Biocompatible Materials in Modern Endodontics: Trends and Applications

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Abstract:

The field of endodontics has experienced significant advancements with the introduction of biocompatible materials that enhance treatment efficacy and promote healing. This review explores the current trends and applications of biocompatible materials in modern endodontics, emphasizing their importance in improving patient outcomes. Biocompatible materials, defined as substances that interact favorably with biological tissues, play a crucial role in various endodontic procedures, including root canal therapy, pulp capping, and perforation repair. Traditional materials such as gutta-percha and zinc oxideeugenol have long been used in endodontics; however, their limitations have prompted the development of innovative alternatives. Recent advancements include the use of bioceramics, calcium silicate-based materials, bioactive glass, and resin-based composites. Bioceramics, such as Mineral Trioxide Aggregate (MTA) and Biodentine, are celebrated for their excellent sealing properties, biocompatibility, and ability to stimulate hard tissue formation. Bioactive glass exhibits unique properties that facilitate integration with surrounding tissues and promote healing. Resin-based materials have also been modified to enhance their biocompatibility and adhesion to dentin, offering improved performance in clinical applications. Emerging trends such as regenerative endodontics, which focuses on restoring pulp vitality and promoting tissue regeneration, highlight the growing importance of biocompatible materials in modern practice. Additionally, the integration of technologies such as 3D printing and nanotechnology is paving the way for the development of customized and enhanced materials with superior properties. In conclusion, biocompatible materials are transforming modern endodontics, providing clinicians with advanced options that not only address the biological needs of dental tissues but also improve overall treatment success. As research continues to evolve, the future of endodontic therapy appears promising, with the potential for even more effective and patient-centered approaches to dental care.

1.Introduction

Endodontics is a specialized branch of dentistry that focuses on the diagnosis, treatment, and management of conditions affecting the dental pulp and the surrounding periapical tissues. This field has witnessed remarkable advancements over the years, particularly in the realm of material science. As our understanding of dental biology and pathology continues to evolve, so too does the technology and materials available for endodontic procedures. The primary objective of endodontic treatment is to eliminate infection, preserve the natural tooth structure, and promote healing in the periapical tissues. Achieving these goals is critically dependent on the choice of materials utilized in various endodontic procedures [1].

The materials employed in endodontics must not only be effective in sealing and filling the root canal system but also demonstrate biocompatibility with the surrounding tissues. Biocompatible materials are specifically designed to interact favorably with biological tissues, minimizing adverse reactions, such as inflammation or toxicity, and enhancing the healing processes. The ideal endodontic material should promote tissue regeneration, provide adequate mechanical strength, and maintain stability over time, all while being easy to manipulate and apply in clinical settings [2].

Historically, materials such as gutta-percha and zinc oxide-eugenol have been the cornerstone of endodontic treatment. Gutta-percha, a natural polymer derived from the sap of the Palaquium gutta tree, has been the preferred choice for root canal filling due to its excellent sealing properties, ease of use, and biocompatibility. Zinc oxide-eugenol has also been widely used as a temporary filling material and as a sealer in root canal therapy, celebrated for its antibacterial properties. However, despite their long-standing use, these traditional materials have inherent limitations, including inadequate adhesion to dentin and a lack of bioactivity that can hinder optimal healing [3].

With the increasing understanding of biological principles and the demand for improved clinical outcomes, there has been a significant shift towards the use of advanced biocompatible materials in endodontics [4]. These materials not only address the shortcomings of traditional options but also offer new capabilities that enhance the overall effectiveness of endodontic treatments. For example, the emergence of bioceramics, calcium silicate-based materials, and bioactive glass has revolutionized the way clinicians approach root canal therapy and other endodontic procedures [5].

This review aims to provide a comprehensive overview of the current trends and applications of biocompatible materials in modern endodontics. By examining the evolution of these materials, their properties, and their clinical implications, we hope to highlight the importance of adopting biocompatible options in endodontic practice. Additionally, we will explore the ongoing research and future directions in this field, emphasizing how these advancements can lead to improved patient outcomes and a more effective approach to endodontic therapy. Ultimately, the integration of biocompatible materials represents a significant step forward in the quest for optimal dental care, aligning clinical practice with the biological needs of patients [6].

