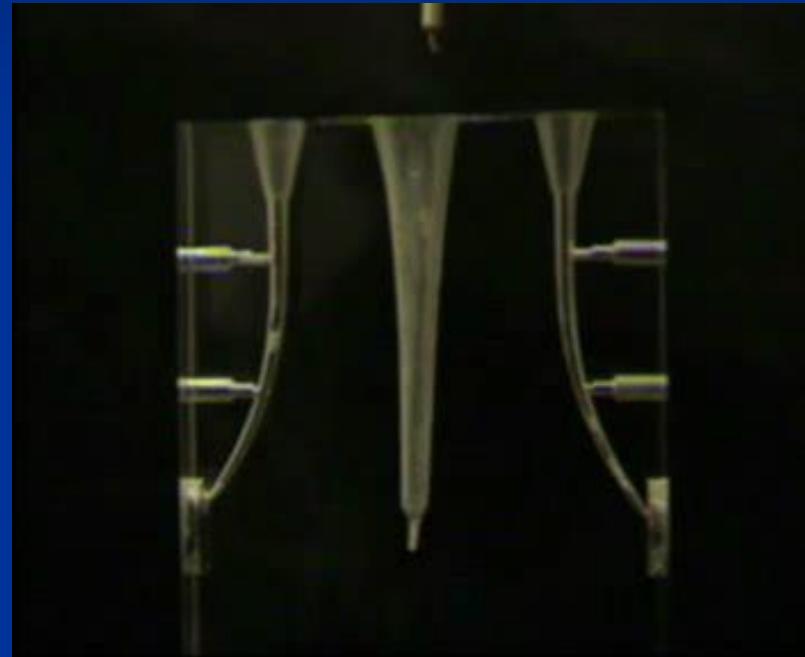






VIDEO UKÁZKA

Široké oválné rovné
kanálky

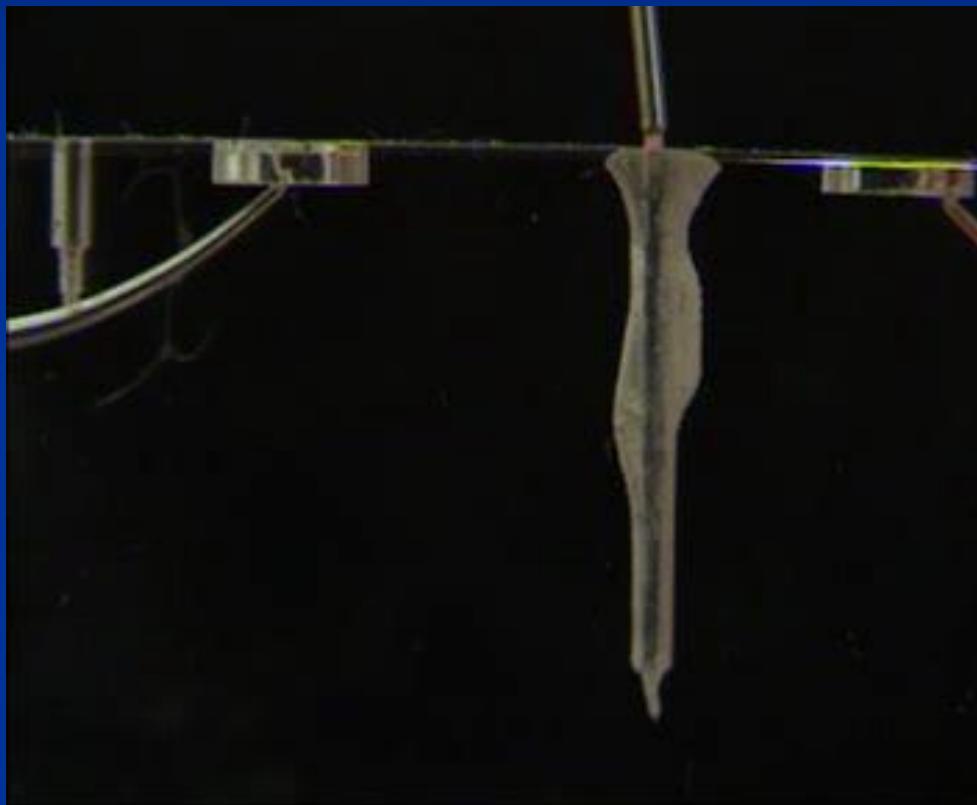


1,3 min.



VIDEO UKÁZKA

Rezorbované, nebo nepravidelně opracované
kanálky



Netěsnosti při plnění centrálním čepem, nebo při nedokonalé laterální kondenzaci.

V nezaplněných místech kanálku hrozí vznik a množení bakterií a mikroorganizmů což vede k zánětům atd.

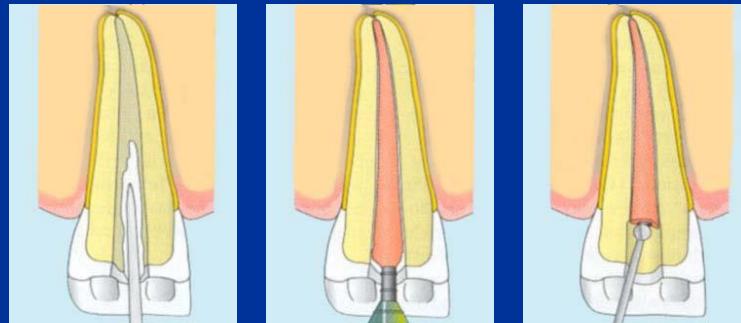




Perfektní hermetický uzávěr i u kanálků
s nepravidelným tvarem

Gutaperča na nosiči

- Rychlá technika
- Riziko extruze
- Možnost sesmeknutí gutaperči z nosiče
- Teplo
- Obtížné odstranění



Termafilová technika

