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Original Article

Evaluation of Antibacterial Properties of Dental Adhesives Containing Metal Nanoparticles

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ARTICLE INFO

Abstract

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<i>Article History:</i> Received: 21 September 2017 Accepted: 26 November 2017	<i>Statement of problem:</i> Secondary dental caries is a common clinical finding in composite restoration. The development of a bactericidal dental adhesive provides a promising method to reduce the risk of secondary caries. <i>Objectives:</i> This study aimed to assess the antibacterial activity of silver (Ag) and
Key words: Dental adhesive Nanoparticle Antibacterial Silver Titanium dioxide	 b) b) b
Corresponding Author: Farhad Shafiei Department of Dental Biomaterials, School of Dentistry, Tehran University of Medical Sciences, North Kargar Avenue, Tehran 14174, Iran Email: <u>faradent@yahoo.com</u> Tel: +98-9121598469	methacryloyloxyethyl carbonyl amino]-2,4,4-trimethylhexane (UDMA), trimethylolpropane trimethacrylate (TMPTMA), 2-hydroxyethyl methacrylate (HEMA), and photoinitiator, with polyvinylpyrrolidone (PVP) as the stabilizer. We counted the colony-forming units (CFU%) of two cariogenic bacteria, <i>Streptococcus mutans (S. mutans)</i> and <i>Lactobacillus acidophilus (L. acidophilus)</i> , that were exposed to the powdered light cured adhesive specimens. The effects of various concentrations of each nanoparticle were compared by one-way ANOVA, followed by the post hoc Bonferroni test. <i>Results:</i> All samples exhibited definite antibacterial activity (P<0.05) compared to the control specimens. The Ag nanoparticle samples showed higher antibacterial properties compared to the TiO ₂ nanoparticle samples. Increasing the concentration of nanoparticles resulted in significant differences in bactericidal properties, with the exception of 0.2 to 0.5 wt% Ag nanoparticle specimens exposed to <i>S. mutans</i> and the 0.2 to 0.5 wt% TiO ₂ nanoparticle specimens exposed to <i>L. acidophilus</i> . <i>Conclusions:</i> These metal-based nanoparticles exhibited dose-dependent bactericidal activities. The Ag nanoparticles had higher antibacterial activity compared to the TiO ₂ nanoparticles. Incorporation of these nanoparticles into dental adhesives is a promising way to reduce the risk of secondary caries. However, further clinical evaluations should be performed.

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Introduction

The basic mechanism behind tooth decay is demineralization attributed to acid produced by bacteria [1-3]. Carbohydrates metabolize to acid by cariogenic bacteria that exist in plaque such as Streptococcus mutans (S. mutans) and Lactobacillus acidophilus (L. acidophilus). Thus, development of bonding agents and other restorative and preventive materials that have the capability to reduce bacterial activity at the tooth/composite interface can effectively decrease secondary caries [4-6]. While the clinical performance of resin-based materials has greatly improved in terms of restoration aesthetics, durability, and bonding strength; recently, there is increased focus on the acquisition of antibacterial properties. Incorporation of soluble antimicrobial agents, such as chlorhexidine, in the resin matrix have been investigated [7]. The results have shown clear inhibition of bacteria, but the release kinetics is difficult to control and longterm effect is not expected. One of the advantages of adding a releasing agent is that the antibacterial effect can produce an impact beyond the area of the resinous material. However, frequently mechanical properties of the resin material are reduced [7]. Another strategy is to employ an antibacterial agent, which is immobilized in the resin matrix and not released. In this case, the antibacterial effect is limited to bacteria that directly contact the material. Antibacterial agents incorporated in adhesives [8, 9] and filler composites [10] have shown good bacterial inhibition. Among various metals, silver (Ag) has attracted significant attention due to its antibacterial effects [11-14]. One of the advantages of Ag over general antibiotics is that Ag has widespectrum antibacterial activity with very high efficiency and relatively low cytotoxicity [12]. Ag nanoparticles placed in a polymer matrix produce a large reservoir of Ag ions that can be released over time and provide a long-lasting antibacterial effect [15]. Titanium dioxide (TiO₂) is a bactericide and a biocompatible material with potential use in many applications. Bioactivity of this material can also be useful in closure of the gaps in the interface and remineralization of the adjacent tooth [16, 17]. We took into consideration the aforementioned problems and the increased need to develop an efficient and biocompatible dental adhesive

to inhibit secondary caries. First, we aimed to synthesize a dental bonding incorporated with metal Ag and TiO_2 nanoparticles, and subsequently assessed the antibacterial activities of the light-cured dental bonding by exposing them to *S. mutans and L. acidophilus.*

