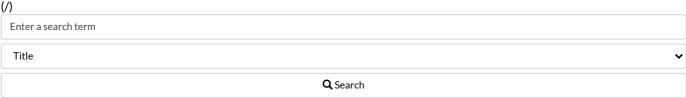
Journal of

ental Research Clinics ental Prospects

TUOMS

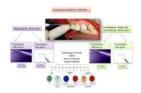
Babili bewerety of medical branches





ISSN: 2008-210X (https://portal.issn.org/resource/ISSN/2008-210X) eISSN: 2008-2118 (https://portal.issn.org/resource/ISSN/2008-2118)

Visual Abstract



JODDD now with visual abstracts. Authors can now add a visual abstract to their submission.

Platinum* Open Access

*This Platinum Open Access journal publishes articles totally free of charge for the authors and provides unrestricted access to the published content through its website and open access repositories such as PubMed Central.

Indexing & Abstracting



term=%22Journal%20of%20dental%20research%2C%20dental%20clinics%2C%20dental%20prospects%22%5BJournal%5D)



(//www.ncbi.nlm.nih.gov/pmc/journals/1889/)









Following



Social media



in (https://www.linkedin.com/company/journal-of-dental-research-dental-clinics-dental-prospects/about/)

Editor-in-Chief



Naser Aslaminabad, DDS, MSc

Department of Pediatric Dentistry, Faculty of Dentistry, Tabriz University of Medical Sciences, Tabriz, Iran

E-mail: aslaminabadi@gmail.com

ORCiD (http://orcid.org/0000-0002-6624-4994), Google Scholar (https://scholar.google.com/citations? user=23hZ6kQAAAAJ&hl=en)

Scopus ID: 23007877900 (https://www.scopus.com/authid/detail.uri?authorld=23007877900)

Co-Editor-in-Chief



Ahmad Behroozian, DDS, MSc

Department of Orthodontics, Faculty of Dentistry, Tabriz University of Medical Sciences, Tabriz, Iran

E-mail: ahmadbehroozian@yahoo.com

Scopus ID: 56197010000 (https://www.scopus.com/authid/detail.uri?authorId=56197010000)

Associate Editors



Boyen Huang, DDS, MSc

Charles Sturt University, School of Dentistry and Health Sciences, Bathurst, Australia

Scopus ID: 55459814300 (https://www.scopus.com/authid/detail.uri?authorId=55459814300)



Paul V. Abbott, DDS, MSc

School of Dentistry, University of Western Australia, Australia

ORCiD (http://orcid.org/0000-0001-5727-4211), Researcher ID (http://www.researcherid.com/rid/H-8717-2014)

Scopus ID: 18338579200 (https://www.scopus.com/authid/detail.uri?authorId=18338579200)



Francesco Mangano, DDS, PhDS

Department of Surgical and Morphological Sciences, Università degli Studi dell'Insubria, Varese, Italy

Scopus ID: 35315927700 (https://www.scopus.com/authid/detail.uri?authorId=35315927700)

Google Scholar (https://scholar.google.it/citations?user=fgqE_UkAAAAJ&hl=en)



Luca Testarelli

Section of Endodontics, Department of Oral and Maxillo-Facial Sciences, Sapienza University of Rome, Via Caserta 06, 00161 Rome, Italy

Orcid ID: https://orcid.org/0000-0003-3904-3000 (https://orcid.org/0000-0003-3904-3000)

Google scholar link: https://scholar.google.com/citations?user=RaHKfl0AAAAJ&hl=it (https://scholar.google.com/citations?user=RaHKfl0AAAAJ&hl=it)

Assistant Editor



Sajjad Shirazi, DDS

Oral Biology Department, Dentistry College, University of Illinois at Chicago, USA

E-mail: s.shirazi.tbzmed88@gmail.com

ORCiD (https://www.scopus.com/redirect.uri?url=http://www.orcid.org/0000-0002-3996-6772&authorId=56844958700&origin=AuthorProfile&orcId=0000-0002-3996-6772&category=orcidLink)

Scopus ID: 56844958700 (https://www.scopus.com/authid/detail.uri?authorId=56844958700)



Katayoun Katebi

Department of Oral and maxillofacial medicine, Tabriz university of medical sciences, Tabriz, Iran

ORCID: 0000-0002-6595-6359

Scopus id:57192005517

Email: katebik@tbzmed.ac.ir (mailto:katebik@tbzmed.ac.ir)

Language Editor



Majid Abdolrahimi, DDS

Faculty of Dentistry, Tabriz University of Medical Sciences, Tabriz, Iran

E-mail: abdolrahimim@tbzmed.ac.ir

ORCID (https://orcid.org/0000-0002-4179-8341)

Scopus ID: 23003522700 (https://www.scopus.com/authid/detail.uri?authorId=23003522700)

Editorial Advisory Board

Paul V. Abbott, DDS, MSc

School of Dentistry, University of Western Australia, Australia

ORCiD (http://orcid.org/0000-0001-5727-4211), Researcher ID (http://www.researcherid.com/rid/H-8717-2014)

Scopus ID: 18338579200 (https://www.scopus.com/authid/detail.uri?authorld=18338579200)

Kelvin Ian Afrashtehfar, DDs, MSc

McGill University, Canada

Scopus ID: 55839146300 (https://www.scopus.com/authid/detail.uri?authorld=55839146300)

Salim Asbia, DDS, MSc

Department of Prosthodontics, Sirte University, Libya

Scopus ID: 15041624400 (https://www.scopus.com/authid/detail.uri?authorld=15041624400)

Emre Avci, DDS, MSc

Department of Molecular Biology and Genetics/Biochemistry, Faculty of Science and Arts, Hitit University, Turkey

Scopus ID: 24823751200 (https://www.scopus.com/authid/detail.uri?authorld=24823751200)

Fatima Betül Baştürk, DDS, MSc

Department of Endodontics, Faculty of Dentistry, Marmara University, Turkey

Scopuse ID: 41760960600 (https://www.scopus.com/authid/detail.uri?authorld=41760960600)

