



ORIGINAL ARTICLE / ОРИГИНАЛНИ РАД

Strain determination of self-adhesive resin cement using 3D digital image correlation method

Aleksandra D. Mitrović¹, Ivan V. Tanasić², Nenad R. Mitrović¹, Miloš S. Milošević³, Ljiljana Đ. Tihaček-Šojić², Dušan G. Antonović⁴

¹University of Belgrade, Faculty of Mechanical Engineering, Belgrade, Serbia;

²University of Belgrade, School of Dental Medicine, Belgrade, Serbia;

³University of Belgrade, Faculty of Mechanical Engineering, Innovation Center, Belgrade, Serbia;

⁴University of Belgrade, Faculty of Technology and Metallurgy, Belgrade, Serbia

SUMMARY

Introduction/Objective In an attempt to simplify dental procedures, a new group of resin cements, self-adhesive resin cements (SARCs), have been introduced. Performance of SARCs can widely vary. One of the main reasons of adhesion failure is polymerization shrinkage. The aim of this study was to determine, evaluate, and measure strain field of self-adhesive dual cure resin cement during polymerization in self-cure mode using 3D digital image correlation (DIC) method.

Methods The self-adhesive Maxcem Elite (Kerr, Orange, CA, USA) cement was tested in five cylindrical samples (5 mm in diameter and 2 mm in thickness) prepared by filling plastic ring-type molds. Digital images were recorded immediately after sample preparation.

Results Non-uniform strain distribution was found in resin cement with higher strain values along the periphery (up to 15%) and lower strain values in central parts (around 4%) of each sample.

Conclusion It can be concluded that DIC is a powerful tool for full-field strain measurements in material characterization.

Keywords: self-adhesive cement; digital image correlation; strain; polymerization shrinkage; self-cure mode

INTRODUCTION

Recently, dual-cured resin cements have been developed for dental application due to their ability to be self-cured under indirect esthetic polymeric or ceramic restorations [1, 2]. Compared to conventional luting agents, current resin cements can achieve better marginal seal, show retentive capability, and possess adequate physical and mechanical properties, such as increased fracture resistance of overlying restorations along with an optimal esthetic result [3].

Self-adhesive dual-cured resin cements become commonly used in dentistry for bonding the indirect restorations [4]. They have been invented to simplify the resin bonding process and minimize the steps as well as the time consumed during the bonding procedures in dental practice. Their advantages are dual curing and ease of use with no need for pretreatment of dental tissues. These cements are based on new-technology of monomers, fillers, and initiators.

According to manufacturers, the adhesive properties of self-adhesive resin cements (SARCs) include acidic and hydrophilic monomers in their composition, which simultaneously demineralize and infiltrate enamel and dentin, resulting in a strong bond [5]. The organic matrix of some of them is based on a newly developed multifunctional phosphoric acid methacrylate system (phosphates and phosphonates groups) [6]. Also, acidic mono-

mer groups allow adhesion to the tooth surface through micromechanical retention [7]. Furthermore, these acidic monomers are claimed to interact chemically with the basic inorganic fillers of the material, leading to an additional acid-base setting reaction, apart from the free radical polymerization of the material [8].

As mentioned, SARCs are a heterogeneous group of materials that possess a complex composition with presence of conventional mono-, di-, and/or multi-methacrylate monomers, phosphate and phosphonate acid-functionalized monomers, fillers, a redox, and a photoinitiator. The selection and concentration of each component is relevant for the final performance of these materials. Specifically, acidic monomers must be strong enough to produce an adequate etching of dentin with stable salt formation, and low enough to avoid excessive hydrophilicity, which may affect the physical properties of the cements [9]. Other studies have reported widely varying performances of self-adhesive cements, regarding not only bond strength to dentin but also shrinkage behavior [10], physical properties [11], pH values and film thickness [12], water sorption and solubility [5]. Such cited properties could explain variability in adhesive performance [13]. Possible consequences of insufficient adhesion are microleakage, secondary caries, pulp reaction, plaque accumulation, and periodontal disease. One of the main reasons of adhesion failure is polymerization shrinkage.