Materials and Methods

Adhesive preparation

Table 1 lists the information about the materials and their use. In order to prepare 10 g base formulation of dentine bonding agent, we used a magnetic stirrer to mix 1.4 g of 2,2-bis[4-(2-hydroxy-3-methacryloxypropoxy)phenyl] propane (Bis-GMA), 2.6 g of 2-hydroxyethyl methacrylate (HEMA), 0.8 g trimethylolpropane trimethacrylate (TMPTMA), 1.2 g of 1,6-bis-[2methacryloyloxyethyl carbonyl amino]-2,4,4trimethylhexane (UDMA), and 4 g of acetone. All weights were obtained by a laboratory scale (Sartorius AG, Germany) that had an accuracy of four decimal places. The mixture was mixed until homogenous. Then, we divided the base formulation into different containers and added the antibacterial nanoparticles at the following weight percentages: 0.05, 0.1, 0.2, 0.5, and 1 wt% to the mixture. We used Ag and TiO₂ spherical shaped nanoparticles that had a diameter of 20 nm and 99.9% purity. We added 0.5 wt% polyvinylpyrrolidone (PVP) to the mixture to avoid agglomeration of the nanoparticles. Direct sonication by a probe is the preferred method to disperse nanoparticles. Thus, in this study, we used ultrasound vibrations from an ultrasonic probe (UP400S - Hielscher Ultrasonics GmbH, Germany) with each mixture for 3 minutes, at 0.5 cycle with an amplitude of 60%. Then, 0.5 wt% photoinitiator (IRGACURE 819) and 0.1 wt% p-Methoxyphenol (PMP) were added to each bottle. After the addition of the photoinitiator, the mixing was continued with a magnetic stirrer in the dark at 40°C for 30 minutes. The samples were stored in a light resistant glass bottles to avoid preterm light curing from the environment.

Uncured adhesives were used for particle size analysis. The 1 at% Ag and TiO_2 nanoparticle adhesives were sonicated using an ultrasonic probe for 30 seconds before insertion into the DLS (Zetasizer Nano, Malvern Instruments, UK)

cuvettes. The results confirmed the presence of nano-sized particles in the resin. The nanoparticle-adhesives had an average polydispersity index (PDI) of 0.279 for Ag and 0.173 for TiO_2 . This clearly indicated that the nanoparticle-adhesives were almost homogenous.

Shear bond strength test

We conducted a shear strength test to confirm the bonding properties of the newly synthesized adhesives. Commercial dental bonding (3M ESPETM Single BondTM) was used as the control sample. A total of 18 dentinal samples were etched for 20 seconds with 37% commercial phosphoric acid, rinsed with distilled water, and slightly dried. Then, the prepared 1wt% Ag nanoparticle and TiO₂ nanoparticle dental adhesives were applied to the samples with a micro brush. After 15 seconds, a slight stream of air spray was used to ensure development of the resin tags. The adhesives were light cured for 40 seconds by a 400 mW/cm² intensity light curing unit (Coltolux 75, Coltene, Whaledent, NJ, USA). Then, we placed a plastic tube (diameter: 4 mm, height: 4mm) on the dentine surface and filled with dental resin composite (Shade A2, 3M ESPETM FiltekTM Z250 universal restorative). The samples

Table 1: Materials used in the study		
Materials	Manufacturer	Utilization
Nano silver (Ag)	US Research Nanomaterials	Filler
Nano Titanium dioxide (TiO ₂)	Sigma- Aldrich	Filler
Acetone	Merck	Solvent
2,2-Bis[4-(2-hydroxy-3- methacryloxypropoxy)phenyl] propane (Bis-GMA)	Degussa	Adhesive monomer (di-methacrylate)
2-Hydroxyethyl methacrylate (HEMA)	Sigma- Aldrich	Hydrophilic monomer
1,6-bis-[2-methacryloyloxyethyl carbonyl amino]-2,4,4-trimethylhexane (UDMA)	Degussa	Adhesive monomer (di-methacrylate)
Trimethylolpropane trimethacrylate (TMPTMA)	Sigma- Aldrich	Adhesive monomer (tri-functional monomer)
Phenylbis(2,4,6-trimethylbenzoyl) phosphine oxide (IRGACURE 819)	Sigma- Aldrich	Photoinitiator
P-Methoxyphenol (PMP)	Merck	Inhibitor
Polyvinylpyrrolidone (PVP)	Sigma-Aldrich	Prevent agglomeration of nanoparticles