Deepak Gupta, BDS, MDS

Department of Oral Medicine and Radiology, M.M. College of Dental Sciences and Research, Mullana, India Google Scholar (https://scholar.google.co.in/citations?user=-41OB04AAAAJ&hl=en)

Boyen Huang, DDS, MSc

Department of Pediatric Dentistry, James Cook University, Australia

Scopus ID: 55459814300 (https://www.scopus.com/authid/detail.uri?authorId=55459814300)

Giselle Rodrigues de Sant'Anna, DDS, MSc

Department of Pediatric Dentistry, Cruzeiro do Sul University, Brazil

Scopuse ID: 55663899800 (https://www.scopus.com/authid/detail.uri?authorId=55663899800)

Ildikó Tarján, DDS, MSc

Department of Pediatric Dentistry and Orthodontics, Faculty for Dentistry, Semmelweis University Budapest, Hungary

Scopus ID: 7003631254 (https://www.scopus.com/authid/detail.uri?authorId=7003631254)

Douglas A. Terry, DDS, MSc

Department of Resotrative Dentistry and Biomaterials, University of Texas School of Dentistry at Houston, United States

Scopus ID: 7102494132 (https://www.scopus.com/authid/detail.uri?authorld=7102494132)

Jamileh Ghoddusi, DDS, MSc

Faculty of Dentistry, Mashhad University of Medical Sciences, Iran

Scopus ID: 55933335500 (https://www.scopus.com/authid/detail.uri?authorId=55933335500)

Siavash Savadi Oskoee, DDS, MSc

Faculty of Dentistry, Tabriz University of Medical Sciences, Iran

Scopus ID: 15128474300 (https://www.scopus.com/authid/detail.uri?authorId=15128474300)

Shahriar Shahi, DDS, MSC

Faculty of Dentistry, Tabriz University of Medical Sciences, Iran

Scopus ID: 21835058500 (https://www.scopus.com/authid/detail.uri?authorId=21835058500)

Submit Your Paper (/Login)
Submission Guidelines (/InstructionsforAuthors)
Aims and Scope (/AimsandScope)
Editorial Board (/EditorialBoard)
Editorial policies (/EditorialPolicies)
Indexing and Abstracting (/IndexingAbstracting)
Archive (/Archive)

Featured Prospective Highlight

0:00

A novel technique for the impression, model and provisionalization of pinlay (https://joddd.tbzmed.ac.ir/Article/joddd-16812) *J Dent Res Dent Clin Dent Prospects*. 2018;12(1):77-81

© 2007-2025 Tabriz University of Medical Sciences; unless otherwise stated. This Platinum Open Access journal is a title of TUOMS PRESS (https://publications.tbzmed.ac.ir/); an imprint of Tabriz University of Medical Sciences.

Journal Management System. Powered by Maad Rayan (http://www.maadrayan.com)



doi:10.34172/joddd.2020.036

https://joddd.tbzmed.ac.ir



Original Article



Setting time of construction gypsum, dental plaster, and white orthodontic gypsum

Imelda Darmawan¹, Octarina Willy¹, Johan Arief Budiman^{1*}

¹Department and Institution, Faculty of Dentistry, Trisakti University, Jakarta, Indonesia

ARTICLE INFO

Article History:

Received: 25 May 2020 Accepted: 24 Jul. 2020 ePublished: 21 Sep. 2020

Keywords:

Construction gypsum, Dental plaster, Final setting time, Initial setting time, White orthodontic gypsum

Background. Dental plaster, white orthodontic gypsum, and construction gypsum have β-hemihydrate particles. Setting time is an essential property of dental gypsum, which can affect the strength of the material. This research aimed to compare construction gypsum, dental plaster, and white orthodontic gypsum's initial and final setting times.

Methods. Three groups were included in this experimental laboratory study: construction gypsum (A), dental plaster (B), and white orthodontic gypsum (C). Each group consisted of 10 samples. Gypsum manipulation consisted of using 120 gr of powder and 60 mL of water. Gypsum powder and water were mixed using a gypsum mixer at 120 rpm. A homogeneous mixture was poured into a mold, and the setting time was measured using a Gillmore needle, according to ASTM C03-266. The initial setting time test was measured using 113.4 grams and a -2.12mm needle. The final setting time was measured using 453.6 grams and a -1.06mm needle. This test was repeated until the needle failed to penetrate the gypsum's surface. All the data were analyzed with one-way ANOVA and post hoc Tukey tests using SPSS

Results. The average initial setting time for groups A, B, and C were 1.40±16.17, 1.19±10.39, and 1.51±24.46, respectively. The average final setting time for groups A, B, and C were ,0.79±15.97 0.88±24.31) and 0.66±33.37, respectively. One-way ANOVA and post hoc Tukey tests showed significant differences in the initial and final setting times between the three groups (P<0.05).

Conclusion. There were differences in setting time between dental plaster, white orthodontic gypsum, and construction gypsum. The construction gypsum's setting time is suitable as a type II dental gypsum, according to ADA No.25.

Introduction

ypsum is one of the natural minerals that Contain calcium, hydrogen, water, and sulfur, known as calcium sulfate dihydrate (CaSO, 2H,O).1 Gypsum products are available in the form of a fine white powder which has undergone calcination or heating at a temperature of 110-130°C in the open air. This process causes some of the gypsum material to become dehydrated to calcium sulfate hemihydrate (CaSO₄.2H₂O) called Plaster of Paris in the form of β -hemihydrate.^{2,3,4}

Construction gypsum is used in the manufacture of gypsum boards or ceilings in the building interior industry.⁵ Gypsum is the material of choice because it has a low price, is easy to install, and has characteristics that meet the criteria as building materials. Construction gypsum material is in the form of β -hemihydrate with the characteristics of low density and high porosity.5 This gypsum form of hemihydrate becomes hydrated when mixed with water and undergoes the process of setting. At the same time, there is an increase in the strength of the material because the final microstructure of set gypsum material can affect the gypsum stiffness.^{6,7}

Type II dental gypsum or dental plaster contains β-hemihydrate particles and is used as a study model material, a set-up material for the working model on articulators, and dental laboratory material. Orthodontic white gypsum containing β-hemihydrate particles is used as a study model in orthodontics to provide a three-dimensional picture of the patient's occlusion, making it easier for dentists to determine treatment plans.8 The material in dentistry should have the characteristics that affect the strength, such as setting time. The setting process starts when the gypsum powder is mixed with water (hydration). There are two time intervals: initial setting time and final setting time, when setting time is in progress. The time from mixing gypsum powder with water until half-hardened gypsum consistency is achieved is called the initial setting time, while the final setting time is the time from mixing until the material hardens and can be removed from the mold.