2. Biocompatibility: Definition and Importance

Biocompatibility is a critical concept in the field of materials science, particularly when applied to medical and dental applications. It refers to the ability of a material to perform its intended function effectively while avoiding any adverse biological responses. In the

context of endodontics, where the primary aim is to treat infections and preserve the integrity of the dental pulp and surrounding tissues, the selection of biocompatible materials is paramount. These materials should not only facilitate the healing process but also integrate seamlessly with the surrounding biological tissues. Moreover, they must not provoke inflammation, toxicity, or any other negative biological responses that could compromise the treatment outcomes [7].

The importance of biocompatibility in endodontics cannot be overstated. It directly influences the success of endodontic treatments and the overall comfort of patients undergoing these procedures. Biocompatible materials can enhance the healing of periapical tissues, promote regeneration, and reduce the risk of complications such as reinfection or chronic inflammation. In an era where patient-centered care is increasingly emphasized, understanding and prioritizing biocompatibility is essential for dental practitioners aiming to provide the best possible outcomes for their patients [8].

2.1. Criteria for Biocompatibility

To assess the biocompatibility of materials used in endodontics, several criteria must be considered. These criteria serve as a guideline for evaluating the suitability of materials for clinical applications and ensuring that they meet the necessary biological and mechanical requirements. The following criteria are essential for assessing the biocompatibility of materials used in endodontics:

- 1. **Non-toxicity**: One of the primary considerations in determining the biocompatibility of a material is its non-toxicity. Materials used in endodontic procedures should not release harmful substances that could damage surrounding tissues. Toxicity can lead to inflammation, necrosis, or other adverse reactions that compromise the healing process. Therefore, materials must undergo rigorous testing to ensure they do not elicit toxic effects on cells and tissues in the oral environment [9].
- 2. **Mechanical Properties**: The mechanical properties of endodontic materials are crucial for their performance. Adequate strength and flexibility are required to withstand the forces encountered in the oral environment, including chewing and grinding. Materials must be durable enough to maintain their integrity over time while also being flexible enough to adapt to the complex anatomy of the root canal system. Insufficient mechanical properties can lead to failure in sealing or structural integrity, ultimately affecting treatment outcomes [10].
- 3. Chemical Stability: Chemical stability is another vital criterion for assessing biocompatibility. Materials should resist degradation and maintain their properties over time, especially in the moist and dynamic environment of the oral cavity. Degradation can lead to the release of harmful byproducts, loss of mechanical strength, and failure to provide an adequate seal in the root canal. Therefore, materials must be formulated to withstand the challenges posed by the oral environment while ensuring long-term effectiveness [11].
- 4. **Biological Performance**: The biological performance of materials is a crucial aspect of their biocompatibility. Ideally, materials should promote favorable cellular responses that favor healing and tissue regeneration. This includes facilitating the recruitment of stem cells, promoting angiogenesis, and supporting the formation of new tissues. Materials that can actively stimulate biological processes are particularly valuable in endodontics, where the goal is not only to eliminate infection but also to restore the vitality of the affected tissues [12].

3. Traditional Materials in Endodontics

3.1. Gutta-Percha

Gutta-percha has been the gold standard for root canal filling for over a century. It is a natural polymer derived from the sap of the Palaquium gutta tree. Gutta-percha is favored for its excellent sealing properties, biocompatibility, and ease of use. However, it has some limitations, including poor adhesion to dentin and a lack of bioactivity [13].

3.2. Zinc Oxide-Eugenol

Zinc oxide-eugenol (ZOE) has been widely used as a temporary filling material and as a sealer in root canal therapy. While it possesses good antibacterial properties and biocompatibility, concerns about its long-term stability and potential cytotoxicity have prompted the search for alternative materials [13].

4. Advances in Biocompatible Materials

4.1. Bioceramics

Bioceramics have gained popularity in endodontics due to their favorable biological properties and ability to promote healing. They are inorganic, non-metallic materials that exhibit excellent biocompatibility, bioactivity, and mechanical strength. Bioceramics can be used as root canal sealers, reparative materials, and in regenerative endodontics [14].