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Correspondence to:

Aleksandra MITROVIĆ
Faculty of Mechanical
Engineering
Kraljice Marije 16
11000 Belgrade, Serbia
aleksandramitrovic1926@gmail.com

Polymerization shrinkage, as one of the most important disadvantages of dental composites, causes the loss of marginal integrity of the tooth-restoration interface [14]. This process is caused by the shortening of the intramolecular distances between monomer units in the polymer compared to intermolecular distances between free monomers. However, polymerization shrinkage has not been eliminated even in the most advanced materials available [15].

Different contact or non-contact methods have been used to study polymerization shrinkage of dental composites [16]. One of the non-contact methods for measuring polymerization shrinkage is digital image correlation (DIC) method, a current technique used in biomechanical investigations, material and structure testing, fracture mechanics, etc. So far in the dental and bone biomechanics, DIC was used for studying bone reaction on loading impact, interactions between jaws and dentures, designs of different dental restorations, etc. [17]. DIC is based on tracking the position of surface markers by specialized software before, during, and after polymerization and enables full-field displacement and strain measurements.

The aim of this study was to analyze the strain field of the Maxcem Elite (Kerr, Orange, CA, USA) self-adhesive resin cement during the polymerization (in self-cure mode) using a 3D optical system based on the DIC method.

METHODS

Strain field was measured using Aramis 2M (GOM, Braunschweig, Germany) 3D optical system based on the DIC method. Prior to the experiment, system calibration was performed using the calibration panel for corresponding measurement volume. This volume was chosen based on the dimensions of the measured area on sample surface. After the successful calibration, the measurement could commence.

Calibration is a measuring process during which the measuring system with the help of calibration objects is

adjusted so that the dimensional consistency of the measuring system is ensured. The calibration object also contains the scale bar information. The scale bar information is the specified distance between two defined reference points. During calibration, the sensor configuration is determined. This means that the distance of the cameras and the orientation of the cameras in respect to each other are determined. In addition, the image characteristics of the cameras are determined (e.g. focus, lens distortions). Based on these settings, the software calculates their 3D coordinates from the reference points of the calibration object in the 2D camera image [18].

Five samples ($\phi 5 \times 2$ mm) each of Maxcem Elite (Kerr, Orange, CA, USA) were prepared by filling plastic ring-type molds. The top surface of each sample was sprayed with fine black and white spray (Kenda Color Acrilico, Kenda Farben S.r.l., Ferrera Erbognone, Italy) to create a stochastic pattern with high contrast for image analysis. Digital images were recorded immediately after sample preparation and then automatically every 10 seconds. Polymerization shrinkage was monitored over a period of 20 minutes and 120 pictures were taken. The images were then analyzed using specialized software (Aramis 6.2.0) to determine von Mises strain. Von Mises strain was chosen as it represents an index gained from the combination of principal strain at any given point at which strain occurring on the X-, Y-, and Z-axis will cause failure [19]. Analysis of the strain fields was done using sections and stage points created by software. Five concentric circular sections (Sections 1 to 5) were positioned in the center of each sample. Sections 1–5 were 1–5 mm in diameter, respectively. Six stage points were positioned at the distance of 1 mm from each other, where stage point 0 was positioned in the center of the sample and stage point 5 on the circumferential, peripheral segment of each sample. For the purpose of statistical analysis, von Mises strain values were plotted as mean values with standard deviation for Sections 1–5 with 95% confidence intervals (Table 1).

Table 1. Mean and standard deviation (SD) and 95% confidence intervals (CI) of von Mises strain (%) values

