



Search...   « 1 2 »

Page 1 of 2 | Total Records : 17

Publications	Citation
Strawberry Extract's Effects on Enterococcus faecalis and Porphyromonas gingivalis Biofilms in vitro El Armelia Sari Widyarman, Stephanie Brigitta Widjaja SCIENTIFIC DENTAL JOURNAL 1 (1), 1-5	15
Consumption of Yogurt Containing Probiotic Bifidobacterium Lactis Reduces Streptococcus mutans in Orthodontic Patients TP Armelia Sari Widyarman, Shirley Trisna Yunita SCIENTIFIC DENTAL JOURNAL 2 (1), 19-25	10
Comparing the Effectivities of Chitosan Citrate and Chitosan Acetate in Eradicating Enterococcus faecalis Biofilm ASW Uppalavanna Witedja, Tien Suwartini, Anastasia E Prahasti SCIENTIFIC DENTAL JOURNAL 2 (1), 1-7	4
Optimization of Emergence Profile of Implant Prosthesis: A Literature Review KB Minoru Sanda, Daisuke Sato SCIENTIFIC DENTAL JOURNAL 2 (1), 31-37	2
Level of Salivary Uric Acid in Gingivitis and Periodontitis Patients SV Muhammad Ihsan Rizal SCIENTIFIC DENTAL JOURNAL 1 (1), 7-10	2
Microbiomics of Oral Biofilms: Driving The Future of Dental Research TS Chaminda Jayampath Seneviratne SCIENTIFIC DENTAL JOURNAL 1 (1), 25-30	1
The Addition of Pharmacological Treatment to Physiotherapy in Pain Reduction of TMD-myalgia Patients HP Carolina Marpaung SCIENTIFIC DENTAL JOURNAL 2 (1), 25-30	0
The Efficacy of Fish Scales as Bone Graft Alternative Materials IN Abdul Gani Soulissa SCIENTIFIC DENTAL JOURNAL 2 (1), 9-17	0
The Efficacy of Fish Scales as Bone Graft Alternative Materials IN Abdul Gani Soulissa SCIENTIFIC DENTAL JOURNAL 2 (1), 9-17	0
The Importance of The Dentist - Patient Relationship in Oral Cancer Treatment RA Indrayadi Gunardi SCIENTIFIC DENTAL JOURNAL 1 (1), 17-23	0
Pigmented Oral Lichen Planus: A Case Report TGK Firstine Kelsi Hartanto SCIENTIFIC DENTAL JOURNAL 1 (1), 11-16	0

Page 1 of 2 | Total Records : 17 « 1 2 »

**Penerbit:**  
 Faculty of Dentistry, Trisakti University  
[Website](#) | [Editor URL](#)

**Address:**  
 Jl. Kyai Tapa No.260, Grogol, Jakarta Barat 11440, Indonesia  
 Jakarta

**Email:**  
 armeliasari@trisakti.ac.id

**Phone:**  
 0811929379

Last Updated :  
 2020-12-01

Level of Salivary Uric Acid in Gingivitis and Periodontitis Patients SV Muhammad Ihsan Rizal SCIENTIFIC DENTAL JOURNAL 1 (1), 7-10	0
Knowledge and attitude differences among students at dental-education institutions as a result of interprofessional education AB Marta Juslily, Tri Erri Astoeti SCIENTIFIC DENTAL JOURNAL 4 (2), 64-71	0
Correlation between body mass index with anterior crowding and enamel hypoplasia of sundanese children in Bandung YY Linda Sari Sembiring, Loes D Sjahruddin SCIENTIFIC DENTAL JOURNAL 4 (2), 59-63	0
The effect of 10% forest honey rinsing on dental plaque score for children aged 9-12 years FM Ulfia Yasmin, Sulistiawati, Hema Awalia, Budi Asri SCIENTIFIC DENTAL JOURNAL 4 (2), 54-58	0
The effectiveness of mixtures of tetracycline, acid and detergent, and mixtures of chlorhexidine and ethylenediaminetetraacetic acid in preventing the growth of Enterococcus ... BOR Tien Suwartini, Eljira Anggraini, Meiny Faudah Amin SCIENTIFIC DENTAL JOURNAL 4 (2), 49-53	0
The effect of repeated preheating on diametral tensile strength of composite resin with different fillers RT Ellen Winarta, Tien Suwartini, Anastasia Elsa Prahasti SCIENTIFIC DENTAL JOURNAL 4 (2), 44-48	0
Dental negligence: It is time to overcome it RC Shail Kumari, Sunil Kumar Mishra SCIENTIFIC DENTAL JOURNAL 4 (2), 39-43	0



ISSN (Print) : 2580-6548  
ISSN (Online): 2541-321X



Volume 4 • Issue 2 • Mei-August 2020

# SCIENTIFIC DENTAL JOURNAL

Official Journal of Faculty of Dentistry, Trisakti University, Jakarta, Indonesia

[www.scidentj.com](http://www.scidentj.com)





About ▾

Articles ▾

Authors ▾

Search ▾

Subscribe

Contact Us

Reader Login ▾

## Editorial Board

About the journal

### Editor-in-Chief:

**Dr. Armelia Sari Widyarman**

Department of Microbiology, Faculty of Dentistry, Trisakti University, Jakarta, Indonesia  
armeliasari@trisakti.ac.id  
sdj@trisakti.ac.id

### Executive Editor:

**Dr. Rosalina Tjandrawinata,**

Department of Dental Material, Faculty of Dentistry, Trisakti University, Jakarta, Indonesia  
rosatjandrawinata@gmail.com

### Editorial Board:

**Dr. Carolina Marpaung**

Department of Prosthodontics, Faculty of Dentistry, Trisakti University, Jakarta, Indonesia  
carolina@trisakti.ac.id

POPULAR ARTICLES

JOIN AS REVIEWER

GET EMAIL ALERTS

RECOMMEND

**Dr. Chaminda Jayampath Seneviratne,**  
Faculty of Dentistry, National University of Singapore, Singapore  
jaya@nus.edu.sg

**Prof. SG Damlee**  
Pediatric and Preventive Dentistry, Maharishi Markandeshwar University, India  
sgdamlee@gmail.com

**Dr. Risa Chaisuparat**  
Associate Professor, Department of Oral Pathology,  
Faculty of Dentistry, Chulalongkorn University, Thailand  
mink\_risa@yahoo.com

**Prof. Sittichai Koontongkaew**  
Department of Oral Biology, Faculty of Dentistry, Thammasat University, Thailand  
koontongkaew@gmail.com

**Prof. Rahmi Amtha**  
Department of Oral Medicine, Faculty of Dentistry, Trisakti University, Indonesia  
rahmi.amtha@gmail.com

**Dr. M. Orliando Roeslan**  
Department of Histology, Faculty of Dentistry, Trisakti University, Indonesia  
orliandoichol@gmail.com

