CONSERVATIVE DENTISTRY
use of CERKAMED dental materials

... because details are all-important
**Location of carious lesions**

Diagnosis of carious lesions may be difficult because of the complex structure and shape of a tooth. Spot lesion on free and smooth areas may be visually diagnosed by a dentist with extensive clinical experience. Red dye, rhodamine B, contained in the product RED DETECTOR is effective in localization of carious lesions. After removing all visible carious lesions apply one drop of the product on the defect area, wait 5-10 seconds and then irrigate and dry the defect. Red dye penetrates the tissues with carious lesions and dyes them red.

**Cavity preparation**

Soft tissues may be injured during the cavity treatment what causes the necessity of use the preparation for staunching the bleeding. Hemostatic preparations for oral use are usually used in case of slight gingival bleedings during caries treatment and its complications, in teeth before the restoration, in scaling and incision of the gum.

Usually those preparations contain aluminum chloride and can be used directly for staunching the bleeding or can be used together with retraction cords. Aluminum chloride effects vasoconstrictively on gingiva tissues, reduces liquid secretion from gingival pocket and closes of tight vessels as the result of protein coagulation in the surface layer of gingiva.

**ALUSTAT** contains 25% of aluminum chloride and is available not only as a liquid but also consistency of gel as ALUSTAT GEL and foam as ALUSTAT FOAM. Product should be applied on injured gingiva and after approximately 30 seconds rinsed with clean water.

**ALUSTAT** in liquid can be applied by means of cotton wool pledget soaked with solution (and also retraction cord). Product in gel (ALUSTAT GEL) or foam (ALUSTAT FOAM) is supplied with applicators by means of which product can be applied directly on the treatment spot or to gingival pocket.

Additionally **ALUSTAT FOAM** sooths the irritations thanks to the content of appropriately selected natural ingredients. Perfect absorption ensures effectiveness of staunching the bleedings and exudates, which have been completely absorbed without any clots. There is no need to keep pressure or rub the injured area so it does not cause additional gingiva irritation.
PROTECT LIGHT SEAL is a varnish recommended for treating hypersensitive dentine. Fluoride contained in the product improves demineralization and reinforces the resistance of enamel to an acid environment which stops the caries. It has a desensitisation effect on the dentine, contains mineral nano-filler which penetrates and reinforces the dentine, protecting it from cervical erosion.

The product does not require light curing, does not leave a film on the tooth surface and gives instant relief.

Apply the varnish on the clean and dry tooth surface and wait 30 seconds and next rinse. The patient can eat and drink immediately after the application.

Intended use of PROTECT LIGHT SEAL:
- Treatment and prevention of the dentine's hypersensitivity, especially in tooth cervical area
- Post-treatment hypersensitivity
- Prior to impression (for patients sensitive to cold)
- After scaling

Temporary cavity filling, direct and indirect pulp capping

Calcium hydroxide, introduced into biological treatment in 1920 by Herman, is widely used nowadays. This material is indicated for direct and indirect pulp capping. Preparations based on calcium hydroxide are divided into two main groups:

1. non-hardening – in the form of ready to use pastes or prepared in dental office
2. hardening

Non-hardening preparation characterise with the highest pH value: about 12-13, what cause the highest capacity of antibacterial activity and stimulating odontoblasts to produce reparative dentine.

CALCIPAST is ready to use calcium hydroxide paste. It doesn’t require additional mixing, and it is straight applied from the syringe into the tooth cavity by the means of attached applicator. Because the preparation does not harden in the cavity, it needs additional tight protection.

Exposure of major part of dentine often occurs during cavity preparation. Together with increased number and distention of dentinal tubules it may cause post-treatment hypersensitivity. Currently accepted that dentine hypersensitivity treatment should lead to the closure of open dentinal tubules to eliminate pulp cell irritation.
HYDROCAL is a powder material, calcium salts mixture, for making paste, mainly in combination with the saline. 30% of its composition is calcium hydroxide. HYDROCAL has a drying effect that has a great result in case of persistent inflammatory exudates.