MaxCem Elite		Stage 6 (1 min.)	Stage 30 (5 min.)	Stage 60 (10 min.)	Stage 90 (15 min.)	Stage 120 (20 min.)
Section 0	Mean (SD)	0.507 (0.230)	1.677 (0.800)	3.205 (2.240)	4.025 (3.283)	4.492 (4.036)
	Upper 95% CI	0.583	1.946	3.958	5.129	5.849
	Lower 95% CI	0.429	1.408	2.452	2.921	3.136
Section 1	Mean (SD)	0.444 (0.126)	1.712 (0.802)	3.082 (1.481)	3.610 (1.723)	3.942 (1.866)
	Upper 95% CI	0.503	2.087	3.775	4.416	4.815
	Lower 95% CI	0.385	1.336	2.388	2.804	3.069
Section 2	Mean (SD)	0.673 (0.475)	1.828 (0.984)	3.046 (1.608)	3.646 (1.644)	3.949 (1.778)
	Upper 95% CI	0.821	2.135	3.567	4.158	4.503
	Lower 95% CI	0.525	1.521	2.525	3.134	3.395
Section 3	Mean (SD)	0.517 (0.400)	1.340 (0.427)	2.321 (0.912)	2.937 (1.168)	3.555 (1.438)
	Upper 95% CI	0.620	1.450	2.557	3.239	3.930
	Lower 95% CI	0.413	1.230	2.086	2.635	3.180
Section 4	Mean (SD)	0.554 (0.443)	1.872 (1.084)	3.675 (2.310)	4.316 (2.823)	4.685 (3.183)
	Upper 95% CI	0.651	2.110	4.211	4.984	5.571
	Lower 95% CI	0.456	1.633	3.140	3.648	3.799
Section 5	Mean (SD)	0.507 (0.494)	2.192 (1.307)	6.226 (3.375)	8.476 (4.269)	9.862 (4.259)
	Upper 95% CI	0.603	2.454	7.043	9.501	10.901
	Lower 95% CI	0.411	1.930	5.409	7.450	8.823

