The effect of disinfectants on dimensional stability of addition and condensation silicone impressions

U. Varalakshmi¹, D. Sudha Madhuri², Siddharth Swarup³, Udayagiri Madhusudhana Rao⁴,
Dharam Hinduja⁵, Sunke Anuradha⁶

¹Associate Professor, Department of Prosthodontics Govt.Dental college & Hospital, Vijayawada

²Professor & HOD, Department Of Prosthodontics, Government Dental College And Hospital Kadapa

³Dr.D.Y. Patil Dental College and Hospital, Dr. D.Y.Patil Vidyapeeth, Pimpri, Pune.

⁴Assistant Professor, Dept of Prosthodontics, Govt. Dental College and Hospital, Kadapa

⁵MDS DNB, Prof, Dayanand Sagar College of Dental Sciences

⁶3rd year Post Graduate student, Department of Prosthodontics, Government Dental College and Hospital, Kadapa, Andhra Pradesh

Corresponding author

Dr. U. Varalakshmi, Associate Professor, Department of Prosthodontics Govt. Dental college & Hospital, Vijayawada

Abstract

Background: To study the effect of disinfectants on dimensional stability of addition and condensation silicone impressions.

Materials & methods: A total of 60 samples were enrolled. The 30 samples were of addition silicone and 30 of condensation silicone. The data was collected. A statistical analysis via a three-way mixed ANOVA was performed. The results were analysed using SPSS software.

Results: There was a statistically significant simple two-way interaction of material and groups at the T1 level (p = .02), but not at the T0 level (p = .8). That interaction arises from the statistically significant differences between the control groups of the two materials (p = 0.05).

Conclusion: The dimensional changes of all the samples were significant.

Keywords: Impressions, Addition silicone, Disinfectants.

Introduction

Impression materials are presently still a relevant material for use in restorative dentistry. ¹⁻³ Impressions are used to transfer the information from the patient's mouth to a stone analog cast, which can aid in making a diagnosis and a correct treatment plan, critical to the success of final

prosthetic restoration. ⁴ The impression material selected by the dentist must provide good dimensional stability and precision in detail reproduction. The material should not suffer changes during the disinfection or sterilization processes and should allow adequate storage stability over time.⁵

Contamination of dental impressions with saliva and blood from the oral cavity occurs readily in dental clinics. Direct interaction between dental clinics and dental laboratories makes contaminated dental impressions difficult items to deal with from the cross infection point of view. Previous reports indicated that contaminated impressions can cross-infect gypsum casts that were poured against them.⁶ Until 1991, rinsing impressions under running water was the recommended practice. ⁷ Guidelines for infection control in dental health care suggested that all dental prostheses and prosthodontic items should be cleaned, disinfected, and rinsed before they are handled in the laboratory using an active hospital disinfectant. 8 Materials selected for dental impressions can significantly influence the accuracy and precision of the impression and, consequently, of the final result. Although both rigid (impression plaster and zinc oxide-eugenol) and elastic materials (agar, alginate, polyether, condensation silicone (C-silicone), addition silicone (A-silicone), and polysulfide) have been widely used for creating dental impressions, elastic ones are often preferred. Nowadays, sodium alginate is used as the basic material for taking impressions before the preparation of diagnostic gypsum casts, individual trays, orthodontic appliances, and splints. However, sodium alginate-based impressions are not recommended for more precise applications because they exhibit dimensional instability as they absorb water and swell, and they also constrict due to syneresis. 9 Dental works of the best quality can be achieved using casts made from elastomeric impressions. 10 Silicones are often preferred by dentists as they are characterized by high flexibility and recovery during removal from the oral cavity, as well as the ability to be poured up to 1 week with only slight changes in their dimensional stability, estimated at 0.3%. ¹¹ Hence, this study was conducted to study the effect of disinfectants on dimensional stability of addition and condensation silicone impressions.

Materials & methods

A total of 60 samples were enrolled. The 30 samples were of addition silicone and 30 of condensation silicone. The samples of each material were split to form three groups with 20 samples each: a control group, a hypochlorite group (disinfection) and an autoclave group (sterilization). Samples were stored for six months at 23 °C. The data was collected. A statistical analysis via a three-way mixed ANOVA was performed. The results were analysed using SPSS software.

Results

At T0, the autoclave group has the highest average dimensional change (0.36 for condensation silicone and 0.36 for addition silicones) and the control group has the lowest average dimensional change (0.10 for addition silicone and 0.15 for condensation silicone). There was a statistically significant simple two-way interaction of material and groups at the T1 level (p = .02), but not at the T0 level (p = .8). That interaction arises from the statistically significant differences between the control groups of the two materials (p = 0.05).