4.1.1. Calcium Silicate-Based Materials

Calcium silicate-based materials, such as Mineral Trioxide Aggregate (MTA) and Biodentine, have emerged as significant advancements in endodontic therapy. These materials are known for their excellent sealing ability, biocompatibility, and ability to stimulate hard tissue formation [15].

- Mineral Trioxide Aggregate (MTA): MTA is a calcium silicate-based material that has been widely used in endodontics for pulp capping, perforation repair, and root-end filling. Its bioactive properties promote the regeneration of pulp tissue and the formation of a mineralized barrier [16].
- **Biodentine**: Biodentine is a newer calcium silicate-based material that has shown promise as a dentin substitute due to its mechanical properties and biocompatibility. It sets quickly, is easy to manipulate, and promotes pulp healing [17].

4.2. Bioactive Glass

Bioactive glass is another innovative material that has been explored in endodontics. It reacts with biological fluids to form a hydroxyapatite layer, promoting integration with surrounding tissues. This material has shown potential in various applications, including root canal sealing and as a reparative agent in cases of pulp exposure [18].

4.2.1. Mechanism of Action

The bioactivity of bioactive glass is attributed to its ability to release ions that stimulate cellular responses, leading to the formation of a mineralized interface with the host tissue. This property enhances the material's ability to bond with dentin and promotes healing in the periapical region [19].

4.3. Resin-Based Materials

Resin-based materials have also been developed for use in endodontics, particularly as sealers and filling materials. These materials offer improved adhesion to dentin and can be modified to enhance their biocompatibility [20].

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4.3.1. Epoxy Resin Sealers

Epoxy resin sealers are known for their excellent sealing ability and low solubility. They provide a durable seal in the root canal system, reducing the risk of reinfection. However, concerns regarding their potential cytotoxicity have led to the development of more biocompatible alternatives [21].

4.3.2. Biocompatible Resin Composites

Recent advancements in resin composites have focused on enhancing their biocompatibility. These materials are designed to minimize the release of toxic substances while maintaining their mechanical properties and adhesion to dentin. They can be used in various endodontic applications, including as root canal sealers and filling materials [22].

5. Trends in Biocompatible Materials

5.1. Regenerative Endodontics

Regenerative endodontics is an emerging field that aims to restore the vitality of the dental pulp and promote the regeneration of periapical tissues. Biocompatible materials play a crucial role in this approach, as they provide a conducive environment for stem cell proliferation and differentiation.

5.1.1. Stem Cell Therapy

The use of stem cells in conjunction with biocompatible materials has shown promise in regenerative endodontics. Materials such as MTA and bioactive glass can serve as scaffolds for stem cells, facilitating tissue regeneration and repair [23].

5.2. 3D Printing in Endodontics

The advent of 3D printing technology has opened new avenues for the development of customized biocompatible materials in endodontics. This technology allows for the precise fabrication of dental implants, scaffolds, and other components tailored to individual patient needs [24].

5.2.1. Customizable Scaffolds

3D-printed scaffolds made from biocompatible materials can be designed to support tissue regeneration in endodontic procedures. These scaffolds can be engineered to mimic the natural architecture of dental tissues, promoting cell attachment and growth [25].

5.3. Nanotechnology

Nanotechnology is being explored in the development of advanced biocompatible materials for endodontics. Nanoparticles can enhance the properties of traditional materials, improving their mechanical strength, antibacterial activity, and bioactivity.

5.3.1. Antibacterial Nanoparticles

Incorporating antibacterial nanoparticles into endodontic materials can help reduce the risk of infection and improve treatment outcomes. Silver, zinc oxide, and other nanoparticles have shown promise in enhancing the antimicrobial properties of root canal sealers and filling materials [26].

6. Clinical Applications of Biocompatible Materials

6.1. Root Canal Treatment

Biocompatible materials are widely used in root canal treatment to fill and seal the root canal system. The choice of material can significantly impact the success of the procedure, influencing factors such as sealing ability, biocompatibility, and the potential for tissue regeneration [27].