Humidity can influence the setting process. The setting time can be measured by penetration testing using the Gillmore needle.^{10,11}

Based on the Ministry of Health, Republic of Indonesia Regulation Article No. 1189/MoH/REG/ VIII/2010 concerning the production of medical devices and household health supplies and Ministry of Health, Republic of Indonesia Regulation Article No. 1190/MoH/REG/VIII/2010 concerning distribution permits for medical devices and household health supplies, 12,13 all the dental materials circulating in Indonesia must have a distribution permit, including imported dental plaster and white orthodontics gypsum. These regulations make it difficult for both imported gypsums to be found on the Indonesian market because it is quite difficult to obtain the permit to distribute medical devices. The attempt to produce local gypsum products, with wet calcination method using autoclave, had been compared.¹⁴ The research raises the thought of using construction gypsum, abundant in Indonesia, as an alternative material for dental plaster and white orthodontics gypsum. Construction gypsum has the same basic material and molecular shape as dental plaster and white orthodontics plaster. This study aimed to compare construction gypsum, dental plaster, and white orthodontic gypsum's initial and final setting times.

Methods

This laboratory study was conducted at the Dental Materials and Testing Centre of Research (DMT-Core) at our institution in October-November 2019. The samples used were divided into three groups: construction gypsum, dental plaster, and white orthodontic gypsum. The 10 gypsum block samples for each group were set based on the Federer formula. The tools used in this research were Gillmore needle setting time test equipment, molds, measuring cups, automatic mixers, vibrators, digital scales, and water temperature thermometers. The materials used in this study were Aquadest, APLUS construction gypsum, Pro-BASE dental plaster, and SIRIUS white orthodontic gypsum.

Manipulating the gypsum block sample to be tested began by weighing 120 grams of gypsum powder and taking 60 mL of water. Water was firstly put in a bowl; then, the gypsum powder was slowly added and let stand for 30 seconds. When gypsum powder contacted water, the stopwatch calculation started. Mixing was carried out for 60 seconds using an automatic mixer to obtain a homogeneous mixture.² The next stage consisted of pouring the mixture into a

block-mold, which was then vibrated with a vibrator so that the surface of the gypsum sample was flat. The gypsum block sample that was poured into the mold was tested by setting the time under the Gillmore needle to test the initial setting time.

The Gilmore needle was positioned vertically against the sample with the needle tip in contact with the sample's surface. The needle was then released until it penetrated the sample. The time of the needle for penetrating the sample was 15 seconds. After 15 seconds, the needle was removed; then, the gypsum attached to the needle tip was cleaned with tissue paper and positioned for the next penetration area. The penetration of the needle was carried out around the sample to get a different puncture area. The needle was removed in 15 seconds; therefore, the one-time penetration took 30 seconds. This continued until the needle could not leave a trace on the surface of the gypsum block sample. When the needle to test the initial setting time could not leave a trace on the gypsum surface, the test proceeded with positioning the sample under the Gillmore needle to test the final setting time. The process to test the final setting time was the same as the initial setting time.2

Statistical analysis of the data in this study consisted of one-way ANOVA (SPSS 23). If the results of the data analysis produced significant differences, then a further test was conducted, i.e., post hoc Tukey test.

Results

Table 1 presents the test results of construction gypsum and type II dental gypsum's setting time. The lowest mean of initial setting time was found in the construction gypsum with 10 minutes and 39 seconds; the highest mean was found in the SIRIUS dental gypsum with 24 minutes and 46 seconds. The lowest final setting time was also found in the construction gypsum with 15 minutes and 97 seconds; the highest mean value in the dentistry gypsum SIRIUS was 33 minutes and 37 seconds.

This study used one-way ANOVA after it was ensured that the data were distributed normally. The initial and final setting time measurement data in this study fulfilled all the requirements to perform one-way ANOVA. ANOVA showed the significance of the initial setting time variable, and the final setting time showed a significant initial setting time difference between the construction gypsum and type II dental gypsum (dental plaster and white orthodontic) (P<0.05). Further analyses were carried out with post hoc Tukey tests at a significance level of P<0.05. Tables 2 and 3 show significant differences in initial setting time and final setting time in all the tested

Table 1. Comparison of average results of measurement of construction gypsum setting time and dental gypsum

N	Initial setting time	Final setting time
Ν	± SD (min)	± SD (min)
10	10.39±1.19	15.97±0.79
10	16.17±1.40	24.31±0.88
10	24.46±1.51	33.37±0.66
	10	N ± SD (min) 10 10.39±1.19 10 16.17±1.40

groups (P<0.05). Therefore, it can be concluded that all the groups exhibited significant differences.