**Dr. Muhammad Ihsan Rizal**  
Department of Biochemistry and Molecular Biology, Division of Oral Biology, Faculty of Dentistry, Trisakti University, Indonesia  
ihsan.rizal@gmail.com

### Administration:

**Dr. Enrita Dian Rahmadini**  
Department of Pedodontics, Faculty of Dentistry, Trisakti University, Indonesia  
enritadian@gmail.com

**Mega Cahyati**  
Faculty of Dentistry, Trisakti University, Indonesia  
mega.cahyati@gmail.com

**Mario Richi**  
MiCORE Laboratory, Faculty of Dentistry, Trisakti University, Indonesia  
mario.richi1995@gmail.com

**Moh Shidqon**  
Faculty of Economics and Business, Trisakti University, Indonesia  
ajidshidqon@gmail.com

# Scientific Dental Journal

Volume 4 | Issue 2 | May - August 2020

## CONTENTS

### REVIEW ARTICLE

#### **Dental Negligence: It Is Time to Overcome It**

Shail Kumari, Sunil Kumar Mishra, Ramesh Chowdhary

39

### ORIGINAL ARTICLES

#### **The Effect of Repeated Preheating on Diametral Tensile Strength of Composite Resin with Different Fillers**

Ellen Winarta, Tien Suwartini, Anastasia Elsa Prahasti, Rosalina Tjandrawinata

44

#### **The Effectiveness of Mixtures of Tetracycline, Acid and Detergent, and Mixtures of Chlorhexidine and Ethylenediaminetetraacetic Acid in Preventing the Growth of *Enterococcus faecalis*: An *Ex vivo* Study**

Tien Suwartini, Elfira Anggraini, Meiny Faudah Amin, Boedi Oetomo Roeslan

49

#### **The Effect of 10% Forest Honey Rinsing on Dental Plaque Score for Children aged 9–12 Years**

Ulfa Yasmin, Sulistiawati, Hema Awalia, Budi Asri, Fairuz Mudiah

54

#### **Correlation between Body Mass Index with Anterior Crowding and Enamel Hypoplasia of Sundanese Children in Bandung**

Linda Sari Sembiring, Loes D Sjahrudin, Yohana Yusra

59

#### **Knowledge and Attitude Differences among Students at Dental-Education Institutions as a Result of Interprofessional Education**

Marta Juslily, Tri Erri Astoeti

64

## Original Article

# The Effect of Repeated Preheating on Diametral Tensile Strength of Composite Resin with Different Fillers

Ellen Winarta, Tien Suwartini<sup>1</sup>, Anastasia Elsa Prahasti<sup>1</sup>, Rosalina Tjandrawinata<sup>2</sup>

Conservative Dentistry Post Graduate Program, Faculty of Dentistry, Trisakti University, Departments of <sup>1</sup>Conservative Dentistry, <sup>2</sup>Dental Biomaterial, Faculty of Dentistry, Trisakti University, West Jakarta, Java, Indonesia

Received : 01-10-19  
Revised : 18-12-19  
Accepted : 06-05-20  
Published Online: 08-06-20

## BACKGROUND

The development of adhesive systems has made composite resin the material of choice today.<sup>1,2</sup> Cavity preparation has been minimized,<sup>3</sup> but a small cavity is difficult to restore with condensable composites.<sup>4,6</sup> During mastication, the restoration is placed under pressure;<sup>7</sup> therefore, composite restorations require good mechanical properties.<sup>8</sup> A significant correlation is found between the surface of the composite restoration and its diametral tensile strength.<sup>9</sup> Composite resin fillers have been studied for the recommended use in the posterior teeth.<sup>10,11</sup>

Recently, a preheating device has been marketed.<sup>12</sup> Soliman concluded that heating a composite resin increased its micro strength.<sup>13</sup> Uctasli revealed that heated

**ABSTRACT** **Background:** The development of adhesive systems has made the removal of carious lesion a minimally invasive procedure. Composite resin is the material of choice today, but the filler composition of the resin varies. Packable composite resin has good mechanical properties, but its high viscosity makes it hard to manipulate. Several methods, such as preheating, are used to decrease this viscosity. A syringe of composite resin might be preheated several times, but the effect of repeated preheating is unknown. **Objectives:** The purpose of this research was to analyze the effect of repeated preheating on the mechanical properties of a composite resin with different fillers. **Method:** Microhybrid, nanohybrid, and nanofill composite resins were preheated (ten times, twenty times, and control), molded into cylinder molds 6 mm in diameter and 3 mm in height, flattened with a celluloid strip, and polymerized with an light-emitting diode light-curing unit for 40 s. A total of 180 specimens were tested. The specimens were divided into two groups: Group 1 was immediately tested using a universal testing machine. Group 2 was soaked in 37°C artificial saliva for 24 h before testing. Each specimen was tested using the universal testing machine with the pressure side with a 1 mm/s crosshead speed. **Result:** Nanohybrid composite resin had the most stable diametral tensile strength after repeated preheating, whereas nanofill composite had the weakest strength. The increase and decrease in the diametral tensile strength in each group were not statistically significant. **Conclusion:** Repeated preheating does not significantly affect the diametral tensile strength of composite resin.

**KEYWORDS:** Composite resin, diametral tensile strength, repeated preheating

composite resin had a better adaptation to the cavity wall.<sup>14</sup> Nada and El-Mowafy indicated that heating composite resins increased their compression strength.<sup>15</sup> One syringe of composite resin can be used several times, which means that the heating process may also be repeated many times.<sup>16,17</sup> The aim of this study was to analyze whether reheating of composite resins has an impact on the diametral tensile strength of composite resins.

## MATERIALS AND METHODS

The samples in this study were 180 composite resin specimens with cylindrical shape 6 mm in diameter

**Address for correspondence:** Dr. Tien Suwartini, Trisakti University, West Jakarta, Java, Indonesia. E-mail: [tiensuwartini@hotmail.com](mailto:tiensuwartini@hotmail.com)

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: [WKHLRPMedknow\\_reprints@wolterskluwer.com](mailto:WKHLRPMedknow_reprints@wolterskluwer.com)

**How to cite this article:** Winarta E, Suwartini T, Prahasti AE, Tjandrawinata R. The effect of repeated preheating on diametral tensile strength of composite resin with different fillers. *Sci Dent J* 2020;4:44-8.

Access this article online	
Quick Response Code: 	Website: <a href="http://www.scidentj.com">www.scidentj.com</a>
	DOI: 10.4103/SDJ.SDJ_35_19



**Figure 1:** Specimens were soaked in artificial saliva

and 3 mm in height. The samples were fabricated from microhybrid (Z250, 3M, USA), nanofill (Palfique LX 5, Tokuyama, Japan), and nano hybrid (Ena Hri, Micerium, Italy) composite resins. Each resin was heated ten times or twenty times or not heated as a control, and the diametral tensile strength of the specimens (in groups of ten) was analyzed either immediately or after 24 h.