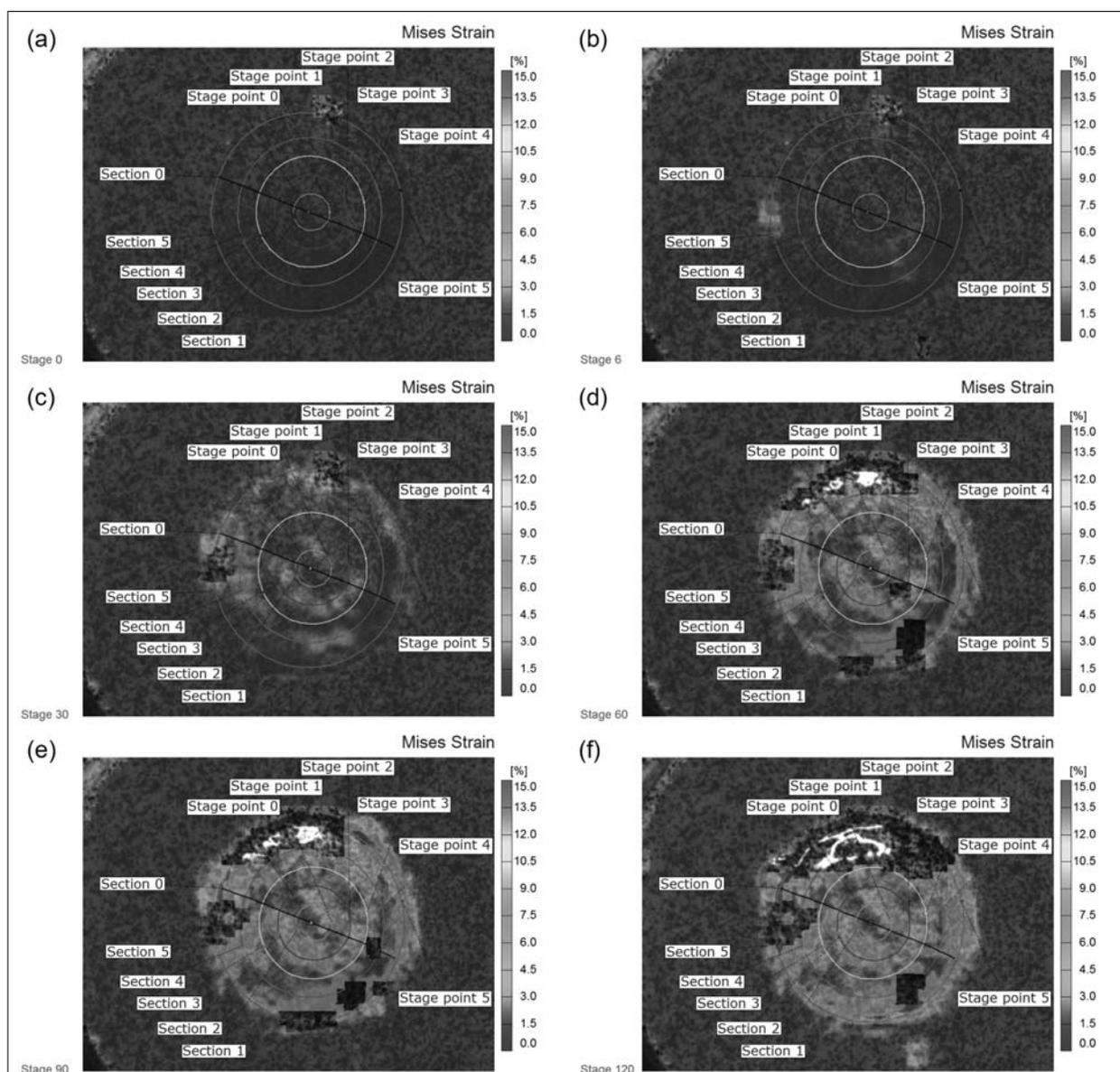


Figure 1. Von Mises strain field; (a) Stage 0; (b) Stage 6; (c) Stage 30; (d) Stage 60; (e) Stage 90; (f) Stage 120

The tested self-adhesive cement was Maxcem Elite. It contains glycerol phosphate dimethacrylate (GPDM), comonomers (mono-, di-, and tri-functional methacrylate monomers, water, acetone, ethanol, barium, glass, fumed silica, and sodium hexafluorosilicate) and ytterbium fluoride mineral fillers. Filler loading is 69 wt% and 46 vol%. Maxcem Elite is dual cure material and self-curing mode was used in this study. The experiments were done at room temperature.

RESULTS

Polymerization shrinkage of Maxcem Elite is illustrated in Figure 1 using von Mises strain. Von Mises strain values were plotted as a function of strain stage, i.e. time along each stage point. The results showed images for Stage 0, 6 (1 minute after the beginning of recording), 30 (5 minutes after the beginning of recording), 60 (10 minutes after the

beginning of recording), 90 (15 minutes after the beginning of recording), and 120 (20 minutes after the beginning of recording).

The highest values of von Mises strain were measured peripherally, on the cement-mold interface. Mean values of von Mises strain for Section 5, positioned on the interface itself, were $9.862\% \pm 4.259\%$ in Stage 120. Mean values of von Mises strain for Sections 1–4 decreased significantly compared to Section 1. There were no significant strain differences for centrally positioned Section 1 ($3.942\% \pm 1.866\%$) and Section 2 ($3.949\% \pm 1.778\%$). Furthermore, the lowest values of von Mises strain were measured on Section 3. Mean values of von Mises strain for Section 3 were $3.555\% \pm 1.438\%$ in Stage 120. It should be noted that peak values of von Mises strain measured on the periphery of the sample reached almost 15%.

Von Mises strain values for Section 0 represent a mean strain value for the entire specimen surface, as Section 0

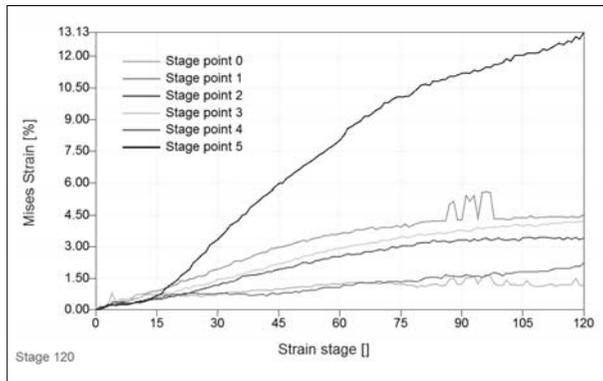


Figure 2. Von Mises strain in Stage points 0–5 as a function of strain stage (i.e. time)

is positioned across the diameter of the specimen (Figure 1). Mean values of von Mises strain for Sections 1–3 (3.942%, 3.949%, and 3.555%, respectively) are showing slightly lower values than Section 0 at Stage 120 (4.492%), while Section 4 is showing slightly higher values (4.685%). However, mean value of von Mises strain for Section 5 (9.862%) is significantly higher.

