

Q: I have a question regarding your [PainFree™](#) product. I use a glass ionomer restorative for my Class V abfraction restorations. If I put PainFree in that area to alleviate sensitivity and then want to put a glass ionomer filling in that area afterward, do I need to remove the layer of PainFree that I previously placed in order to get a bond?

Thanks in advance for your help.
Dr. Paolo Ishbaum, San Francisco, CA

A: PAIN-FREE is a resin-based desensitizing product that works by polymerizing within the sensitive open dentinal tubules, forming a barrier to noxious external stimuli. Basically, it blocks the outer portion of the dentinal tubules, which stops the stimulus, which stops the pain.

Since glass ionomer products require exposure to the native calcium for their chelational bond to dentin, any product that coats this mineral tissue might theoretically reduce GI bond strength. Consequently, it's probably best to remove a thin layer of exposed dentin from the PAIN-FREE coated tooth prior to attempting a glass ionomer abfraction restoration. Of course, this means you'll have to use anaesthesia prior to treatment.

Q: Can the [Aeroetcher™](#) be used intra-orally to remove tobacco and/or coffee stains? Is it too abrasive?

Dr. M. Schlothauer

A: Under no circumstances should the Aeroetcher be used intra-orally to remove stains of any kind from teeth. The dry abrasive, whether it be aluminum oxide or sodium bicarbonate, is capable of stripping cementum off of a root in under a second. This would leave the patient with permanently damaged roots capable of causing great pain when exposed to cold air or liquids.

If you wish to remove tenacious stain from human teeth, you should use **1)** a prophy cup with prophy paste, or **2)** an ultrasonic scaler, or **3)** a hand scaler, or **4)** a sodium bicarbonate/air/water polishing device. Even then, it's prudent to use these tools carefully around thin enamel, cementum, porcelain or any other sensitive dental materials or tissues.

Q: Could you please advise on if the ultrasonic tips should be placed in an ultrasonic cleaner prior to the autoclave.

Thank you for your time.
Ronald A. Brungo, DMD

A: Below are the instructions relating to the care of Parkell's ultrasonic instruments:

Cleaning and sterilization:

Before sterilization, inserts must be carefully scrubbed with detergent and cold water to remove debris, then rinsed and dried. If desired, a non-ammoniated detergent cleaner such as dishwashing soap may be used.

Alternatively, inserts may be cleaned using an ultrasonic cleaner and a detergent cleaning solution, then rinsed and dried. (Do not use ammoniated cleansers or disinfectants.)

Though Parkell inserts may be sterilized using chemical vapor, steam autoclaving is the preferred technique, as it minimizes degradation of the materials:

Gravity Displacement Cycles: 15 minutes @ 132-135° C.
Prevacuum Cycles: 4 minutes @ 132-135° C.

Note: Dry heat is not recommended. "Cold Sterilization" using chemical disinfectants is not recommended.

It is significantly less effective than heat sterilization, and may cause the O-ring and silicone muffle in the insert to deteriorate.

Q: I would like to ask about [Retrieve™](#). I just read about it in ADA news. I'm wondering about retrieving the prosthesis, if needed, after it's cemented. It's mentioned in the newsletter that it can still be easily retrieved after a while from being cemented. How is this done? How is retrieving the prosthesis easier than when other types of cements are used? Thank you.

Dr. Firas Yacoub

A: Retrieve is a long-term, provisional resin implant cement that is formulated to be slightly resilient and moderately retentive. If possible removal of the prosthesis is anticipated in advance, the coronal 50% of the preparation is lubricated with petroleum jelly or water-soluble jelly prior to seating of the restoration. Between the cement's resilience, and the partial cement bond, prostheses can usually be removed using appropriate crown removing tools such as an impact hammer or the "GC" removal pliers, along with a careful controlled force from you, the operator. If removal is not anticipated beforehand, removal may still be accomplished in some cases, using the same tools, minus the pre-lubrication. Obviously, crown removal without lubrication will be more difficult.

Q: Is [Etch-Free™](#) compatible with other adhesives, not just Parkell's?

A: Etch-Free is a two-bottle silane system that does not require the use of dangerous hydrofluoric acid. It has a significantly longer shelf life than competing one-bottle silanes, and is compatible with methacrylate resin-based adhesives and methacrylate resin luting cements from most other manufacturers.

Q: I'm a long time [Brush&Bond®](#) user. I use the Automatrix by Dentsply which allows us to place back to back resins but I have to remove the matrix band after the first restoration to get the best contact. I've been B&B'ing between restorations due to gingival bleeding when the wedge is removed, etc. The question is, once B&B is applied, if the prep is rinsed (toileted as I learned it at Indiana University in Operative), is it necessary to re-apply B&B?

A: There's no need to reapply the B&B if it's already light-polymerized, but gets a little wet during your removal of the matrix band, and the subsequent "toileting" of the prep.

Since the hybridization has already occurred IN the dentin, a little water or even a quick, small amount of blood, ON the dentin won't damage the hybrid layer, or "neutralize" the chemically-active surface of the B&B.

Simply rinse the "contaminated" B&B surface with a quick blast of air and water, and follow with and air drying of the surface. The resulting freshly polymerized surface will co-polymerize with the composite resin that follows without a problem.

Q: I just purchased the [Aeroetcher™](#) and I see it must be autoclaved between patients. Can it be Harvey Chemiclaved?

A: The Aeroetcher has not been tested by Parkell in a Chemiclave. The unit has only been sterilized in a steam autoclave under the conditions described in the Instructions for Use. Consequently, we can't assume responsibility for any damage caused by chemical sterilants.

To be safe, and follow accepted procedure, I would suggest sticking with a steam autoclave.

Q: Is it possible to use [Amalgambond® Plus](#) to bond a composite bite raiser to an amalgam filling?

A: Amalgambond Plus will bond very well to old amalgams, especially if they are roughened up prior to bonding with a light sandblasting. Since cured Amalgambond Plus will also tenaciously bond to composite placed over it, the answer to your question is.....

YES! If you perform such a treatment, why not consider photographing the case. We would love to print such a unique use for our product in our "world-renowned" publication, *Parkell Today*. Seriously, it might be a nice case to share with your colleagues in our newsletter.

ABOUT *the* AUTHOR



Rich Goldman, D.D.S., F.A.G.D. has been Parkell's Vice-President for Clinical Products since 2001. Prior to that, he maintained a full time general dental practice in Manhattan, New York for about 20 years. He still treats patients in his own dental operating suite at Parkell's headquarters. When his gloves aren't wet, Rich is developing and

testing new products, working with Parkell's chemists, engineers and technicians, and answering your questions by phone, email, or at the Parkell trade show booth. Dr. Goldman regularly lectures to dental study clubs, national dental meetings, and to dental residents at several metropolitan NY hospitals.