The composite resin heating process was carried out by inserting the composite resin syringe into a Micerium heater for 10 min at 39°C, then the material was removed with plastic filling (Hu Friedy, USA) from the syringe, and put into a 6 mm diameter and 3 mm high mold. The top surface of the composite resin was flattened using a celluloid strip (Mylar, Dentamerica), and then, the resin was polymerized using a light-curing unit (Ledex, Taiwan) at a wavelength of 470 nm for 40 s. The tip of light-curing unit was set to touch the celluloid strip.<sup>18,19</sup> Specimens in the Group 1 were immediately tested for their diametral tensile strength using a universal testing machine<sup>20</sup> (Shimadzu, Japan), whereas Group 2 [Figure 1] was immersed in artificial saliva at 37°C for 24 h before diametral tensile strength testing.<sup>9</sup> Diametral tensile strength was tested with a universal testing machine at PT INTEC, Karawang.

### Statistical analysis

The normality of the data was tested using the Shapiro–Wilk test, which confirmed normally distributed data ( $P > 0.05$ ). Data analyses were performed using the two-way ANOVA test using SPSS version 20 (IBM, N.Y., USA).

## RESULTS

The result of the diametral tensile strength of the three materials tested is varied [Table 1]. The statistical analysis result is shown in Table 2 which confirmed a significant difference in the diametral tensile strength among the three resin materials ( $P = 0.000$ ).

## DISCUSSION

Research on the mechanical properties of heated composite resin is important for understanding the effects of heat on the ability of these materials to withstand mastication loads.<sup>13,15</sup> Increasing the temperature of the composite resin escalates the mobility

**Table 1: Descriptive data of the mean and standard deviations of the diametral tensile strength of different composite resins based on time and treatment**

Material	Time	Preheated	Mean	SD	n
Nanohybrid	24 h	Control	44.50	11.20	10
		10×	42.00	11.47	10
		20×	44.90	8.81	10
	Immediate	Control	30.70	5.63	10
		10×	35.50	5.31	10
		20×	41.10	9.84	10
Nanofill	24 h	Control	34.60	7.48	10
		10×	29.30	3.05	10
		20×	27.20	4.23	10
	Immediate	Control	34.80	2.82	10
		10×	32.40	3.59	10
		20×	35.60	2.27	10
Microhybrid	24 h	Control	46.80	4.54	10
		10×	40.30	5.25	10
		20×	40.40	8.78	10
	Immediate	Control	42.50	7.42	10
		10×	43.60	4.50	10
		20×	46.50	8.46	10

SD: Standard deviation

**Table 2: Two-way ANOVA of effects of material, time, and preheating repetitions on diametral tensile strength of the composite resins**

	P
Material	<0.01*
Time	0.436
Preheating repetitions	0.206
Material and time	<0.01*
Material and preheating repetitions	0.078
Time and preheating repetitions	0.001*
Material, time, and preheating repetitions	0.949

\*Significance:  $P < 0.05$

of free radicals and monomers, thereby increasing the monomer conversion. This, in turn, improves the degree of polymerization, as well as the polymer crosslinking, mechanical properties, and physical properties.<sup>14,15</sup> High surface hardness and increased depth of polymerization are other advantages gained by heating composite resins.

The diametral tensile strength is an important factor to examine because it relates to the resistance to lateral forces that occur during mastication.<sup>21</sup> In this study, composite resins were heated according to the recommendations of the heating device, which is 39°C. The composite resin was repeatedly heated up to twenty times because D'Amario *et al.*'s research has indicated that a single composite resin syringe can be used to fill up to twenty cavities, especially when using the multishade layering technique.<sup>17</sup>

The composite resins in this study are provided in syringes. The temperature of the material is maintained stable by placing heaters near the composite resin molds, with the aim of simplifying and speeding up the processing time while preventing a decrease in temperature during material manipulation. This was suggested by Daronch *et al.*, as clinicians must work fast to ensure that only a slight decrease in temperature occurs.<sup>22</sup> The results of previous studies show that the temperature of the composite resin drops rapidly when the syringe is removed from the heater, and the composite resin is taken to the tooth surface.<sup>13</sup>

The microhybrid composite resin in this study showed an increase in diametral tensile strength in the immediately tested group. Nada and El-Mowafy study of microhybrid composite resins showed an increase in the surface hardness of the heated composite resin.<sup>15</sup> The degree of conversion is the percentage of carbon-carbon double bonds that have been converted into a single bond to form a polymeric resin. The higher the degree of conversion, the better the strength, wear resistance, and other important properties related to resin performance.<sup>23</sup> Meanwhile the shrinkage on polymerization related to the cavity configuration.<sup>24</sup>

The nanofill composite resin used in this study had the lowest diametral tensile strength when compared to the nanohybrid and microhybrid composite resins. This is due to the differences in the morphology of the composite resin filler. The nanofill composite resin tested in this study is a composite resin with a filler morphology in the form of prepolymerized fillers. Research by Kim *et al.* found that the amount of filler in composite resins was influenced by the filler morphology. Composite resins that contain prepolymerized filler particles have the lowest amount of filler. This type of composite resin also has the lowest flexural strength compared to composite resin with an irregular filler type or a mixture of prepolymerized and irregular forms.<sup>25</sup>

The microhybrid and nanohybrid composite resins tested in this study have higher diametral tensile strength than nanofill composite resins because hybrid composite resins have smaller filler particles that can enter between large fillers to filling the empty spaces between them, thereby providing better strength. By contrast, the nanofill composite resin has a filler with a rounded shape, which leaves a space among fillers, therefore decreased the strength when compared with the hybrid composite resins.

In this study, an increase and decrease were observed in the tensile strength of diametral nanohybrid, nanofill, and microhybrid composite resin composites after heating

ten and twenty times when compared to controls, but the changes were not statistically significant. Research by D'Amario on nanohybrid composite resins also revealed that composite resins retain their same mechanical characteristics after 1, 10, 20, 30, and 40 times heating cycles at 39°C. The mechanical characteristics of the composite resin were not significantly different from those of the unheated composite resin.

The results in this study indicate that the significant difference observed in the diametral tensile strength between the three heated composite resins is likely due to the different filler and monomer contents. Therefore, different materials are likely to have different reactions when heated. In addition, the ability of each material to be heated also plays an important role in the compression strength of the material. Only the nanohybrid composite resins used in this study can be heated, according to their product descriptions.