As it can be seen in Figure 2, strain values increased in stage points 0–4 until Stage 90 was reached after 15 minutes. After that, strain change is negligible. However, strain values were increasing constantly in stage points 5 during the experiment.

DISCUSSION

A single-camera 2D DIC measurement system has been proven reliable for determining the polymerization shrinkage of resin-based composites. With one-camera systems, in-plane displacements are measured and out-of-plane is assumed based on material properties. Two cameras allowed 3D measurements of dimensional changes during polymerization including out-of-plane strain and displacement values [17]. A fine spray of black paint is often used to create the stochastic surface pattern for detection by the DIC-based system. It is considered to have an effect neither on the shrinkage characteristics nor on light translucency of the composite material.

The presented results indicated non-uniform strain distribution in resin cement and two distinctive zones were identified across the surface of the material, with higher strain values along the peripheral and lower strain values in central parts of each sample. Plotting strain values for Sections 1–5 further elucidates heterogeneous nature of strain fields. The highest strain values were measured on the periphery of the sample (Section 5), as the polymerization shrinkage is oriented towards the center of the sample. This directly influences the strain values in the central part of the sample (Sections 1 and 2), as the molecules in the polymer chains shift to center of the sample mass. This molecule rearrangement in the outer segment occurred predominantly as the in-plane shrinkage in the X- and Y-axis and is increasing the strain values in the vicinity of the sample center.

Due to this fact, Section 3 has a more favorable molecule arrangement compared to strain values in Sections 1 and 2. Non-uniform strain of Maxcem Elite may be useful in clinical application as it is difficult to precisely predict the zones of the highest strain values within the material in clinical conditions where many variables are involved.

The 3D DIC method has some limitations. As the 3D computation of the measuring points is based on pixels that need to be seen from the right and the left camera with an individual facet pattern, correct 3D computation and strain computation is not possible for sample edges, specific samples shapes, poorly applied stochastic surface pattern, or light reflection [20]. As strain values increased with time, light reflection occurred on cement surface and limited facet pattern visibility, which lead to data loss on the strain field.

Since resin cements are generally applied as a thin layer between an indirect restorative material and the tooth tissue, low viscosity is required [21]. Therefore, polymerization shrinkage is an important factor, which can depend upon composite mass (or volume) [22]. Low-viscosity composites, especially flowable types, still have relatively high shrinkage of up to 6%, in large part due to the low filler fraction, commonly below 50 vol% [23]. Resin adhesives can reach higher polymerization shrinkage values, up to 13% [24]. Increased, non-uniformly distributed shrinkage strain values at the adhesive interface induced by the shrinkage of flowable resin cements may compromise bonding and lead to adhesive failure. This may have particular importance in the case of Maxcem Elite, which is intended to be used without an adhesive. Shrinkage of Maxcem Elite may compromise its bonding effectiveness due to high shrinkage values. According to the manufacturer's information, as mentioned, Maxcem Elite contains an acid monomer, GPDM, which is partly responsible for the effect of etching and adhesion to the substrate [25]. Other studies have shown that Maxcem Elite does not have a relevant acid-base reaction while setting, as do other self-adhesive cements, maintaining a low pH for a long time, which could adversely influence the formation of an optimal cross-linked polymer network [9]. D'Alpino et al. [26] found a linear correlation between shrinkage strain rate and the filler volume. With increasing filler-volume percent, the shrinkage strain decreased [27]. Filler content of the investigated material is 69% of weight and 46% of volume. Material tested in this study was applied directly by an automix syringe. Maxcem Elite is characterized by an amine-free redox initiator system, which may help prevent chemical incompatibility between acidic groups and self-curing components [28]. Chemical and thermal instabilities at the filler/organosilane bonds may lead to the formation of cluster agglomeration within the resin matrix. The stress development in dental composites depends on the organic matrix, the type and amount of fillers, and the filler/matrix interactions. High filler content produces stiffer polymers and higher polymerization stress levels [29].