Table 1: Descriptive and three-way ANOVA analysis between the three variables

	T0	T1	Shrinkage	P- value
Addition silicone				
Control	0.10	0.48	0.40	0.05

Hypochlorite	0.15	0.51	0.32			
Autoclave	0.36	0.85	0.55			
Condensation silicone						
Control	0.15	0.92	0.68	0.05		
Hypochlorite	0.18	0.58	0.40			
Autoclave	0.36	0.80	0.51			
	0.8	0.02				

Discussion

Many studies have evaluated the effect of various disinfectants and methods of disinfecting impression materials, but the results of those studies varied widely. The role of a disinfectant should, ideally, be of a dual purpose, it must be an effective antimicrobial agent, yet cause no adverse response to the dimensional accuracy and surface features of the impression material and the resultant gypsum cast. ¹² The dimensional stability of disinfected impressions had been a subject of investigation by many researchers who used a variety of approaches. Some studies used full arch casts while others studied the effects on a die. ^{13,14} The measuring technique used in determining dimensional changes after disinfection also varied from using a Boley gauge, to the use of measuring microscope. ¹⁵ Hence, this study was conducted to study the effect of disinfectants on dimensional stability of addition and condensation silicone impressions.

In the present study, at T0, the autoclave group has the highest average dimensional change (0.36 for condensation silicone and 0.36 for addition silicones) and the control group has the lowest average dimensional change (0.10 for addition silicone and 0.15 for condensation silicone). A study by Sinobad T et al, a total of 120 impressions were made on the model of the upper arch representing three full metal-ceramic crown preparations. Four impression materials were used: two condensation silicones (Oranwash L - Zhermack and Xantopren L Blue - Heraeus Kulzer) and two addition silicones (Elite H-D + regular body - Zhermack and Flexitime correct flow - Heraeus Kulzer). After removal from the model the impressions were immediatel immersed in appropriate disinfectant (glutaraldehyde, benzalkonium chloride - Sterigum and 5.25% NaOC1) for a period of 10 min. The dimensional changes of all the samples were significant both as a function of time and the applied disinfectant. The results show significant differences of the obtained dimensional changes between the group of condensation silicones and the group of addition silicones for the same time, and the same applied disinfectant (p = 0.026, F = 3.95). 16

In the present study, there was a statistically significant simple two-way interaction of material and groups at the T1 level (p = .02), but not at the T0 level (p = .8). That interaction arises from the statistically significant differences between the control groups of the two materials (p=0.05). Another study by Martins F et al, ninety samples were obtained from polyether ImpregumTM PentaTM (3M ESPETM, Seefeld, Germany) and 90 of addition silicone ImprintTM 4 PentaTM Putty (3M ESPETM, Seefeld, Germany). The samples of each material were split to form three groups with 30 samples each: a control group, a hypochlorite group (disinfection) and an autoclave group (sterilization). Samples were stored in the Portuguese Institute for Quality for six months at 23 °C. Significant shrinkage of ImpregumTM PentaTM was $0.77 \pm 0.17\%$ in the control group, $0.42 \pm 0.19\%$ in the hypochlorite group and $0.52 \pm 0.28\%$ in the autoclave group. For ImprintTM 4 PentaTM Putty, the control group had a shrinkage of $0.42 \pm 0.12\%$, the hypochlorite group $0.36 \pm 0.09\%$ and the autoclave group $0.59 \pm 0.13\%$. Unlike disinfection, sterilization is a procedure that guarantees the elimination of all microorganisms. ¹⁸ There is no universally accepted method of sterilization, but the literature

suggests that the autoclave is considered the most effective method, ¹⁹ although its effects on the dimensional stability of the elastomeric impression materials are not sufficiently described in the literature. ²⁰ After disinfection or sterilization, the impressions are cast in stone. The dimensional stability of the impression materials depends on the time elapsed between the completion of the impression and their casting, thus storage time is critical to obtain reliable casts. ²¹ Apart from good dimensional stability, the ideal impression material should meet other criteria, such as appropriate setting time, flow properties, mechanical strength, accuracy, compatibility with cast materials, safety, ease of manipulation, low cost, and disinfectability. Depending on the application, materials with optimal properties are selected. The analysis of the properties of a dental impression material cannot be limited to the properties of the material itself, in its native form, but must also take into account the impact of time, as well as storage and disinfection conditions, on the material characteristics. Dental impressions must be disinfected in order to limit the risk of cross-contamination and ensure the safety of both patients and dental personnel. Because dental impressions are placed in the oral cavity, where they will be exposed to saliva and blood, and as a result potentially contaminated with pathogens (e.g., streptococci, staphylococci, Escherichia coli, Mycobacterium tuberculosis, hepatitis C virus, and Herpes simplex virus, Candida albicans), 22-24 it is important to disinfect them to prevent the transmission of infectious agents between dental offices and laboratories. ²⁵

Conclusion

The dimensional changes of all the samples were significant.