This study conducted an immediate and 24 h diametral tensile strength tests to determine whether time has an influence on the diametral tensile strength. The results indicated that there are no effects of time on the diametral tensile strength. The choice of treatment time "immediately" after polymerization is important because the operator expects that the restoration will be sufficiently polymerized to endure mastication forces immediately after polymerization. If a time interval is needed for the restoration to accept this force, additional information should be listed in the manufacturer's instructions. However, manual instructions on this subject are not usually provided, but a diametral tensile strength test can immediately be carried out after polymerization.<sup>27</sup>

The 24 h time was chosen because a postcure polymerization occurs due to the photoactivation properties of the composite resin. After polymerization, free radicals trapped in the matrix can continue to react to slowly make bonds over time. Postcure reactions can continue as long as free radicals and reactants (for example, pendant methacrylate groups and free monomers) are still present. In general, postcure polymerization occurs during the first 24 h after polymerization. After 24 h, the amount of free radicals will decrease, and any subsequent polymerization will proceed very slowly.<sup>28-30</sup>

A literature study reveals that no adverse effects occur regarding the mechanical properties of composite resins due to heating procedures.<sup>31</sup> Research by Osternack *et al.* on microhybrid resins concluded that composite resin hardness was not affected by heating or cooling.<sup>32</sup> However, the majority of previous studies did not carry

out repeated heating cycles. Daronch *et al.* reported that prolonged heating or ten repetitions of heating did not affect the degree of conversion when compared to composite resins maintained at room temperature.<sup>18</sup> A study by D'Amario *et al.* on nanohybrid composite resins revealed that repeated cycles of heating to 39°C did not affect the mechanical properties of composite resins. Heating to 39°C is considered sufficient to increase flowability and better adaptation to composite resins.<sup>17</sup>

Other ways to increase the viscosity of composite resins have been developed, including reducing the viscosity of monomers and using sonic vibrations. The viscosity of monomers can be reduced by combining bisphenol A-glycidyl methacrylate with triethylene glycol dimethacrylate. Sonic vibrations are thought to reduce the viscosity of the resin by increasing the flowability of composite resins.<sup>4</sup>

Besides the temperature of 39°C used in this study, other temperatures can be used for heating composite resin. The Ena Heat heater (Micerium S.p.A, Avegno, GT, Italy) has a heating temperature of 55°C that, according to the manufacturer's instructions, will produce composite resin with high flowability for use in cementation. In addition to the Ena Heat model, another composite resin heater on the market is the Calset (AdDent Inc., Danbury, CT, USA). This tool can heat the composite resin at 54°C and 68°C.

The marginal adaptation of composite resin is significantly better in axial walls when the composite resin is preheated.<sup>6</sup> El-Deeb *et al.* examined the effect of heating composite resin at 54°C and 68°C on the increase in intrapulp temperature and found that heating of composite resin increased intrapulp temperature without endangering the vitality of the pulp.<sup>33</sup>

Apart from the effects of heating on the mechanical properties of composite resins, a debate still exists over the shrinkage that occurs in heated composite resins. Deb *et al.* and Didron *et al.* indicated shrinkage in heated composite resin, but Lohbauer said that any shrinkage that occurred was not significant.<sup>11,12,26</sup>

## CONCLUSION

Repeated heating has different effects on the diametral tensile strength of composite resins with different filler types. The nanohybrid composite resin in this study had the most stable diametral tensile strength after heating compared to nanofill and microhybrid types. The nanofill composite resin in this study had the lowest diametral tensile test compared to the other composite resins.

## Financial support and sponsorship

Nil.

## Conflicts of interest

There are no conflicts of interest.

## REFERENCES

- Amerongen JP, Amerongen WE, Watson TF, Opdam NJ, Roeters FJ, Bittermann D, *et al.* Restoring the tooth: The seal is the deal. In: Fejerskov O, Kidd E, editors. Dental Caries: The Disease and its Clinical Management. 2<sup>nd</sup> ed. Copenhagen: Blackwell Munksgaard; 2008. p. 393.
- McCabe JF, Walls AW. Resin based filling material. In: McCabe JF, Walls AW, editors. Applied Dental Materials. 9<sup>th</sup> ed. Copenhagen: Blackwell Munksgaard; 2007. p. 196-202.
- Frencken JE, Peters MC, Manton DJ, Leal SC, Gordan VV, Eden E. Minimal intervention dentistry for managing dental caries – A review: Report of a FDI task group. *Int Dent J* 2012;62:223-43.
- Baroudi K, Rodrigues JC. Flowable resin composites: A systematic review and clinical considerations. *J Clin Diagn Res* 2015;9:ZE18-24.
- Wagner WC, Aksu MN, Neme AM, Linger JB, Pink FE, Walker S. Effect of pre-heating resin composite on restoration microleakage. *Oper Dent* 2008;33:72-8.
- Froes-Salgado N, Silva LM, Kawano Y, Francci C, Reis A, Loguercio A. Composite preheating: Effects on marginal adaptation, degree of conversion and mechanical properties. *Dent Mater* 2010;26:908-14.
- Wang L, D'Alpino PH, Lopes LG, Pereira JC. Mechanical properties of dental restorative materials: Relative contribution of laboratory test. *J Appl Oral Sci* 2003;11:162-7.
- Gömeç Y, Dörter C, Dabanoglu A, Koray F. Effect of resin-based material combination on the compressive and the flexural strength. *J Oral Rehabil* 2005;32:122-7.
- Thomaidis S, Kakaboura A, Mueller WD, Zinelis S. Mechanical properties of contemporary composite resins and their interrelations. *Dent Mater* 2013;29:e132-41.
- Bartlett D, Sundaram G. An up to 3-year randomized clinical study comparing indirect and direct resin composites used to restore worn posterior teeth. *Int J Prosthodont* 2006;19:613-7.
- Lohbauer U, Zinelis S, Rahiotis C, Petschelt A, Eliades G. The effect of resin composite pre-heating on monomer conversion and polymerization shrinkage. *Dent Mater* 2009;25:514-9.
- Deb S, Di Silvio L, Mackler HE, Millar BJ. Pre-warming of dental composites. *Dent Mater* 2011;27:e51-9.
- Soliman EM, Elgayar IL, Kamar AA. Effect of preheating in microleakage and microhardness of composite resin (an *in vitro* study). *Alex Dent J* 2016;41:4-11.
- Uctasli MB, Arisu HD, Lasilla LV, Valittu PK. Effect of preheating on the mechanical properties of resin composites. *Eur J Dent* 2008;2:263-8.
- Nada K, El-Mowafy O. Effect of Pre-curing Warming on Mechanical Properties of Restorative Composites. *Int J Dent* 2011;2011:1-5.
- D'Amario M, Pacioni S, Capogreco M, Gatto R, Baldi M. Effect of repeated preheating cycles on flexural strength of resin composites. *Oper Dent* 2013;38:33-8.
- D'Amario M, de Angelis F, Vadini M, Marchili N, Mummolo S, D'Arcangelo C. Influence of a repeated preheating procedure on mechanical properties of three resin composites. *Oper Dent* 2015;40:181-9.