6.2. Pulp Capping and Vital Pulp Therapy

In cases of pulp exposure, biocompatible materials such as MTA and Biodentine are used for pulp capping and vital pulp therapy. These materials promote healing and the formation of a protective barrier, allowing for the preservation of pulp vitality [28].

6.3. Perforation Repair

Biocompatible materials are also employed in the repair of root canal perforations. Materials like MTA provide excellent sealing properties and promote healing in the surrounding tissues, reducing the risk of complications [29].

7. Future Directions in Biocompatible Materials

7.1. Research and Development

Ongoing research is essential for the continued advancement of biocompatible materials in endodontics. Future studies should focus on improving the properties of existing materials, exploring new formulations, and investigating the long-term effects of these materials on dental tissues.

7.2. Clinical Trials

Clinical trials are necessary to evaluate the efficacy and safety of new biocompatible materials in endodontic applications. These studies will provide valuable insights into the performance of these materials in real-world clinical settings [30].

7.3. Education and Training

Education and training for dental professionals regarding the latest advancements in biocompatible materials are crucial. Continuing education programs should be developed to ensure that practitioners are well-informed about the properties, applications, and benefits of these materials. This knowledge will empower clinicians to make informed decisions in their practice, ultimately improving patient outcomes [31].

8. Conclusion

The integration of biocompatible materials in modern endodontics represents a significant advancement in the field, enhancing treatment efficacy and promoting healing. As research continues to unveil new materials and technologies, the potential for improved clinical outcomes in endodontic therapy becomes increasingly promising. The shift towards biocompatibility not only addresses the biological needs of dental tissues but also aligns with the growing emphasis on patient-centered care in dentistry. Future developments in this area will likely lead to more effective, safer, and innovative approaches to endodontic treatment, ultimately benefiting both practitioners and patients alike.

References:

- 1. (2013). Role of mineral trioxide aggregate in management of external root resorption. journal of conservative dentistry, 16(6), 579. https://doi.org/10.4103/0972-0707.120937
- 2. (2015). Endodontic instrumentation and root filling procedures: effect on mechanical integrity of dentin. endodontic topics, 33(1), 43-49. https://doi.org/10.1111/etp.12084
- 3. (2017). Comparison between published clinical success of direct resin composite restorations in vital posterior teeth in 1995–2005 and 2006–2016 periods. australian dental journal, 62(2), 132-145. https://doi.org/10.1111/adj.12487

- 4. (2016). Zn-doped etch-and-rinse model dentin adhesives: dentin bond integrity, biocompatibility, and properties. dental materials, 32(7), 940-950. https://doi.org/10.1016/j.dental.2016.04.003
- (2017). Effect of obturating materials on fracture resistance of simulated immature teeth. journal of conservative dentistry, 20(2), 115. https://doi.org/10.4103/0972-0707.212238
- 6. (2023). Nationwide trends of modern endodontic practices related to working length, instrumentation, magnification, and obturation: a comparative cross-sectional survey comparing endodontic and non-endodontic specialties practicing root canal treatment in india. journal of multidisciplinary healthcare, Volume 16, 865-873. https://doi.org/10.2147/jmdh.s397778
- 7. (2023). Publication rate of abstracts presented in conseuro meetings held between 2003 and 2017: a bibliometric analysis.. https://doi.org/10.21203/rs.3.rs-2512985/v1
- 8. (2015). A comparative evaluation of the blood clot, platelet-rich plasma, and platelet-rich fibrin in regeneration of necrotic immature permanent teeth: a clinical study. contemporary clinical dentistry, 6(1), 63. https://doi.org/10.4103/0976-237x.149294
- 9. (2012). Nonsurgical endodontic retreatment of advanced inflammatory external root resorption using mineral trioxide aggregate obturation. case reports in dentistry, 2012, 1-5. https://doi.org/10.1155/2012/624792
- 10. (2016). Root canal stripping: malpractice or common procedural accident—an ethical dilemma in endodontics. case reports in dentistry, 2016, 1-5. https://doi.org/10.1155/2016/4841090
- 11. (2014). Impacts of conservative endodontic cavity on root canal instrumentation efficacy and resistance to fracture assessed in incisors, premolars, and molars. journal of endodontics, 40(8), 1160-1166. https://doi.org/10.1016/j.joen.2013.12.012
- 12. (2020). Evaluation of resin-based material containing copaiba oleoresin (copaifera reticulata ducke): biological effects on the human dental pulp stem cells. biomolecules, 10(7), 972. https://doi.org/10.3390/biom10070972
- 13. (2022). Multifarious bone cement and its applications in endodontics a review. international journal of oral health dentistry, 8(1), 9-13. https://doi.org/10.18231/j.ijohd.2022.003
- 14. (2014). Minimally invasive endodontics: challenging prevailing paradigms. bdj, 216(6), 347-353. https://doi.org/10.1038/sj.bdj.2014.201
- 15. (2020). Minimally invasive endodontics and permanent restorations of endodontically treated teeth: literature review. egyptian dental journal, 66(1), 365-378. https://doi.org/10.21608/edj.2020.79112
- 16. (2021). Premixed bioceramics: a novel pulp capping agent. journal of conservative dentistry, 24(2), 124. https://doi.org/10.4103/jcd.jcd_202_20
- 17. (2022). Changes in migratory speed rate of human dental pulp stromal cells cultured in advanced platelet-rich fibrin. european journal of dentistry, 17(01), 091-096. https://doi.org/10.1055/s-0042-1743146
- 18. (2021). The trends of dental biomaterials research and future directions: a mapping review. the saudi dental journal, 33(5), 229-238. https://doi.org/10.1016/j.sdentj.2021.01.002