Preparation HYDROCAL may be also used in combination with other substances like: chlorhexidine in liquid or in gel GLUCO CHEX 2% - this kind of pastes, used as a temporary dressing and is more effective in the treatment of inflammation and exudation.

CALCIPAST and HYDROCAL are indicated mainly as:
- dressing to improve remineralization of partially decalcified dentine
- dressing for indirect and direct pulp capping treatment, stimulating dentine bridge formation in endodontic treatment as temporary root canal dressing.

Because these are non-hardening preparations, it is recommended to cover them with hardening material which also contains calcium hydroxide, mainly to provide permanent protection, e.g. against entering into the pulp another, additional, sequentially applied material.

Hardening preparations – in biological treatment are used as thin basis and are setting directly on the non-hardening preparations Ca(OH)2. Hardening preparations characterized by less alkalizing and slight bactericidal activity.
As a temporary cavity filling are used also zinc-oxide-eugenol preparations ZnO+E. Zinc Oxide with eugenol or with clove oil is a good temporary filler.

**ZINC OXIDE** mixed with **EUGENOL** sets slowly (up to 30 minutes) after introducing into the cavity, but it bonds very well, even in saliva environment. In CERKAMED’s offer there is also fast-setting preparation - **ZINC OXIDE FAST**, which bonds faster, additionally less amount of eugenol is needed for mixing. This characteristics of preparation FAST is especially needed in case of working with impatient patients or children, because the filling bonds very quickly and it is not washed out of the cavity during patient reflex.

**ZINC OXIDE + EUGENOL** are recommended as material for temporary filling, lining the fissures, for temporary or permanent cementation or as a temporary root canal filler.

The filler has desiccate properties and accelerate healing in damaged tooth tissue properties. Preparations with eugenol cannot be used as a base for silicon cement filling and for composite material filling, because it affects bonding and polymerization.

TOTAL BLEND is calcium hydroxide, light cured preparation. TOTAL BLEND is available in: enamel shade - **WHITE** and dentine shade - **DENTINA**, that helps to reach appropriate cosmetic effect.

TOTAL BLEND BLUE - in blue color, is used also to indicate the root canal orificies.

### IV Enamel etching before permanent filling

For enamel and dentine etching before use of composite materials and pit and fissure sealant currently are used etchants with ortho-phosphoric acid.

**BLUE ETCH** is a high quality etchant in form of thixotropic gel, blue color. Gel with 36% ortho-phosphoric acid liquidifies during application and sets immediately after application, doesn’t run off uncontrolled from enamel surface. This advantage of etchant **BLUE ETCH** is especially useful during enamel etching for appliance.
Porcelain repair

Porcelain etch YELLOW PORCELAIN ETCH (hydrofluoric acid in gel) and SILAN allows repair of the dentures in the dental surgery, directly in the patient’s mouth. The etch is used for porcelain etching during repair of the dentures in the patient’s mouth, as well as for the etching of the porcelain veneers, crowns or inlays before their cementation.

SILAN is applied on porcelain after etching, before bonding in order to increase durability of the bond between resin and porcelain.

Both products are packaged in handy syringes with suitable applicators. Dense, gelish, yellow porcelain etch contains hydrofluoric acid, buffered in such a way that there are no noxious vapours (usually this happens in the case of etches used by technicians). Due to this porcelain can be etched in the mouth of the patient. When using it in the patient’s mouth, it is recommended to protect the soft tissues.

Treatment of inflammation in the mouth

For rinsing the gingival pockets and other areas of mucosa membrane which are difficult to be reached for decontamination are used hydrogen peroxide and chlorhexidine based preparations. GLUCOSITE contains 3% of hydrogen peroxide and 0.2% chlorhexidine digluconate.

Device is available in liquid GLUCOSITE and gel-GLUCOSITE GEL.

By means of attached applicator insert the liquid or gel into the gingival pocket, apply by shifting applicator along the gingival line, and after finished application recommend to the patient to rinse mouth by clean water. If required repeat procedure after approx. 7 days. In treatment the product GLUCOSITE has cleansing, drying and bacteriostatic effect.

ASK YOUR LOCAL DEALER ABOUT CERKAMED PRODUCTS

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