18. Daronch M, Rueggeberg FA, Moss L, de Goes MF. Clinically relevant issues related to preheating composites. *J Esthet Restor Dent* 2006;18:340-50.
19. Rode KM, Kawano Y, Turbino ML. Evaluation of curing light distance on resin composite microhardness and polymerization. *Oper Dent* 2007;32:571-8.
20. Bresciani E, Barata Tde J, Fagundes TC, Adachi A, Terrin MM, Navarro MF. Compressive and diametral tensile strength of glass ionomer cements. *J Appl Oral Sci* 2004;12:344-8.
21. Aguiar FH, Braceiro AT, Ambrosano GM, Lovadino JR. Hardness and diametral tensile strength of a hybrid composite resin polymerized with different modes and immersed in ethanol or distilled water media. *Dent Mater* 2005;21:1093-203.
22. Daronch M, Rueggeberg FA, Goes MF, Giucidi R. Polymerization kinetics of preheated composite. *J Dent Res* 2006;85:38-43.
23. Anusavice KJ, Shen C, Rawls HR. *Philips' Science of Dental Material*. 12<sup>th</sup> ed. St. Louis (MO): Elsevier; 2013.
24. Oskoe PA, Azar FP, Navimipour EJ, Chaharom ME, Alavi NF, Salari A. The effect of repeated preheating of dimethacrylate and silorane-based composite resins on marginal gap of class V restorations. *J Dent Res Dent Clin Dent Prospects* 2017;11:36-42.
25. Kim KH, Ong JL, Okuno O. The effect of filler loading and morphology on the mechanical properties of contemporary composites. *J Prosthet Dent* 2002;87:642-9.
26. Didron PP, Ellakwa A, Swain MV. Effect of preheat temperatures on mechanical properties and polymerization contraction stress of dental composite. *Mater Sci App* 2013;4:374-85.
27. Schattenberg A, Lichtenberg D, Stender E, Willershausen B, Ernst CP. Minimal exposure time of different LED-curing devices. *Dent Mater* 2008;24:1043-9.
28. Ayub KV, Santos GC Jr., Rizkalla AS, Bohay R, Pegoraro LF, Rubo JH, *et al.* Effect of preheating on microhardness and viscosity of 4 resin composites. *J Can Dent Assoc* 2014;80:e12.
29. Par M, Gamulin O, Marovic D, Klaric E, Tarle Z. Effect of temperature on post-cure polymerization of bulk-fill composites. *J Dent* 2014;42:1255-60.
30. Alshali RZ, Salim NA, Satterthwaite JD, Silikas N. Post-irradiation hardness development, chemical softening, and thermal stability of bulk-fill and conventional resin-composites. *J Dent* 2015;43:209-18.
31. Schneider LF, Consani S, Ogliairi F, Correr AB, Sobrinho LC, Sinhoreti MA. Effect of time and polymerization cycle on the degree of conversion of a resin composite. *Oper Dent* 2006;31:489-95.
32. Osternack FH, Caldas DB, Almeida JB, Souza EM, Mazur RF. Effects of preheating and precooling on the hardness and shrinkage of a composite resin cured with QTH and LED. *Oper Dent* 2013;38:E1-8.
33. El-Deeb HA, Abd El-Aziz S, Mobarak EH. Effect of preheating of low shrinking resin composite on intrapulpal temperature and microtensile bond strength to dentin. *J Adv Res* 2015;6:471-8.

# Rosalina Tjandrawinata

## The Effect of Repeated Preheating on Diametral Tensile Strength of Composite Resin with Different Fillers

Artikel 1

---

### Document Details

Submission ID

trn:oid::3618:138456021

Submission Date

May 11, 2026, 10:35 AM GMT+7

Download Date

May 11, 2026, 10:39 AM GMT+7

File Name

The Effect of Repeated Preheating.pdf

File Size

653.0 KB

5 Pages

3,759 Words

19,765 Characters

# 11% Overall Similarity

The combined total of all matches, including overlapping sources, for each database.

## Filtered from the Report

- ▶ Bibliography
- ▶ Quoted Text
- ▶ Small Matches (less than 15 words)

## Exclusions

- ▶ 6 Excluded Sources

## Match Groups

- 11 Not Cited or Quoted 11%**  
 Matches with neither in-text citation nor quotation marks
- 0 Missing Quotations 0%**  
 Matches that are still very similar to source material
- 0 Missing Citation 0%**  
 Matches that have quotation marks, but no in-text citation
- 0 Cited and Quoted 0%**  
 Matches with in-text citation present, but no quotation marks

## Top Sources

- 9% Internet sources
- 5% Publications
- 6% Submitted works (Student Papers)

## Integrity Flags

0 Integrity Flags for Review

Our system's algorithms look deeply at a document for any inconsistencies that would set it apart from a normal submission. If we notice something strange, we flag it for you to review.

A Flag is not necessarily an indicator of a problem. However, we'd recommend you focus your attention there for further review.

### Match Groups

- 11 Not Cited or Quoted 11%**  
Matches with neither in-text citation nor quotation marks
- 0 Missing Quotations 0%**  
Matches that are still very similar to source material
- 0 Missing Citation 0%**  
Matches that have quotation marks, but no in-text citation
- 0 Cited and Quoted 0%**  
Matches with in-text citation present, but no quotation marks

### Top Sources

- 9% Internet sources
- 5% Publications
- 6% Submitted works (Student Papers)

### Top Sources

The sources with the highest number of matches within the submission. Overlapping sources will not be displayed.

<b>1</b>	Student papers	University of Michigan Flint on 2021-11-09	3%
<b>2</b>	Internet	www.scidentj.com	2%
<b>3</b>	Internet	irep.iium.edu.my	1%
<b>4</b>	Student papers	Mansoura University on 2016-10-05	1%
<b>5</b>	Student papers	Universiti Brunei Darussalam on 2020-10-11	1%
<b>6</b>	Internet	oamjms.eu	<1%
<b>7</b>	Internet	meridian.allenpress.com	<1%
<b>8</b>	Publication	"Full Issue PDF", Operative Dentistry, 2020	<1%
<b>9</b>	Publication	Matej Par, Ozren Gamulin, Danijela Marovic, Eva Klaric, Zrinka Tarle. "Effect of te...	<1%

# The Effect of Repeated Preheating on Diametral Tensile Strength of Composite Resin with Different Fillers

Ellen Winarta, Tien Suwartini<sup>1</sup>, Anastasia Elsa Prahasti<sup>1</sup>, Rosalina Tjandrawinata<sup>2</sup>

Conservative Dentistry Post Graduate Program, Faculty of Dentistry, Trisakti University, Departments of <sup>1</sup>Conservative Dentistry, <sup>2</sup>Dental Biomaterial, Faculty of Dentistry, Trisakti University, West Jakarta, Java, Indonesia

Received : 01-10-19  
 Revised : 18-12-19  
 Accepted : 06-05-20  
 Published Online: 08-06-20

## BACKGROUND

The development of adhesive systems has made composite resin the material of choice today.<sup>1,2</sup> Cavity preparation has been minimized,<sup>3</sup> but a small cavity is difficult to restore with condensable composites.<sup>4,6</sup> During mastication, the restoration is placed under pressure;<sup>7</sup> therefore, composite restorations require good mechanical properties.<sup>8</sup> A significant correlation is found between the surface of the composite restoration and its diametral tensile strength.<sup>9</sup> Composite resin fillers have been studied for the recommended use in the posterior teeth.<sup>10,11</sup>

Recently, a preheating device has been marketed.<sup>12</sup> Soliman concluded that heating a composite resin increased its micro strength.<sup>13</sup> Uctasli revealed that heated

composite resin had a better adaptation to the cavity wall.<sup>14</sup> Nada and El-Mowafy indicated that heating composite resins increased their compression strength.<sup>15</sup> One syringe of composite resin can be used several times, which means that the heating process may also be repeated many times.<sup>16,17</sup> The aim of this study was to analyze whether reheating of composite resins has an impact on the diametral tensile strength of composite resins.