- 19. (2018). A review on restorative and preventive materials used in dentistry. journal of dental health oral disorders and therapy, 9(6), 526-529. https://doi.org/10.15406/jdhodt.2018.09.00442
- 20. (2018). Applications of mesenchymal stem cells in sinus lift augmentation as a dental implant technology. stem cells international, 2018, 1-7. https://doi.org/10.1155/2018/3080139
- 21. (2021). A bibliometric analysis of the top 100 most-cited case reports and case series in endodontic journals. international endodontic journal, 55(3), 185-218. https://doi.org/10.1111/iej.13668
- 22. (2022). Coronal restoration of endodontically treated posterior teeth. international journal of health sciences, 10319-10329. https://doi.org/10.53730/ijhs.v6ns1.7444
- 23. (2014). Lack of correlation between tubular dentine cement penetration, adhesiveness and leakage in roots filled with gutta percha and an endodontic cement based on epoxy amine resin. journal of applied oral science, 22(1), 22-28. https://doi.org/10.1590/1678-775720130247
- 24. (2011). Biocompatibility of two novel root repair materials. journal of endodontics, 37(6), 793-798. https://doi.org/10.1016/j.joen.2011.02.029
- 25. (2016). Endodontic considerations for the restoration of endodontically treated teeth., 1-24. https://doi.org/10.1007/978-3-319-15401-5_1
- 26. (2019). A review on potential toxicity of dental material and screening their biocompatibility. toxicology mechanisms and methods, 29(5), 368-377. https://doi.org/10.1080/15376516.2019.1566424
- 27. (2016). Dental pulp stem cell recruitment signals within injured dental pulp tissue. dentistry journal, 4(2), 8. https://doi.org/10.3390/dj4020008
- 28. (2011). Fracture resistance of retreated roots using different retreatment systems. european journal of dentistry, 05(04), 387-379. https://doi.org/10.1055/s-0039-1698910
- 29. (2013). Current challenges and concepts of the thermomechanical treatment of nickel-titanium instruments. journal of endodontics, 39(2), 163-172. https://doi.org/10.1016/j.joen.2012.11.005
- 30. (2017). current trends and future perspectives of dental pulp capping materials: a systematic review. journal of biomedical materials research part b applied biomaterials, 106(3), 1358-1368. https://doi.org/10.1002/jbm.b.33934
- 31. (2022). Cytotoxic effect of modified gutta percha by incorporating bioactive glass 45s5 and chitosan particles as potential root canal filling material. medico-legal update, 22(2), 176-184. https://doi.org/10.37506/mlu.v22i2.3246