Discussion

Table 1 presents the average setting times of construction gypsum (APLUS°) and type II dental gypsum (Pro-BASE* and SIRIUS*). APLUS* gypsum has an average initial setting time of 10 minutes and 39 seconds, with a final setting time of 15 minutes and 97 seconds. This shows that the construction gypsum (APLUS*) setting time meets ADA #25 standard specifications (8-16 minutes). Pro-BASE° gypsum has an average initial setting time of 16 minutes and 17 seconds, with a final setting time of 24 minutes and 31 seconds. These results indicate that the Pro-BASE gypsum setting time does not meet the ADA #25 standard. SIRIUS gypsum has an average initial setting time of 24 minutes and 46 seconds and a final setting time of 33 minutes 37 seconds. The average setting time of SIRIUS* gypsum does not meet ADA #25 standard. Other research on local gypsum products showed that the average setting time of the self-made gypsums was around 8 minutes and 7 seconds and 3 minutes and 40 seconds.14 The study above also reported an average setting time of 20 minutes and 21 seconds for dental plaster and 10 minutes and 34 seconds for dental stone.¹⁴

Table 1 shows that the average initial setting time value was lowest in APLUS* construction gypsum and highest in SIRIUS* gypsum. The final time setting values of three type gypsums in this study were different, as shown in Table 1. This time setting difference can be influenced by the amount of crystallization core in the gypsum. During the setting reaction, a nucleation process occurs between the calcium (Ca²+) and sulfate (SO₄²-) ions, which form a molecular bond. When these two molecules come together, a nucleus of crystallization will emerge. The higher the number of crystallization nuclei, the faster the formation of dihydrated crystals so that gypsum will harden faster.¹¹0 The factor making the average setting time of type II dental gypsum

Table 2. Statistical analysis of initial setting time of tested gypsum groups with one-way ANOVA and post hoc Tukey tests

Gypsum	APLUS*	Pro BASE	SIRIUS
APLUS [*]	-	0.000*	0.000*
Pro-BASE°	-	-	0.000*
SIRIUS°	-	-	-

^{*}P<0.05 significance

Table 3. Statistical analysis of final setting time of tested gypsum groups with one-way ANOVA and post hoc Tukey tests

Gypsum	APLUS*	Pro BASE°	SIRIUS°
APLUS°	-	0.000*	0.000*
Pro-BASE°	-	-	0.000*
SIRIUS*	-	-	-

^{*}P<0.05 significance

longer in this study than the ADA #25 standard (8-16 minutes) is the hygroscopic nature of gypsum material (drawing water from the air). Gypsum storage contaminated with air can attract water and cause low solubility of dihydrate molecules, increasing the setting time of gypsum. Based on ISO 6873, the standard for Dental gypsum storage is $50\% \pm 10\%$. Other research on gypsum material found that Indonesia's humidity level is quite high, reaching 70%.¹⁶ The annual weather report (2019) showed that in Jakarta (the capital of Indonesia) January is on average the most humid; September is the least humid month; and the average annual humidity percentage is 80.0%.¹⁷ High humidity can affect the properties and reduce the quality of gypsum material.¹⁶ Gypsum with hygroscopic properties will become moist (damp) in places with high humidity.¹⁸ The water content in gypsum powder reduces the gypsum hemihydrate molecule, increasing the setting time of the material.¹¹

SIRIUS gypsum's setting time was the highest compared to the other two gypsum products. A factor that increases the setting time of SIRIUS° gypsum is the powder-to-water ratio when gypsum is manipulated. This study used a powder-to-water ratio of 2:1 following the Type II dental gypsum ratio. SIRIUS gypsum manufacturer recommends a 3:1 powder-to-water ratio, which is a type III gypsum ratio.10 SIRIUS® gypsum is thought to be an Orthodontic plaster containing type II gypsum and type III gypsum.¹⁹ A-hemihydrate particles are low in porosity so that they do not require as much gypsum as water compared to β -hemihydrate particles.20 The excess water used when mixing would make the gypsum's setting time longer. 18 This gypsum material contains α -hemihydrate particles with a denser and less porous particle structure so that it can be used for manufacturing study models because it re-produces accurate oral anatomy.²¹ The long setting time for SIRIUS gypsum is because the orthodontic gypsum's working time is longer than other gypsums, aiming to achieve more accurate study models.10

Another factor influencing the difference in gypsum setting time in this study is composition. The three tested gypsums have different manufacturers, with different percentages of calcium sulfate hemihydrate and other chemicals in their structure. Several chemicals are used by manufacturers to manipulate the setting time for a gypsum product. A material often used to prolong the setting time is 1–2% borax. Borax can form a coating on a hemihydrate molecule so that it cannot contact water, decreasing the solubility of the hemihydrate (i.e., increasing the setting time). The material often used to speed up setting time is 2–3% potassium sulfate. These chemicals can make hemihydrate molecules more soluble when mixed with water.^{2,10,22}

This study showed the lowest initial setting time and final setting time in APLUS* construction gypsum,

while the highest initial setting time and final setting time were recorded in SIRIUS type II dental gypsum. The difference in values in each gypsum group can be influenced by the amount of crystallization core, ambient humidity, and composition.²

Conclusion

Construction gypsum and type II dental gypsum (dental plaster and White orthodontic) have different initial and final setting times. The APLUS gypsum's setting time meets the ANSI-ADA standard #25. Construction gypsum (APLUS*) can be used as a substitute for type II dental gypsum. Further studies should be conducted to compare the other properties of these three gypsum materials.

Authors' Contributions

ID was responsible for reviewing the literature and performing the experiments as fulfillment of requirements for her degree. OW was responsible for the experiment design and hypothesis and contributed to the discussion. JAB conceived the idea and contributed to prepare and wrote the manuscript. All the authors have read and agreed to the published version of the manuscript.

Acknowledgments

Thanks to DMT-Core Faculty of Dentistry, Trisakti University for permitting this research to be carried out and to Rosalina Tjandrawinata, PhD, and Dewi Liliany, MSi, for the scientific input to make this research possible.

Financial support was provided by the authors.

Competing Interests

The authors declare no competing interests with regards to the authorship and/or publication of this article.

Ethics approval

Not applicable.