## MATERIALS AND METHODS

The samples in this study were 180 composite resin specimens with cylindrical shape 6 mm in diameter

**Address for correspondence:** Dr. Tien Suwartini, Trisakti University, West Jakarta, Java, Indonesia. E-mail: [tiensuwartini@hotmail.com](mailto:tiensuwartini@hotmail.com)

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

**For reprints contact:** [WKHLRPMedknow\\_reprints@wolterskluwer.com](mailto:WKHLRPMedknow_reprints@wolterskluwer.com)

**How to cite this article:** Winarta E, Suwartini T, Prahasti AE, Tjandrawinata R. The effect of repeated preheating on diametral tensile strength of composite resin with different fillers. *Sci Dent J* 2020;4:44-8.

## ABSTRACT

**Background:** The development of adhesive systems has made the removal of carious lesion a minimally invasive procedure. Composite resin is the material of choice today, but the filler composition of the resin varies. Packable composite resin has good mechanical properties, but its high viscosity makes it hard to manipulate. Several methods, such as preheating, are used to decrease this viscosity. A syringe of composite resin might be preheated several times, but the effect of repeated preheating is unknown. **Objectives:** The purpose of this research was to analyze the effect of repeated preheating on the mechanical properties of a composite resin with different fillers. **Method:** Microhybrid, nanohybrid, and nanofill composite resins were preheated (ten times, twenty times, and control), molded into cylinder molds 6 mm in diameter and 3 mm in height, flattened with a celluloid strip, and polymerized with an light-emitting diode light-curing unit for 40 s. A total of 180 specimens were tested. The specimens were divided into two groups: Group 1 was immediately tested using a universal testing machine. Group 2 was soaked in 37°C artificial saliva for 24 h before testing. Each specimen was tested using the universal testing machine with the pressure side with a 1 mm/s crosshead speed. **Result:** Nanohybrid composite resin had the most stable diametral tensile strength after repeated preheating, whereas nanofill composite had the weakest strength. The increase and decrease in the diametral tensile strength in each group were not statistically significant. **Conclusion:** Repeated preheating does not significantly affect the diametral tensile strength of composite resin.

**KEYWORDS:** Composite resin, diametral tensile strength, repeated preheating

Access this article online	
<b>Quick Response Code:</b> 	<b>Website:</b> <a href="http://www.scidentj.com">www.scidentj.com</a>
	<b>DOI:</b> 10.4103/SDJ.SDJ_35_19



**Figure 1:** Specimens were soaked in artificial saliva

and 3 mm in height. The samples were fabricated from microhybrid (Z250, 3M, USA), nanofill (Palfique LX 5, Tokuyama, Japan), and nano hybrid (Ena Hri, Micerium, Italy) composite resins. Each resin was heated ten times or twenty times or not heated as a control, and the diametral tensile strength of the specimens (in groups of ten) was analyzed either immediately or after 24 h.

The composite resin heating process was carried out by inserting the composite resin syringe into a Micerium heater for 10 min at 39°C, then the material was removed with plastic filling (Hu Friedy, USA) from the syringe, and put into a 6 mm diameter and 3 mm high mold. The top surface of the composite resin was flattened using a celluloid strip (Mylar, Dentamerica), and then, the resin was polymerized using a light-curing unit (Ledex, Taiwan) at a wavelength of 470 nm for 40 s. The tip of light-curing unit was set to touch the celluloid strip.<sup>18,19</sup> Specimens in the Group 1 were immediately tested for their diametral tensile strength using a universal testing machine<sup>20</sup> (Shimadzu, Japan), whereas Group 2 [Figure 1] was immersed in artificial saliva at 37°C for 24 h before diametral tensile strength testing.<sup>9</sup> Diametral tensile strength was tested with a universal testing machine at PT INTEC, Karawang.

### Statistical analysis

The normality of the data was tested using the Shapiro–Wilk test, which confirmed normally distributed data ( $P > 0.05$ ). Data analyses were performed using the two-way ANOVA test using SPSS version 20 (IBM, N.Y., USA).

## RESULTS

The result of the diametral tensile strength of the three materials tested is varied [Table 1]. The statistical analysis result is shown in Table 2 which confirmed a significant difference in the diametral tensile strength among the three resin materials ( $P = 0.000$ ).

## DISCUSSION

Research on the mechanical properties of heated composite resin is important for understanding the effects of heat on the ability of these materials to withstand mastication loads.<sup>13,15</sup> Increasing the temperature of the composite resin escalates the mobility

**Table 1: Descriptive data of the mean and standard deviations of the diametral tensile strength of different composite resins based on time and treatment**

Material	Time	Preheated	Mean	SD	n
Nanohybrid	24 h	Control	44.50	11.20	10
		10×	42.00	11.47	10
		20×	44.90	8.81	10
	Immediate	Control	30.70	5.63	10
		10×	35.50	5.31	10
		20×	41.10	9.84	10
Nanofill	24 h	Control	34.60	7.48	10
		10×	29.30	3.05	10
		20×	27.20	4.23	10
	Immediate	Control	34.80	2.82	10
		10×	32.40	3.59	10
		20×	35.60	2.27	10
Microhybrid	24 h	Control	46.80	4.54	10
		10×	40.30	5.25	10
		20×	40.40	8.78	10
	Immediate	Control	42.50	7.42	10
		10×	43.60	4.50	10
		20×	46.50	8.46	10

SD: Standard deviation

**Table 2: Two-way ANOVA of effects of material, time, and preheating repetitions on diametral tensile strength of the composite resins**

	P
Material	<0.01*
Time	0.436
Preheating repetitions	0.206
Material and time	<0.01*
Material and preheating repetitions	0.078
Time and preheating repetitions	0.001*
Material, time, and preheating repetitions	0.949

\*Significance:  $P < 0.05$

of free radicals and monomers, thereby increasing the monomer conversion. This, in turn, improves the degree of polymerization, as well as the polymer crosslinking, mechanical properties, and physical properties.<sup>14,15</sup> High surface hardness and increased depth of polymerization are other advantages gained by heating composite resins.