Monomer type may also influence bond strength performance due to chemical interaction between specific monomer functional groups and the bonding substrate, and chemical initiators may benefit polymerization in the

absence of light [30]. The volumetric shrinkage resultant from the establishment of covalent bonding among methacrylate groups is determined by the monomeric composition, as the higher the concentration of high molecular weight monomers, the lower the amount of carbon double bonds per unit volume. In addition, high molecular weight monomers in general present lower mobility, also contributing to lower shrinkage [31].

However, the role of each component on the final properties of the materials has not been clarified yet. The complex formulation of self-adhesive cements is only partially disclosed by manufacturers, making it difficult to explain the strain differences among commercial materials through their resin composition and inorganic content.

Although the guidelines for the preparation of SARC_s ordains that the polymerization time lasts at minimum 5 minutes, the DIC showed that dimensional changes, i.e. strain changes, continue and stabilize after 15 minutes at all points of Maxcem Elite. Also, this fact highlights the advantage of the DIC method as a powerful tool for investigations in technology and dentistry research fields. Further investigation will be conducted in order to better understand in situ polymerization shrinkage of resin cements. Experiments, beside the DIC method, such as hardness and the degree of conversion, will be done on numerous samples of Maxcem Elite but also on other SARC_s. Hardness has been found to be sensitive to the residual monomer content in the polymerized resin and it is a simple and effective way to assess the degree of conversion of SARC_s. Due to this fact, it will be easier to have a wider picture about the complexity of polymerization shrinkage of resin cements.

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CONCLUSION

Our contribution in this paper consists of the following conclusions:

- A possible reference model for investigating composite cements was presented;
- The DIC method can serve for visualization of the strain generated in the samples of Maxcem Elite;
- Non-uniform distribution of shrinkage strain was registered, with the highest strain generated peripherally;
- Sections 1 and 2 of the von Mises strain field showed higher strain values than Section 3 due to molecule rearrangement in the outer segment of Maxcem Elite that occurred predominantly as the in-plane shrinkage in the X- and Y-axis, which increases the strain values in the vicinity of the sample center;
- The increased time of polymerization in the examined self-adhesive resin cement and positive correlation with fillers as the key factor for the polymerization shrinkage can be debated.

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Утврђивање оптерећења самовезујућег композитног цемента применом методе 3Д корелације дигиталних слика

Александра Д. Митровић¹, Иван В. Танасић², Ненад Р. Митровић¹, Милош С. Милошевић³, Љиљана Ђ. Тихачек-Шојић², Душан Г. Антоновић⁴

¹Универзитет у Београду, Машински факултет, Београд, Србија;

²Универзитет у Београду, Стоматолошки факултет, Београд, Србија;

³Универзитет у Београду, Иновациони центар Машинског факултета, Београд, Србија;

⁴Универзитет у Београду, Технолошко-металуршки факултет, Београд, Србија

САЖЕТАК

Увод/Циљ У настојању да се поједноставе стоматолошке процедуре уведене су нове групе композитних цемената – самоадхезивни, двојновезујући композитни цементи. Својства ових цемената могу да варирају у великој мери. Један од главних разлога нарушавања адхезионих својстава композитних цемената је полимеризацијска контракција. Циљ овог рада је да се одреди и измери деформационо поље самоадхезивног двојновезујућег композитног цемента током хемијске полимеризације коришћењем експерименталне технике – методе 3Д корелације дигиталних слика.

Метод Самоадхезивни композитни цемент *Maxcem Elite* (*Kerr, Orange, САД*) испитиван је на пет узорака пречника

5 mm, дебљине 2 mm, који су припремљени пуњењем пластичних калуца прстенастог облика. Дигиталне слике су забележене непосредно после припреме узорака.

Резултати Неуниформно деформационо поље је показало веће вредности деформација на периферији узорака (до 15%) и мање вредности деформација у централним деловима узорака (око 4%).

Закључак Може се закључити да је 3Д корелација дигиталних слика прецизна и поуздана метода за мерење деформационих поља у области карактеризације материјала.

Кључне речи: самоадхезивни композитни цемент; метода 3Д корелације дигиталних слика; деформација; полимеризацијска контракција