References

- Salon S. Making of ceiling gypsum board with hard waste from cigarette paper factory and Polivinil alcohol bond [Thesis], 2009.
- 2. Anusavice KJ, Shen C, Rawls HR. Gypsum products. In: Phillips science and dental materials. 12th ed. St. Louis: Elsevier; 2012: 182-93.
- 3. Living with Gypsum: From Raw Material to Finished Products. Euro Gypsum 2008:4-7.
- 4. Sophia M, Sakthieswaran N. Gypsum as a construction

- material a review of recent developments. Int J Innov Res Sci Technol. 2016;2(12):315-23.
- Trisna H, Mahyudin A. Physics and Mechanic Characteristic Analysis of Composite Gypsum Board and Palm Fiber with Borax Increments (Dinatrium Tetraborat Decahydrate). J Fis Unand 2012;1(1):30-36.
- 6. Maail RS, Hermawan D, Hadi YS. Manufacture of cementgypsum board using core-kenaf (Hibiscus cannabinus L.) with curing autoclave technology. J Parennial 2006;2(2):12-
- 7. Alberto N, Carvalho L, Lima H, Antunes P, Nogueira R, Pinto JL. Characterization of different water/powder ratios of dental gypsum using fiber Bragg grating sensors. Dent Mater J. 2011;30(5):700-6. doi: 10.4012/dmj.2011-004
- Araújo TM De, Fonseca LM, Caldas LD, Costa-pinto RA. Preparation and evaluation of orthodontic setup. Dental Press J Orthod. 2012;17(3):146-65.
- 9. McCabe JF, Walls AWG. Applied dental materials. 9th ed. Oxford: Wiley; 2008.
- 10. Manappallil JJ. Dental laboratory and processes. In: Manappallil, editor. Basic dental materials. 4th ed. New Delhi: Jaypee Brothers Medical Publishers; 2016: 312-323.
- 11. Sakaguchi RL, Powers JM. Science of dental material. In: Sakaguchi R, Powers J, editors. Craig's restorative dental Materials. 13rd ed. St. Louis: Mosby; 2012: 300-301.
- 12. Ministry of Health, Republic of Indonesia. Ministry of Health Regulation Article No. 1189/MoH/REG/VIII/ 2010. Indonesia: Ministry of Health, Republic of Indonesia; 2010.
- 13. Ministry of Health, Republic of Indonesia. Ministry of Health Regulation Article No 1190/ MoH/REG/VIII/ 2010. Indonesia: Ministry of Health, Republic of Indonesia; 2010.
- 14. AP W, Hasratiningsih Z, Manurung R. Differentiation of physical and mechanical properties analysis of self-made gypsum product with raw material from Tasikmalaya with standar ISO and factory made. Padjadjaran Journal of Dentistry. 2008: 20(3):143-8. doi: 10.24198/pjd. vol20no3.14119
- 15. Powers JM, Wataha JC, Chen YW, Craig RG. Dental materials: foundations and applications. 11th ed. St. Louis: Elsevier; 2017.
- 16. Kusumastuti KS, Irawan B, Damiyanti M. Effect of shelf life on compressive strength of type IV gypsum. IOP Conf. Series: Journal of Physics: Conf. Series 884 (2017) 012092. doi:10.1088/1742-6596/884/1/012092
- 17. Average humidity Jakarta, Indonesia. Available from: https://www.weather-atlas.com/en/indonesia/jakartaclimate#humidity_relative Accessed July 23, 2020.
- 18. Powers JM, Wataha JC. Dental materials: properties and manipulation. 10th ed. St. Louis: Mosby; 2012
- 19. Paul R. A Clinical Guide to Applied Dental Materials. Br Dent J. 2013;214(9):479-480. doi: 10.1038/sj.bdj.2013.479
- 20. Scheller-Sheridan C. Basic guide to dental materials. 1st ed. London: Wiley-Blackwell; 2010.
- 21. Van Noort R. Introduction to dental materials. 4th ed.Edinburgh: Mosby, Elsevier; 2013.
- 22. Overberger J. Gypsum materials. In: Gladwin MA, Bagby M, editors. Clinical aspects of dental materials. 3rd ed. Philadelphia: Lippincott Williams & Wilkins; 2008: 124.

Setting time of construction gypsum, dental plaster, and white orthodontic gypsum

by Octarina

Submission date: 22-Jul-2025 02:47PM (UTC+0700)

Submission ID: 2568031444

File name: ruction_gypsum,_dental_plaster,_and_white_orthodontic_gypsum.pdf (165.55K)

Word count: 3343 Character count: 17586







Original Article



Setting time of construction gypsum, dental plaster, and white orthodontic gypsum

Imelda Darmawan 👵 , Octarina Willy , Johan Arief Budiman 🖰 👵

Department and Institution, Faculty of Dentistry, Trisakti University, Jakarta, Indonesia

ARTICLE INFO

Article History: Received: 25 May 2020 Accepted: 24 Jul. 2020 ePublished: 21 Sep. 2020

Keywords: Construction gypsum, Dental plaster, Final setting time, Initial setting time, White orthodontic

gypsum

Absrtact

Background. Dental plaster, white orthodontic gypsum, and construction gypsum have β -hemihydrate particles. Setting time is an essential property of dental gypsum, which can affect the strength of the material. This research aimed to compare construction gypsum, dental plaster, and white orthodontic gypsum's initial and final setting times.

Methods. Three groups were included in this experimental laboratory study: construction gypsum (A), dental plaster (B), and white orthodontic gypsum (C). Each group consisted of 10 samples. Gypsum manipulation consisted of using 120 gr of powder and 60 mL of water. Gypsum powder and water were mixed using a gypsum mixer at 120 rpm. A homogeneous mixture was poured into a mold, and the setting time was measured using a Gillmore needle, according to ASTM C03-266. The initial setting time test was measured using 113.4 grams and a -2.12mm needle. The final setting time was measured using 453.6 grams and a -1.06mm needle. This test was repeated until the needle failed to penetrate the gypsum's surface. All the data were analyzed with one-way ANOVA and post hoc Tukey tests using SPSS 23.

Results. The average initial setting time for groups A, B, and C were 1.40±16.17 ,1.19±10.39, and 1.51±24.46, respectively. The average final setting time for groups A, B, and C were .0.79±15.97 0.88±24.31) and 0.66±33.37, respectively. One-way ANOVA and post hoc Tukey tests showed significant differences in the initial and final setting times between the three groups (P<0.05).