The diametral tensile strength is an important factor to examine because it relates to the resistance to lateral forces that occur during mastication.<sup>21</sup> In this study, composite resins were heated according to the recommendations of the heating device, which is 39°C. The composite resin was repeatedly heated up to twenty times because D'Amario *et al.*'s research has indicated that a single composite resin syringe can be used to fill up to twenty cavities, especially when using the multishade layering technique.<sup>17</sup>

The composite resins in this study are provided in syringes. The temperature of the material is maintained stable by placing heaters near the composite resin molds, with the aim of simplifying and speeding up the processing time while preventing a decrease in temperature during material manipulation. This was suggested by Daronch *et al.*, as clinicians must work fast to ensure that only a slight decrease in temperature occurs.<sup>22</sup> The results of previous studies show that the temperature of the composite resin drops rapidly when the syringe is removed from the heater, and the composite resin is taken to the tooth surface.<sup>13</sup>

The microhybrid composite resin in this study showed an increase in diametral tensile strength in the immediately tested group. Nada and El-Mowafy study of microhybrid composite resins showed an increase in the surface hardness of the heated composite resin.<sup>15</sup> The degree of conversion is the percentage of carbon-carbon double bonds that have been converted into a single bond to form a polymeric resin. The higher the degree of conversion, the better the strength, wear resistance, and other important properties related to resin performance.<sup>23</sup> Meanwhile the shrinkage on polymerization related to the cavity configuration.<sup>24</sup>

The nanofill composite resin used in this study had the lowest diametral tensile strength when compared to the nanohybrid and microhybrid composite resins. This is due to the differences in the morphology of the composite resin filler. The nanofill composite resin tested in this study is a composite resin with a filler morphology in the form of prepolymerized fillers. Research by Kim *et al.* found that the amount of filler in composite resins was influenced by the filler morphology. Composite resins that contain prepolymerized filler particles have the lowest amount of filler. This type of composite resin also has the lowest flexural strength compared to composite resin with an irregular filler type or a mixture of prepolymerized and irregular forms.<sup>25</sup>

The microhybrid and nanohybrid composite resins tested in this study have higher diametral tensile strength than nanofill composite resins because hybrid composite resins have smaller filler particles that can enter between large fillers to filling the empty spaces between them, thereby providing better strength. By contrast, the nanofill composite resin has a filler with a rounded shape, which leaves a space among fillers, therefore decreased the strength when compared with the hybrid composite resins.

In this study, an increase and decrease were observed in the tensile strength of diametral nanohybrid, nanofill, and microhybrid composite resin composites after heating

ten and twenty times when compared to controls, but the changes were not statistically significant. Research by D'Amario on nanohybrid composite resins also revealed that composite resins retain their same mechanical characteristics after 1, 10, 20, 30, and 40 times heating cycles at 39°C. The mechanical characteristics of the composite resin were not significantly different from those of the unheated composite resin.

The results in this study indicate that the significant difference observed in the diametral tensile strength between the three heated composite resins is likely due to the different filler and monomer contents. Therefore, different materials are likely to have different reactions when heated. In addition, the ability of each material to be heated also plays an important role in the compression strength of the material. Only the nanohybrid composite resins used in this study can be heated, according to their product descriptions.

This study conducted an immediate and 24 h diametral tensile strength tests to determine whether time has an influence on the diametral tensile strength. The results indicated that there are no effects of time on the diametral tensile strength. The choice of treatment time "immediately" after polymerization is important because the operator expects that the restoration will be sufficiently polymerized to endure mastication forces immediately after polymerization. If a time interval is needed for the restoration to accept this force, additional information should be listed in the manufacturer's instructions. However, manual instructions on this subject are not usually provided, but a diametral tensile strength test can immediately be carried out after polymerization.<sup>27</sup>

The 24 h time was chosen because a postcure polymerization occurs due to the photoactivation properties of the composite resin. After polymerization, free radicals trapped in the matrix can continue to react to slowly make bonds over time. Postcure reactions can continue as long as free radicals and reactants (for example, pendant methacrylate groups and free monomers) are still present. In general, postcure polymerization occurs during the first 24 h after polymerization. After 24 h, the amount of free radicals will decrease, and any subsequent polymerization will proceed very slowly.<sup>28-30</sup>

A literature study reveals that no adverse effects occur regarding the mechanical properties of composite resins due to heating procedures.<sup>31</sup> Research by Osternack *et al.* on microhybrid resins concluded that composite resin hardness was not affected by heating or cooling.<sup>32</sup> However, the majority of previous studies did not carry

out repeated heating cycles. Daronch *et al.* reported that prolonged heating or ten repetitions of heating did not affect the degree of conversion when compared to composite resins maintained at room temperature.<sup>18</sup> A study by D'Amario *et al.* on nanohybrid composite resins revealed that repeated cycles of heating to 39°C did not affect the mechanical properties of composite resins. Heating to 39°C is considered sufficient to increase flowability and better adaptation to composite resins.<sup>17</sup>

Other ways to increase the viscosity of composite resins have been developed, including reducing the viscosity of monomers and using sonic vibrations. The viscosity of monomers can be reduced by combining bisphenol A-glycidyl methacrylate with triethylene glycol dimethacrylate. Sonic vibrations are thought to reduce the viscosity of the resin by increasing the flowability of composite resins.<sup>4</sup>

Besides the temperature of 39°C used in this study, other temperatures can be used for heating composite resin. The Ena Heat heater (Micerium S.p.A, Avegno, GT, Italy) has a heating temperature of 55°C that, according to the manufacturer's instructions, will produce composite resin with high flowability for use in cementation. In addition to the Ena Heat model, another composite resin heater on the market is the Calset (AdDent Inc., Danbury, CT, USA). This tool can heat the composite resin at 54°C and 68°C.

The marginal adaptation of composite resin is significantly better in axial walls when the composite resin is preheated.<sup>6</sup> El-Deeb *et al.* examined the effect of heating composite resin at 54°C and 68°C on the increase in intrapulp temperature and found that heating of composite resin increased intrapulp temperature without endangering the vitality of the pulp.<sup>33</sup>

Apart from the effects of heating on the mechanical properties of composite resins, a debate still exists over the shrinkage that occurs in heated composite resins. Deb *et al.* and Didron *et al.* indicated shrinkage in heated composite resin, but Lohbauer said that any shrinkage that occurred was not significant.<sup>11,12,26</sup>

## CONCLUSION

Repeated heating has different effects on the diametral tensile strength of composite resins with different filler types. The nanohybrid composite resin in this study had the most stable diametral tensile strength after heating compared to nanofill and microhybrid types. The nanofill composite resin in this study had the lowest diametral tensile test compared to the other composite resins.

## Financial support and sponsorship

Nil.

## Conflicts of interest

There are no conflicts of interest.

