- 46. Woodhead J, Nowak A, Crall J, Robillard J. Dental abnormalities in children with chronic renal failure. Pediatr Dent 1998;24:281-285.
- 47. Seow W. Enamel hypoplasia in the primary dentition: A review. J Dent Child 1991;58:441-452.
- 48. Koch M, Buhrer R, Pioch T, Scharer K. Enamel hypoplasia of primary teeth in chronic renal failure. Pediatr Nephrol 1999;13:68-72.
- 49. Nassotrom K, Forsberg B, Petersson A, Westesson G. Narrowing of the dental pulp chamber in patients with renal diseases. Oral Surg 1985;59:242-246.
- 50. Galili D, Berger E, Kaufman E. Pulp narrowing in renal end-stage and transplanted patients. J Endod 1991;17:442-443.
- 51. Obry F, Belcourt Frank R. Biochemical study of whole saliva from children with chronic renal failure. J Dent Child 1987;54:429-432.
- 52. Gavalada C, Bagan J, Scully C, Silvestre F, Milian M, Jimeinez Y. Renal hemodialysis patients: Oral, salivary, dental, and periodontal findings in 105 adult cases. Oral Dis 1999;5:299-302.

- 53. Stoppelaar J. Urea and amonia in saliva of caries inactive children with renal disease. J Dent Res 1982;61:3-225.
- 54. Brin I, Zilberman Y, Galili D, Fuks A. Eruption of rootless teeth in congenital renal disease. Oral Surg Oral Med Oral Pathol 1985;1:61-64.
- 55. Kuczek A, Beilker T, Herbst H, Flemming TF. Eruption cyst formation associated with cyclosporin A. J Clin Periodontol 2003;30:462-466.
- 56. Ertugrul F, Elbek-Cubukcu C, Sabah E, Mir S. The oral health status of children undergoing hemodialysis treatment. Turk J Pediatr 2003;45:108-113.
- 57. Chow M, Peterson D. Dental managment of children with chronic renal failure undergoing hemodialysis therapy. Oral Surg 1979;48:18-34.
- Bennet WM, Aronoff GR, Gloper TA, Brater C, Singer I. In: Bennet WM, Aronoff GR, Gloper TA, Brater C, Singer I, eds. *Drug Prescribing in Renal Failure, Dosing Guidelines for Adults.* 3th ed. Majors Co. Dallas Tex: American Journal of Physicians; 1994:19-99.

Abstract of the Scientific Literature



EFFECT ON DENTIN BOND STRENGTH BY VARYING ETCH TIME USING ONE-STEP BONDING SYSTEMS

It has been suggested that a "weak zone" could exist between intact dentin and the hybrid layer of a composite resin as well as within the hybrid layer itself. Acid etching of dentin demineralizes dentin to different depths, depending on acid type, concentration, and etch time. The purpose of this study was to evaluate whether reducing the etch time to 5 seconds from the recommended 15 seconds or increasing up to 30 seconds has any effect on dentin bonding.

In this study, 3 one-step bonding agents (Single Bond, One Step, and Syntac) were tested on 108 extracted human molar teeth. Three evenly divided groups were assigned each bonding agent, and then each group was subdivided into 3 subgroups based on etching time (5, 15, or 30 seconds.) All groups were bonded with Z-100 composite resin, as per the manufacturer's instructions. After thermocycling, all specimens were tested in the shear mode until failure. Significant differences only exist for the different etch times with the Syntac bonding agent, and not the others tested. In all cases, however, etch times of less than 15 seconds do not seem to adversely affect bonding to dentin.

Comments: The dentin-to-composite bond interface is a very complex structure, and this study was narrow in scope by not taking into account other factors which could affect the fracture site. Etch time is one variable under the clinician's direct control. In a pediatric setting, dentists do not always enjoy the advantage of an "ideal clinical condition." Hence, the results published here can give some consolation if dentists are not able to maintain prescribed etch times. GM

Address correspondence to Dr. Amer Abu-Hanna, University of Florida, College of Dentistry, Department of Operative Dentistry, Health Sciences Center, PO Box 100415, Gainesville, Fla.

Abu-Hanna A, Gordan VV. Evaluation of etching time on dentin bond strength using single bottle bonding systems. J Adhes Dent 2004;2:105-110.

36 references

Copyright of Pediatric Dentistry is the property of American Society of Dentistry for Children and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.