Conclusion. There were differences in setting time between dental plaster, white orthodontic gypsum, and construction gypsum. The construction gypsum's setting time is suitable as a type II dental gypsum, according to ADA No.25.

Introduction

Gypsum is one of the natural minerals that contain calcium, hydrogen, water, and sulfur, known as calcium sulfate dihydrate (CaSO₄,2H₂O). Gypsum products are available in the form of a fine white powder which has undergone calcination or heating at a temperature of 110-130°C in the open air. This process causes some of the gypsum material to become dehydrated to calcium sulfate hemihydrate (CaSO₄,2H₂O) called Plaster of Paris in the form of β-hemihydrate. ²³⁴

Construction gypsum is used in the manufacture of gypsum boards or ceilings in the building interior industry. Gypsum is the material of choice because it has a low price, is easy to install, and has characteristics that meet the criteria as building materials. Construction gypsum material is in the form of β -hemihydrate with the characteristics of low density and high porosity. This gypsum form of hemihydrate becomes hydrated when mixed with water and undergoes the process of setting. At the

same time, there is an increase in the strength of the material because the final microstructure of set gypsum material can affect the gypsum stiffness.⁶⁷

Type II dental gypsum or dental plaster contains β-hemihydrate particles and is used as a study model material, a set-up material for the working model on articulators, and dental laboratory material. Orthodontic white gypsum containing β -hemihydrate particles is used as a study model in orthodontics to provide a three-dimensional picture of the patient's occlusion, making it easier for dentists to determine treatment plans." The material in dentistry should have the characteristics that affect the strength, such as setting time. The setting process starts when the gypsum powder is mixed with water (hydration). There are two time intervals: initial setting time and final setting time, when setting time is in progress. The time from mixing gypsum powder with water until half-hardened gypsum consistency is achieved is called the initial setting time, while the final setting time is the time from mixing until the material hardens and can be removed from the mold.

*Corresponding authors: Johan Arief Budiman. Tel:+62-21-5655786 Email.drg. Johanarief@yahoo.com.

© 2020 The Author(s). This is an open access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Humidity can influence the setting process. The setting time can be measured by penetration testing using the Gillmore needle. 10.11

Based on the Ministry of Health, Republic of Indonesia Regulation Article No. 1189/MoH/REG/ VIII/2010 concerning the production of medical devices and household health supplies and Ministry of Health, Republic of Indonesia Regulation Article No. 1190/MoH/REG/VIII/2010 concerning distribution permits for medical devices and household health supplies. 12,13 all the dental materials circulating in Indonesia must have a distribution permit, including imported dental plaster and white orthodontics gypsum. These regulations make it difficult for both imported gypsums to be found on the Indonesian market because it is quite difficult to obtain the permit to distribute medical devices. The attempt to produce local gypsum products, with wet calcination method using autoclave, had been compared.14 The research raises the thought of using construction gypsum, abundant in Indonesia, as an alternative material for dental plaster and white orthodontics gypsum. Construction gypsum has the same basic material and molecular shape as dental plaster and white orthodontics plaster. This study aimed to compare construction gypsum, dental plaster, and white orthodontic gypsum's initial and final setting times

Methods

This laboratory study was conducted at the Dental Materials and Testing Centre of Research (DMT-Core) at our institution in October-November 2019. The samples used were divided into three groups: construction gypsum, dental plaster, and white orthodontic gypsum. The 10 gypsum block samples for each group were set based on the Federer formula. The tools used in this research were Gillmore needle setting time test equipment, molds, measuring cups, automatic mixers, vibrators, digital scales, and water temperature thermometers. The materials used in this study were Aquadest, APLUS' construction gypsum, Pro-BASE' dental plaster, and SIRIUS' white orthodontic gypsum.

Manipulating the gypsum block sample to be tested began by weighing 120 grams of gypsum powder and taking 60 mL of water. Water was firstly put in a bowl; then, the gypsum powder was slowly added and let stand for 30 seconds. When gypsum powder contacted water, the stopwatch calculation started. Mixing was carried out for 60 seconds using an automatic mixer to obtain a homogeneous mixture.² The next stage consisted of pouring the mixture into a

block-mold, which was then vibrated with a vibrator so that the surface of the gypsum sample was flat. The gypsum block sample that was poured into the mold was tested by setting the time under the Gillmore needle to test the initial setting time.

The Gilmore needle was positioned vertically against the sample with the needle tip in contact with the sample's surface. The needle was then released until it penetrated the sample. The time of the needle for penetrating the sample was 15 seconds. After 15 seconds, the needle was removed; then, the gypsum attached to the needle tip was cleaned with tissue paper and positioned for the next penetration area. The penetration of the needle was carried out around the sample to get a different puncture area. The needle was removed in 15 seconds; therefore, the one-time penetration took 30 seconds. This continued until the needle could not leave a trace on the surface of the gypsum block sample. When the needle to test the initial setting time could not leave a trace on the gypsum surface, the test proceeded with positioning the sample under the Gillmore needle to test the final setting time. The process to test the final setting time was the same as the initial setting time.2

Statistical analysis of the data in this study consisted of one-way ANOVA (SPSS 23). If the results of the data analysis produced significant differences, then a further test was conducted, i.e., post hoc Tukey test.

Results

Table 1 presents the test results of construction gypsum and type II dental gypsum's setting time. The lowest mean of initial setting time was found in the construction gypsum with 10 minutes and 39 seconds; the highest mean was found in the SIRIUS' dental gypsum with 24 minutes and 46 seconds. The lowest final setting time was also found in the construction gypsum with 15 minutes and 97 seconds; the highest mean value in the dentistry gypsum SIRIUS' was 33 minutes and 37 seconds.