References

- 1. Rubel BS. Impression materials: a comparative review of impression materials most commonly used in restorative dentistry. Dent Clin N Am. 2007;51:629–642.
- 2. Pant R, Juszczyk AS, Clark RKF, et al.. Long-term dimensional stability and reproduction of surface detail of four polyvinyl siloxane duplicating materials. J Dent. 2008;36:456–461.
- 3. Kumar RN, Reddy SM, Karthigeyan S, et al.. The effect of repeated immersion of gypsum cast in sodium hypochlorite and glutaraldehyde on its physical properties: an in vitro study. J Pharm Bioall Sci. 2012;4:353–357.
- 4. Hamalian TA, Nasr E, Chidiac JJ.. Impression materials in fixed prosthodontics: influence of choice on clinical procedure. J Prosthodont. 2011;20:153–160.
- 5. Nassar U, Oko A, Adeeb S, et al.. An in vitro study on the dimensional stability of a vinyl polyether silicone impression material over a prolonged storage period. J Prosthet Dent. 2013;109:172–178.
- 6. Leung RL, Schonfeld SE. Gypsum casts as a potential source of microbial cross-contamination. J Prosthet Dent. 1983;49(2):210–211.
- 7. Fabiani L, Mosca G, Giuliani AR. Hygiene in dental practices. Eur J Paediatr Dent. 2006;7(2):93–97.
- 8. Infection control recommendations for the dental office and the dental laboratory. ADA Council on Scientific Affairs and ADA Council on Dental Practice. J Am Dent Assoc. 1996;127(5):672–680.
- 9. Vrbova R., Bradna P., Bartos M., Roubickova A. The effect of disinfectants on the accuracy, quality and surface structure of impression materials and gypsum casts: A comparative study using light microscopy, scanning electron microscopy and micro computed tomography. Dent. Mater. J. 2020;39:500–508.

- Jayaraman S., Singh B.P., Ramanathan B., Pazhaniappan Pillai M., MacDonald L.K.R. Finalimpression techniques and materials for making complete and removable partial dentures. Cochrane Database Syst. Rev. 2018;2018:CD012256.
- 11. Gupta M., George V.T., Balakrishnan D. A comparative evaluation of tear strength and tensile strength of autoclavable and non-autoclavable vinylpolysiloxane impression material: An in vitro study. J. Int. Oral Health. 2020;12:153–157.
- 12. Taylor RL, Wright PS, Maryan C. Disinfection procedures: their effect on the dimensional accuracy and surface quality of irreversible hydrocolloid impression materials and gypsum casts. Dent Mater. 2002;18(2):103–110
- 13. Merchant VA, McNeight MK, Ciborowski CJ, Molinari JA. Preliminary investigation of a method for disinfection of dental impressions. J Prosthet Dent. 1984;52(6):877–879.
- 14. Palenik CJ, Miller CH. Treating highly infectious patients in the dental office. J Indiana Dent Assoc. 1985;64(5):11–15.
- 15. al-Omari WM, Jones JC, Wood DJ. The effect of disinfecting alginate and addition cured silicone rubber impression materials on the physical properties of impressions and resultant casts. Eur J Prosthodont Restor Dent. 1998;6(3):103–110.
- Sinobad T, Obradović-Djuricić K, Nikolić Z, Dodić S, Lazić V, Sinobad V, Jesenko-Rokvić A. The effect of disinfectants on dimensional stability of addition and condensation silicone impressions. Vojnosanit Pregl. 2014 Mar;71(3):251-8.
- 17. Martins F, Branco P, Reis J, Barbero Navarro I, Maurício P. Dimensional stability of two impression materials after a 6-month storage period. Acta Biomater Odontol Scand. 2017 Nov 14;3(1):84-91.
- 18. Abdelaziz KM, Hassan AM, Hodges JS.. Reproducibility of sterilized rubber impressions. Braz Dent J. 2004;15:209–213.
- 19. Vasconcellos FE, Andreiuolo RF, Sabrosa CE, et al.. Dimensional stability of casts obtained with polyether and addition silicone after disinfection with sodium hypochlorite and peracetic acid. Rev Bras Odontol. 2012;69:55–60.
- 20. Thota KK, Jasthi S, Ravuri R, et al.. A comparative evaluation of the dimensional stability of three different elastomeric impression materials after autoclaving an invitro study. J Clin Diagn Res. 2014;8:48–50.
- 21. Endo T, Finger WJ.. Dimensional accuracy of a new polyether impression material. Quintessence Int. 2006;37:47–51.
- 22. Azevedo M.J., Correia I., Portela A., Sampaio-Maia B. A simple and effective method for addition silicone impression disinfection. J. Adv. Prosthodont. 2019;11:155–161.
- 23. Al Mortadi N., Al-Khatib A., Alzoubi K.H., Khabour O.F. Disinfection of dental impressions: Knowledge and practice among dental technicians. Clin. Cosmet. Investig. Dent. 2019;11:103–108.
- 24. Mantena S.R., Mohd I., Sajjan S., Ramaraju A. Disinfection of Impression Materials: A Comprehensive Review of Disinfection. Int. J. Dent. Mater. 2019;1:7–16.
- 25. Adabo G.L., Zanarotti E., Fonseca R.G., Cruz C.A. Effect of disinfectant agents on dimensional stability of elastomeric impression materials. J. Prosthet. Dent. 1999;81:621–624.