were cured for 40 seconds. After removing the plastic tube, 40 seconds were cured again to ensure complete polymerization. Then, the specimens were stored in distilled water for 24 hours at 37°C. Shear bond strength was measured by a Universal Testing Machine (UTM) (Santam, SMT-20, Iran). The chisel was attached to the upper arm of the UTM. The load was applied parallel to the dentin/ resin composite interface with a load cell of 20 kg (Bongshin Loadcell Co., Ltd., South Korea) at a crosshead speed of 0.5 mm/min until the specimens debonded.

Antibacterial assessment

We used a cylindrical stainless steel mold (diameter: 9 mm, height: 2 mm) to prepare the cured samples. The mold was placed on a cover glass. Then, uncured adhesive was injected into the mold by a 10 ml sterile syringe with a 0.22 µm syringe filter to ensure that probable agglomerated particles would not be present at the samples. Another cover glass was carefully placed on the mold such that no bubble was made in the adhesive. The samples were put in a vacuum oven (Ehret GmbH, Germany) for 30 minutes for complete evaporation of the acetone. The samples were cured for 60 seconds, 30 seconds per side. Then, the specimens were removed from the mold and kept in sterile surgical covers. All cured samples were ground by a laboratory universal grinder (Mortar Grinder PULVERISETTE 2, Fritsch). Powdered adhesive specimens were sterilized under a UV lamp (Laminar Flow UV Cabinet, JTLV C2, Iran) for 180 minutes.We used two cariogenic bacteria in this study - S. mutans (ATCC 35668) and L. acidophilus (ATCC 314). These bacteria were prepared from the microbial collection at Pasteur Institute of Iran, Tehran, Iran. We prepared 2.0 McFarland turbidity of each bacteria in sterile laboratory tubes. Turbidity was confirmed by a spectrophotometric (Biophotometer Plus, Eppendorf) assessment of optical density. We used two, 96-well microtiter plates for bacterial cultivation. Positive control wells consisted of culture medium plus bacterial solution. The powdered antibacterial-adhesives were placed into the wells. All wells were poured with 200 µl blood culture (Baharafshan, Iran) using a micropipette (Eppendorf Research). Then, 6.66 µl of the bacterial suspension was inserted

into the designated wells. The microtiter plates were incubated for 24 hours at 37°C in CO₂ by placing both microtiter plates in an isolated jar that contained a lit candle. The flame extinguished when all of the oxygen was consumed. After 24 hours, 1 μ l from each well was extracted and diluted in a sterile laboratory tube with 999 μ l of physiologic serum. Then, 10 μ l of each solution was removed with a micropipette and spread on the surface of the solid medium. We used sterilized chocolate agar medium to grow *S. mutans* and sterilized MRS agar medium for *L. acidophilus*. All plates were incubated for 24 hours at 37°C in CO₂. We counted the bacteria by determining the colony-forming unit (CFU%), as an estimate of viable bacteria.

Statistical analysis

Colony counts of the bacteria were standardized from 0%-100% based on the colony count of the control group. The effect of nanoparticle type and concentration for each bacteria was analyzed by two-way ANOVA. We took into consideration the significant interaction of the aforementioned factors and performed a comparison of the effects of each nanoparticle at various concentrations by one-way ANOVA, followed by the post hoc Bonferroni test. Nanoparticles were compared at each concentration by the independent t-test. Without adjustment for α error, the significance level was set at P<0.05.

Results

Shear strength test

The shear bond strength value confirmed that the specimens had bonding properties similar to

Table 2: Shear bond strength of commercial and two

 fabricated dental adhesive. Bond strength values are

 presented as MPa

Adhesive	Bond strength Mean ± SD (MPa)	
Commercial, Single Bond (3M ESPE)	7.57 ± 0.1	
Silver (Ag)-containing adhesive	7.58 ± 0.08	
Titanium dioxide (TiO ₂)- containing adhesive	7.55 ± 0.09	

commercial adhesives (Table 2). The shear strength values of the specimens were similar to the control group; therefore, the specimens were considered for the antibacterial test.