This study used one-way ANOVA after it was ensured that the data were distributed normally. The initial and final setting time measurement data in this study fulfilled all the requirements to perform one-way ANOVA. ANOVA showed the significance of the initial setting time variable, and the final setting time showed a significant initial setting time difference between the construction gypsum and type II dental gypsum (dental plaster and white orthodontic) (P<0.05). Further analyses were carried out with post hoc Tukey tests at a significance level of P<0.05. Tables 2 and 3 show significant differences in initial setting time and final setting time in all the tested

Table 1. Comparison of average results of measurement of construction gypsum setting time and dental gypsum

2000	1922	Initial setting time	Final setting time
Gypsum	N	± SD (min)	± SD (min)
APLUS'	10	10,39±1.19	15,97±0,79
Pro BASE	10	16.17±1.40	24.31±0,88
SIRIUS	10	24.46±1.51	33.37±0.66

groups (P<0.05). Therefore, it can be concluded that all the groups exhibited significant differences.

Discussion

Table 1 presents the average setting times of construction gypsum (APLUS') and type II dental gypsum (Pro-BASE and SIRIUS). APLUS gypsum has an average initial setting time of 10 minutes and 39 seconds, with a final setting time of 15 minutes and 97 seconds. This shows that the construction gypsum (APLUS') setting time meets ADA #25 standard specifications (8-16 minutes). Pro-BASE gypsum has an average initial setting time of 16 minutes and 17 seconds, with a final setting time of 24 minutes and 31 seconds. These results indicate that the Pro-BASE' gypsum setting time does not meet the ADA #25 standard. SIRIUS' gypsum has an average initial setting time of 24 minutes and 46 seconds and a final setting time of 33 minutes 37 seconds. The average setting time of SIRIUS gypsum does not meet ADA #25 standard. Other research on local gypsum products showed that the average setting time of the self-made gypsums was around 8 minutes and 7 seconds and 3 minutes and 40 seconds.14 The study above also reported an average setting time of 20 minutes and 21 seconds for dental plaster and 10 minutes and 34 seconds for dental stone.14

Table 1 shows that the average initial setting time value was lowest in APLUS construction gypsum and highest in SIRIUS gypsum. The final time setting values of three type gypsums in this study were different, as shown in Table 1. This time setting difference can be influenced by the amount of crystallization core in the gypsum. During the setting reaction, a nucleation process occurs between the calcium (Ca²¹) and sulfate (SO₄²) ions, which form a molecular bond. When these two molecules come together, a nucleus of crystallization will emerge. The higher the number of crystallization nuclei, the faster the formation of dihydrated crystals so that gypsum will harden faster.¹¹6 The factor making the average setting time of type II dental gypsum

Table 2. Statistical analysis of initial setting time of tested gypsum groups with one-way ANOVA and post hoc Tukey tests

Gypsum	APLUS	Pro BASE	SIRIUS
APLUS'	12	0.000*	0.000*
Pro-BASE	22	13000000	0.000*
SIRIUS'			1110011

*P<0.05 significance

Table 3. Statistical analysis of final setting time of tested gypsum groups with one-way ANOVA and post hoc Tukey tests

Gypsum	APLUS	Pro BASE	SIRIUS
APLUS	- 33	0.000*	0.000*
Pro-BASE	3.7	53	0.000*
SIRIUS	- 3		

*P<0.05 significance

longer in this study than the ADA #25 standard (8-16 minutes) is the hygroscopic nature of gypsum material (drawing water from the air). Gypsum storage contaminated with air can attract water and cause low solubility of dihydrate molecules, increasing the setting time of gypsum. Based on ISO 6873, the standard for Dental gypsum storage is $50\% \pm 10\%$. The research on gypsum material found that Indonesia's humidity level is quite high, reaching 70%.16 The annual weather report (2019) showed that in Jakarta (the capital of Indonesia) January is on average the most humid; September is the least humid month; and the average annual humidity percentage is 80.0%.17 High humidity can affect the properties and reduce the quality of gypsum material.16 Gypsum with hygroscopic properties will become moist (damp) in places with high humidity.18 The water content in gypsum powder reduces the gypsum hemihydrate molecule, increasing the setting time of the material.11

SIRIUS' gypsum's setting time was the highest compared to the other two gypsum products. A factor that increases the setting time of SIRIUS' gypsum is the powder-to-water ratio when gypsum is manipulated. This study used a powder-to-water ratio of 2:1 following the Type II dental gypsum ratio. SIRIUS' gypsum manufacturer recommends a 3:1 powder-to-water ratio, which is a type III gypsum ratio.10 SIRIUS° gypsum is thought to be an Orthodontic plaster containing type II gypsum and type III gypsum.19 A-hemihydrate particles are low in porosity so that they do not require as much gypsum as water compared to β-hemihydrate particles.20 The excess water used when mixing would make the gypsum's setting time longer.18 This gypsum material contains α-hemihydrate particles with a denser and less porous particle structure so that it can be used for manufacturing study models because it re-produces accurate oral anatomy.21 The long setting time for SIRIUS' gypsum is because the orthodontic gypsum's working time is longer than other gypsums, aiming to achieve more accurate study models.¹⁰

Another factor influencing the difference in gypsum setting time in this study is composition. The three tested gypsums have different manufacturers, with different percentages of calcium sulfate hemihydrate and other chemicals in their structure. Several chemicals are used by manufacturers to manipulate the setting time for a gypsum product. A material often used to prolong the setting time is 1-2% borax. Borax can form a coating on a hemihydrate molecule so that it cannot contact water, decreasing the solubility of the hemihydrate (i.e., increasing the setting time). The material often used to speed up setting time is 2-3% potassium sulfate. These chemicals can make hemihydrate molecules more soluble when mixed with water.^{2,10,22}

This study showed the lowest initial setting time and final setting time in APLUS' construction gypsum,

while the highest initial setting time and final setting time were recorded in SIRIUS' type II dental gypsum. The difference in values in each gypsum group can be influenced by the amount of crystallization core, ambient humidity, and composition.3

Conclusion

Construction gypsum and type II dental gypsum (dental plaster and White orthodontic) have different initial and final setting times. The APLUS' gypsum's setting time meets the ANSI-ADA standard #25. Construction gypsum (APLUS') can be used as a substitute for type II dental gypsum. Further studies should be conducted to compare the other properties of these three gypsum materials.