## REFERENCES

- Amerongen JP, Amerongen WE, Watson TF, Opdam NJ, Roeters FJ, Bittermann D, *et al.* Restoring the tooth: The seal is the deal. In: Fejerskov O, Kidd E, editors. Dental Caries: The Disease and its Clinical Management. 2<sup>nd</sup> ed. Copenhagen: Blackwell Munksgaard; 2008. p. 393.
- McCabe JF, Walls AW. Resin based filling material. In: McCabe JF, Walls AW, editors. Applied Dental Materials. 9<sup>th</sup> ed. Copenhagen: Blackwell Munksgaard; 2007. p. 196-202.
- Frencken JE, Peters MC, Manton DJ, Leal SC, Gordan VV, Eden E. Minimal intervention dentistry for managing dental caries – A review: Report of a FDI task group. *Int Dent J* 2012;62:223-43.
- Baroudi K, Rodrigues JC. Flowable resin composites: A systematic review and clinical considerations. *J Clin Diagn Res* 2015;9:ZE18-24.
- Wagner WC, Aksu MN, Neme AM, Linger JB, Pink FE, Walker S. Effect of pre-heating resin composite on restoration microleakage. *Oper Dent* 2008;33:72-8.
- Froes-Salgado N, Silva LM, Kawano Y, Francci C, Reis A, Loguercio A. Composite preheating: Effects on marginal adaptation, degree of conversion and mechanical properties. *Dent Mater* 2010;26:908-14.
- Wang L, D'Alpino PH, Lopes LG, Pereira JC. Mechanical properties of dental restorative materials: Relative contribution of laboratory test. *J Appl Oral Sci* 2003;11:162-7.
- Gömeç Y, Dörter C, Dabanoglu A, Koray F. Effect of resin-based material combination on the compressive and the flexural strength. *J Oral Rehabil* 2005;32:122-7.
- Thomaidis S, Kakaboura A, Mueller WD, Zinelis S. Mechanical properties of contemporary composite resins and their interrelations. *Dent Mater* 2013;29:e132-41.
- Bartlett D, Sundaram G. An up to 3-year randomized clinical study comparing indirect and direct resin composites used to restore worn posterior teeth. *Int J Prosthodont* 2006;19:613-7.
- Lohbauer U, Zinelis S, Rahiotis C, Petschelt A, Eliades G. The effect of resin composite pre-heating on monomer conversion and polymerization shrinkage. *Dent Mater* 2009;25:514-9.
- Deb S, Di Silvio L, Mackler HE, Millar BJ. Pre-warming of dental composites. *Dent Mater* 2011;27:e51-9.
- Soliman EM, Elgayar IL, Kamar AA. Effect of preheating in microleakage and microhardness of composite resin (an *in vitro* study). *Alex Dent J* 2016;41:4-11.
- Uctasli MB, Arisu HD, Lasilla LV, Valittu PK. Effect of preheating on the mechanical properties of resin composites. *Eur J Dent* 2008;2:263-8.
- Nada K, El-Mowafy O. Effect of Pre-curing Warming on Mechanical Properties of Restorative Composites. *Int J Dent* 2011;2011:1-5.
- D'Amario M, Pacioni S, Capogreco M, Gatto R, Baldi M. Effect of repeated preheating cycles on flexural strength of resin composites. *Oper Dent* 2013;38:33-8.
- D'Amario M, de Angelis F, Vadini M, Marchili N, Mummolo S, D'Arcangelo C. Influence of a repeated preheating procedure on mechanical properties of three resin composites. *Oper Dent* 2015;40:181-9.

18. Daronch M, Rueggeberg FA, Moss L, de Goes MF. Clinically relevant issues related to preheating composites. *J Esthet Restor Dent* 2006;18:340-50.
19. Rode KM, Kawano Y, Turbino ML. Evaluation of curing light distance on resin composite microhardness and polymerization. *Oper Dent* 2007;32:571-8.
20. Bresciani E, Barata Tde J, Fagundes TC, Adachi A, Terrin MM, Navarro MF. Compressive and diametral tensile strength of glass ionomer cements. *J Appl Oral Sci* 2004;12:344-8.
21. Aguiar FH, Braceiro AT, Ambrosano GM, Lovadino JR. Hardness and diametral tensile strength of a hybrid composite resin polymerized with different modes and immersed in ethanol or distilled water media. *Dent Mater* 2005;21:1093-203.
22. Daronch M, Rueggeberg FA, Goes MF, Giucidi R. Polymerization kinetics of preheated composite. *J Dent Res* 2006;85:38-43.
23. Anusavice KJ, Shen C, Rawls HR. *Philips' Science of Dental Material*. 12<sup>th</sup> ed. St. Louis (MO): Elsevier; 2013.
24. Oskoe PA, Azar FP, Navimipour EJ, Chaharom ME, Alavi NF, Salari A. The effect of repeated preheating of dimethacrylate and silorane-based composite resins on marginal gap of class V restorations. *J Dent Res Dent Clin Dent Prospects* 2017;11:36-42.
25. Kim KH, Ong JL, Okuno O. The effect of filler loading and morphology on the mechanical properties of contemporary composites. *J Prosthet Dent* 2002;87:642-9.
26. Didron PP, Ellakwa A, Swain MV. Effect of preheat temperatures on mechanical properties and polymerization contraction stress of dental composite. *Mater Sci App* 2013;4:374-85.
27. Schattenberg A, Lichtenberg D, Stender E, Willershausen B, Ernst CP. Minimal exposure time of different LED-curing devices. *Dent Mater* 2008;24:1043-9.
28. Ayub KV, Santos GC Jr., Rizkalla AS, Bohay R, Pegoraro LF, Rubo JH, *et al.* Effect of preheating on microhardness and viscosity of 4 resin composites. *J Can Dent Assoc* 2014;80:e12.
29. Par M, Gamulin O, Marovic D, Klaric E, Tarle Z. Effect of temperature on post-cure polymerization of bulk-fill composites. *J Dent* 2014;42:1255-60.
30. Alshali RZ, Salim NA, Satterthwaite JD, Silikas N. Post-irradiation hardness development, chemical softening, and thermal stability of bulk-fill and conventional resin-composites. *J Dent* 2015;43:209-18.
31. Schneider LF, Consani S, Ogliaeri F, Correr AB, Sobrinho LC, Sinhoreti MA. Effect of time and polymerization cycle on the degree of conversion of a resin composite. *Oper Dent* 2006;31:489-95.
32. Osternack FH, Caldas DB, Almeida JB, Souza EM, Mazur RF. Effects of preheating and precooling on the hardness and shrinkage of a composite resin cured with QTH and LED. *Oper Dent* 2013;38:E1-8.
33. El-Deeb HA, Abd El-Aziz S, Mobarak EH. Effect of preheating of low shrinking resin composite on intrapulpal temperature and microtensile bond strength to dentin. *J Adv Res* 2015;6:471-8.