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Influence of spreader and cone taper on the sealing effect of root canal with gutta—percha

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I. Objectives

The purpose of this study was to evaluate the influence of spreader and cone taper on the sealing effect of root canal with gutta-percha.

II. Materials and Methods

Sixty simulated root canals in clear resin blocks were used. Working lengths were established 0.5 mm short of the apical foramen. Coronal two-thirds of the canal were instrumented with rotary Ni-Ti ProTaper and apical one-third was instrumented with 0.06 taper #30 ProFile.

Prepared sixty resin blocks were randomly divided into 4 groups of 15 blocks: a group using stainless steel finger spreader and 0.02 taper gutta-percha cone (SS/0.02); a group using nickel-titanium finger spreader and 0.06 taper gutta-percha cone (NiTi/0.02); a group using stainless steel finger spreader and 0.06 taper gutta-percha cone (SS/0.06); a group using nickel-titanium finger spreader and 0.06 taper gutta-percha cone (NiTi/0.06). All canals were obturated with laterally condensed gutta-percha and AH 26 sealer. Type A accessory cones were added to all teeth until the finger spreader no longer penetrated deeper than the coronal one-third of the canal. To measure obturation efficiency, the number of accessory cones required to obturate teeth in all groups was recorded.

After resin blocks were stored at 37°C and 100% humidity for setting of the resin sealer, they were cross-sectioned with a microtome at 1.0, 3.0, and 5.0 mm levels from the apical foramen. The sections were immediately photographed under a stereomicroscope, and stored in a computer using a CCD camera and a commercial digitizing image program. The proportion of gutta-percha area to whole canal section were calculated at each level using Auto Cad 2000.

Statistical analysis for all data was performed by using two-way ANOVA and Duncan's multiple range test.

II. Results

Sealing quality

At 1 mm level, the mean ratio of the area of gutta-percha was $86.67\pm3.24\%$ for group SS/0.02, $91.86\pm2.87\%$ for group NiTi/0.02, $94.33\pm2.43\%$ for group SS/0.06, and $94.04\pm2.86\%$ for group NiTi/0.06. NiTi groups showed significantly higher gutta-percha area ratio than SS groups, and 0.06 gutta-percha groups showed significantly higher gutta-percha area ratio than 0.02 gutta-percha groups (p<0.05).

At 3mm level, the mean ratio of the area of gutta-percha was $81.55\pm7.18\%$ for group SS/0.02, $85.66\pm5.56\%$ for group NiTi/0.02, $93.35\pm7.42\%$ for group SS/0.06, and $95.54\pm1.57\%$ for group NiTi/0.06. NiTi groups showed significantly higher gutta-percha area ratio than SS groups, and 0.06 gutta-percha groups showed significantly higher gutta-percha area ratio than 0.02 gutta-percha groups (p(0.05)).

At 5 mm level, the mean ratio of the area of gutta-percha was $91.19\pm4.46\%$ for group SS/0.02, $86.48\pm5.04\%$ for group NiTi/0.02, $94.47\pm3.48\%$ for group SS/0.06, and $94.75\pm2.39\%$ for group NiTi/0.06. SS groups showed significantly higher gutta-percha area ratio than NiTi groups, and 0.06 gutta-percha groups showed significantly higher gutta-percha area ratio than 0.02 gutta-percha groups (p(0.05)).

Sealing efficiency

0.06 taper cone groups required significantly less number of accessory cones than 0.02 taper gutta-percha groups (p(0.05)). However there was no significant difference between SS and NiTi groups (p(0.05)).

IV. Conclusions

It is concluded that, when root canal is prepared with 0.06 tapered instruments, uses of 0.06 taper gutta-percha cones and NiTi spreader are recommended to improve sealing quality (gutta-percha area ratio) and obturation efficiency.