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Restorative dentistry 3rd year Lecture 1

L. Roubalíková

Preparation of dental caries (cavity preparation)

>Instrumental treatment that removes dental caries

- > The rest of the tooth must be restorable with filling materials
- The rest of the tooth as well as the filling must be resistant against occlusal forces
- The risk of secondary caries must be minimized

Step by step procedure

Acces to the cavity

Preparation of cavosurface margin and

Extention for prevention

Retention of the filling

Resistance of the restored tooth

Excavation of carious dentin

Finishing of the walls

Final control (light, mirror, magnification)

Acces to the cavity

Preparation through the hard dental tissues Removal the undermined enamel Separation of teeth

Separation or removal of gingiva













Old filling is being removed



Preparation of cavity borders and <u>extention</u> for prevention (Cavosurface margin)

Depends on Dental material Oral hygiene

Precautions of secondary caries



<u>Retention</u> of the filling

Precautions of its lost Macromechanical retention Micromechanical retention Chemical retention

<u>Resistance</u> of the restored tooth

Against occlusal and other forces

Depends on

- Material
- Individual occlusal forces

Excavation of carious dentin

Necessary (risk of recurrent caries)

Ball shaped (spheric) bur - slow speed (3000 rpm) or

Excavator (hand instrument)

 $M \vdash D$

Finishing of the walls

Depends on the kind of material

- Bevel or without bevel
- Fine diamond bur

Final control

Direct or indirect view

Good illumination

Magnification

Preparation

• Hand

Excavator, cleaver

Power driven

Burs, diamonds

Chisel – for enamel Cleaver



Chisel for enamel



Excavator



Instruments for cavity preparation

Power driven (powered) instruments for cutting

- Rotary instruments

Comon design characteristics



lenka.roubalikova@tiscali.cz

Cutting instruments - burs

Steel

Tungsten carbide



Fissure with flat end





Inverted conus é Round Inverted Pear-Straight Tapered cone shaped fissure fissure

Cutting instruments – diamonds

Extra coarse – black

Coarse – green

Standard – blue or without any marker

Fine - red

Extra fine - yellow

Ultrafine - white

Cutting instruments – diamonds head shape

• Ball, pear, cylinder, taper, flame, torpedo, lens and others.....



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Hazards with cutting instruments

Pulpal precautions

- Soft tissue precautions
- Eye precautions
- Ear precautions
- Inhalation precautions

Filling materials

• Temporary

• Definitive, permanent

Temporary filling materials

- Zinkoxidsulphate cement and one component derivates
- Ziknoxidphosphate cement
- Zinkoxideugenol cement
- Polymer based materials
- Guttapercha

Permanent filling materials

Amalgam

Composites

Glasionomers

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Amalgam

Amalgam

Metal-like restorative material composed of silver-tin-copper alloy and mercury.

Types of amalgam restorative materials

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Low – Copper Amalgam (5% or less copper)

Composition – wt%

Silver	63 - 70 %
Tin	26 – 28 %
Copper	2 - 5%
Zinc	0 - 2%

Types of amalgam restorative materials

<u>High – Copper Amalgam (13% - 30%)</u> <u>copper</u> Composition – wt%

Silver	40 - 70 %
Tin	26 – 30 %
Copper	2 - 30%
Zinc	0 - 2%
Particles of the alloy

✓ Irregulary shaped (filings - lathe cut)

✓ Microsphers

✓ Combination of the two.

Particles shape

<u>High – Copper Amalgam</u>

Microsphers of the same composition (unicompositional)

Mixture of irregular and spherical particles of different or the same composition (admixed)

Production of irregular particles

Metal ingrediences heated, protected from oxidation, melted and poured into a mold to form an ingot. Phases of the alloy: (intermetallic compounds) $Ag_3Sn - \gamma$ Cu₃Sn - ε $Cu_6Sn_5 - \eta$

 $Ag_4Sn - \beta$

Production of irregular particles

cooled slowly

Ingot heated at 400°C (6 – 8 hours) (homogeneous distribution of Ag_3Sn)

Ingot cut on the lathe, particles passed trough a fine sieve and ball milled to form the proper particle size.

Aging of particles (60 - 100° C, 6 - 8 hours)

Particle size: $60 - 120 \mu m$ in length $10 - 70 \mu m$ in width $10 - 35 \mu m$ in thickness

Production of irregular particles

Molten alloy is spraying into water under

high pressue



Production of spherical particles

Molten alloy is spraying under high pressue of inert gas through a fine crack in a crucible into a large chamber

Diameter of the spheres: $2 - 43 \mu m$

alloy is mixed with pure mercury



Trituration

Intermetallic compounds





Setting of low copper amalgam

Principle of setting is crystallization Structure of the amalgam filling Ag-Hg: gamma 1 Sn-Hg: gamma 2 These phases crystallized –

become hard

Gamma phase (Ag-Sn) does not dissolve completely – remains in the structure

Risks of the gamma 2 phase

- Non stable
- Tin is released due to electrogalvanism in oral cavity and mercury from this phase reacts with remaining gamma phase.
- This is external electrochemical corrosion.

Low copper amalgam has worse mechanical and corrosion resistance than high copper amalgam

High copper amalgam

Content of copper increased: 12 – 13%
(Less tin)

• Or up to 25% (Less tin and silver)

Better mechanical and corrosion resistance



Gamma two disapears or it does not occur when content of copper is high

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Amalgam - properties

Amalgam

- Wear and pressure resistance (2mm thickness ast least)- brittleness
- Easy handling
- Low price
- > Thermal and electrical conductivity
- Corrosion
- Bad aesthetics
- > Flow (deformation of not completely set amalgam if the filling is loaded)
- Creep completely set amalgam can be deformed due to bite forces. The filimng is principly hammered.

Biocompatibility

- More than 160 years, more than 200 milions Ag fillings every year in USA.
- Allergy rare
- Precautions in children and in pregnancy.

AMALGAM IS STILL A MATERIAL OF CHOICE

Toxicity

 $M \in D$

- Organic compounds
- Vapours, aerosol

Precautions

- Ventilation
- Rests of amalgam in water
- Amalgam separators
- Dangerous waste (180 110)

Amalgam indications

- Posterior area
- I. a II. class : moderate or large cavities,
- V. class

Other factores for consideration

When oral hygiene is not excellent

When patient wants low cost filling.

Indications and contraindications of amalgam

Indications

Moderate and large cavities in posterior area (class I., II. V)

Contraindications

Fillings in frontal area

Pregnancy, children till the age of 15

Allergy

Other factores for consideration When oral hygiene is not excellent When patient wants low cost filling.

Mixing of amalgam

Hand mixing (obsolete)

Power driven trituration



Amalgamators









Power driven condensation

handpiece condensor





Preparation instruments

➢ Filling instruments



> Burnishers

Preparation instruments - power driven

Burs

Diamonds





Preparation instruments - hand



Amalgam carrier



Amalgam carrier



Filling instruments condensors and spatulas

Condensor with flat front



Condensor with flat front



Condensor and burnisher - spatula combined





Burnisher - spatula Angular- trough edge trough face



Burnisher – spatula, angular three face





Ball condensor – used as a burnisher at most