Authors' Contributions

ID was responsible for reviewing the literature and performing the experiments as fulfillment of requirements for her degree. OW was responsible for the experiment design and hypothesis and contributed to the discussion. JAB conceived the idea and contributed to prepare and wrote the manuscript. All the authors have read and agreed to the published version of the manuscript.

Acknowledgments

Thanks to DMT-Core Faculty of Dentistry, Trisakti University for permitting this research to be carried out and to Rosalina Tiandrawinata, PhD, and Dewi Liliany, MSi, for the scientific input to make this research possible.

Funding

Financial support was provided by the authors.

Competing Interests

The authors declare no competing interests with regards to the authorship and/or publication of this article.

Ethics approval

Not applicable.

References

- Salon S. Making of ceiling gypsum board with hard waste from cigarette paper factory and Polivinil alcohol bond
- [Thesis], 2009. Anusavice KJ, Shen C, Rawls HR. Gypsum products. In: Phillips science and dental materials. 12th ed. St. Louis: Elsevier; 2012: 182-93.
- Living with Gypsum: From Raw Material to Finished Products. Euro Gypsum 2008:4-7.
 Sophia M, Sakthieswaran N. Gypsum as a construction

- material a review of recent developments. Int J Innov Res Sci Technol. 2016;2(12):315-23.
- Trisna H, Mahyudin A. Physics and Mechanic Characteristic Analysis of Composite Gypsum Board and Palm Fiber with Borax Increments (Dinatrium Tetraborat Decahydrate), J Fis Unand 2012;1(1):30-36.
- Maail RS, Hermawan D, Hadi YS. Manufacture of cement-gypsum board using core-kenaf (Hibiscus cannabinus L.) with curing autoclave technology. J Parennial 2006;2(2):12-
- Alberto N, Carvalho L, Lima H, Antunes P. Nogueira R, Pinto JL. Characterization of different water/powder ratios of dental gypsum using fiber Bragg grating sensors. Dent Mater J. 2011;30(5):700-6. doi: 10.4012/dmj.2011-004
- Araújo TM De, Fonseca LM, Caldas LD, Costa-pinto RA. Preparation and evaluation of orthodontic setup. Dental
- Press J Orthod. 2012;17(3):146-65. McCabe JF, Walls AWG. Applied dental materials. 9th ed. Oxford: Wiley; 2008.
- 10. Manappallil JJ. Dental laboratory and processes. In: Manappallil, editor. Basic dental materials. 4th ed. No Delhi: Jaypee Brothers Medical Publishers; 2016: 312-323
- Sakaguchi RL, Powers JM. Science of dental material. In: Sakaguchi R, Powers J, editors. Craig's restorative dental Materials. 13rd ed. St. Louis: Mosby; 2012; 300-301.
- Ministry of Health, Republic of Indonesia. Ministry of Health Regulation Article No. 1189/MoH/REG/VIII/ 2010.
 Ministry of Health, Republic of Indonesia; Ministry of Health, Republic of Indonesia; Ministry of Health Republic of Indonesia. Ministry of Health Regulation Article No. 1190/ MoH/REG/VIII/ 2010.
- Indonesia: Ministry of Health, Republic of Indonesia; 2010.
 AP W, Hasratiningsih Z, Manurung R. Differentiation of physical and mechanical properties analysis of self-made gypsum product with raw material from Tasikmalaya with standar ISO and factory made. Padjadjaran Journal of Dentistry. 2008: 20(3):143-8. doi: 10.24198/pjd. vol20no3.14119
- Powers JM, Wataha JC, Chen YW, Craig RG. Dental materials: foundations and applications. 11th ed. St. Louis: Elsevier: 2017
- Elsevier; 2017.

 16. Kusumastuli KS, Irawan B, Damiyanti M. Effect of shelf life on compressive strength of type IV gypsum. IOP Conf. Series: Journal of Physics: Conf. Series 884 (2017) 012092. doi:10.1088/1742-6596/884/1012092
- Average humidity Jakarta, Indonesia. Available from: https://www.weather-atlas.com/en/indonesia/jakartaclimate#humidity_relative Accessed July 23, 2020.
- Powers JM, Wataha JC. Dental materials: properties and manipulation. 10th ed. St. Louis: Mosby; 2012.
- Paul R. A Clinical Guide to Applied Dental Materials. Br Dent J. 2013;214(9):479-480. doi: 10.1038/sj.bdj.2013.479
- Scheller-Sheridan C. Basic guide to dental materials. 1st ed. London: Wiley-Blackwell; 2010.
 Van Noort R. Introduction to dental materials. 4th

- Van Noort K. Introduction to dental materials. 4th ed.Edinburgh: Mosby, Elsevier; 2013.
 Overberger J. Gypsum materials. In: Gladwin MA, Bagby M, editors. Clinical aspects of dental materials. 3rd ed. Philadelphia: Lippincott Williams & Wilkins; 2008: 124.

Setting time of construction

	ALITY REPORT	
	9% 15% 4% 11% ARITY INDEX INTERNET SOURCES PUBLICATIONS STUDENT PA	PERS
PRIMAF	Y SOURCES	
1	liberezmoussa.fr Internet Source	2%
2	Submitted to University of Worcester Student Paper	2%
3	www.livelaptopspec.com Internet Source	2%
4	furniture-good.ru Internet Source	2%
5	jrcm.tbzmed.ac.ir Internet Source	2%
6	www.seniorcare2share.com Internet Source	2%
7	Submitted to University of Wales Institute, Cardiff Student Paper	1%
8	journals.sagepub.com Internet Source	1%
9	Submitted to RMIT University Student Paper	1%
10	jurnal.pdgi.or.id Internet Source	1%
11	dentistry.tbzmed.ac.ir Internet Source	1%
12	Submitted to Stourbridge College Student Paper	1%

13	Submitted to Universidad Cientifica del Sur Student Paper	1 %
14	Submitted to Queen Mary and Westfield College Student Paper	1%
15	www.frontiersin.org Internet Source	1%

Exclude quotes

On On Exclude matches

< 15 words

Exclude bibliography