Colony count test

We analyzed the interaction between concentration and nanoparticle by two-way ANOVA. The results indicated a significant interaction in both bacteria (P<0.001) as seen in Table 3.The number of the bacterial colonies was calculated. As described earlier, the colony counts were standardized concerning the control colony count. At 24 hours, the CFU% was approximately 500 for L. acidophilus for the control group. The Agadhesive had a gradual reduction in CFU% with increasing concentrations of Ag, as follows: 372 (0.05%), 340 (0.1%), 303 (0.2%), 185 (0.5%), and 130 (1%) for L. acidophilus. CFU% counts were approximately 320 for S. mutans in the control group. The Ag-containing adhesive also showed a gradual reduction in CFU% with increasing concentrations of Ag, as follows: 207 (0.05%), 183 (0.1%), 108 (0.2%), 104 (0.5%), and 51 (1%) for S. mutans. Mean and standard deviation (SD) of CFU% data is shown in Table 4. One-way ANOVA followed by Bonferroni analysis among different concentrations showed statistically significant differences (P<0.05), with the exception of two concentrations. There was no statistically significant difference between the 0.2 wt% and 0.5 wt% concentrations of the TiO_2 nanoparticle on L.

acidophilus (P=0.068). In addition, the difference between the 0.2 wt% and 0.5 wt% concentrations of the Ag nanoparticle on S. mutans was not statistically significant (P=1.00). We used the t-test to compare the effects of each concentration on CFU% between both nanoparticles. The results indicated a statistically significant difference between the two types of nanoparticle-adhesives at each concentration. Figure 1 shows the behavior of these nanoparticles concerning CFU% for L. acidophilus and S. mutans.

Discussion

Antimicrobial surfaces present a major challenge, particularly in dentistry, where bacterial biofilms tend to accumulate and propagate on solid surfaces. Resin composite restorations are more susceptible to secondary caries due to the increased tendency to colonize bacteria on their surfaces. Polymerization shrinkage of the resin composites makes the bonding interface the weakest area. Thus, the role of a dental adhesive is important. One way to address this problem is to design materials with antibacterial properties. Dental bonding agents, as an important and delicate player in the integrity of a composite restoration, can be suitable hosts for antibacterial materials. The current study has aimed to fabricate antibacterial adhesives and evaluate the antibacterial properties of various concentrations of two nanoparticles, TiO₂ and Ag, incorporated into an adhesive.

Bacteria	Source	F	P-value	
	Concentration	2143.13	<0.001	
Lactobacillus acidophilus (L. acidophilus)	Nanoparticle	986.60	< 0.001	
	Concentration* Nanoparticle	222.97	< 0.001	
	Concentration	1060.90	< 0.001	
Streptococcus mutans	Nanoparticle	782.48	< 0.001	

30.99

< 0.001

Table 3: Two-way ANOVA (5x2) to assess the interactions of the nanoparticles and concentrations

* simultaneous effect of two variables (concentration and nanoparticle) on the colony count of bacteria

Concentration* Nanoparticle

(S. mutans)

Bacteria	concentration	CFU% of Ag-containing adhesive Mean±SD	CFU% of TiO ₂ -containing adhesive Mean±SD
	0.05	73.80±0.71	80.02±1.19
	0.1	68.40±0.5	70.21±0.7
L. acidophilus	0.2	59.76±0.9	63.97±1.01
	0.5	36.92±0.87	66.86±1.05
	1	26.18±0.9	37.20±1.17
	0.05	64.28±1.35	92.029±1.29
S. mutans	0.1	57.54±1.75	66.98±1.25
	0.2	33.33±1.54	52.46±1.11
	0.5	32.80±1.66	44.16±1.66
	1	16.14±2.34	30.62±1.73

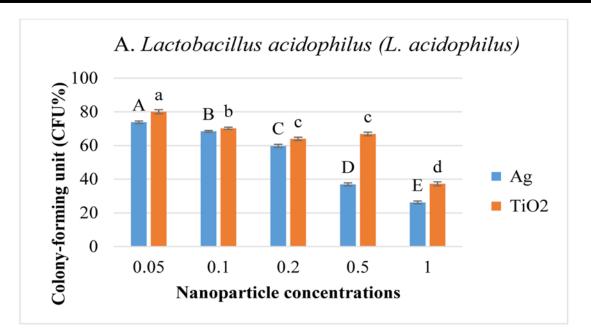
Table 4: Colony counts of L. acidophilus and S. mutans in Ag and TiO₂ nanoparticle containing specimens

CFU= Colony-forming unit, Ag= Silver, TiO_2 = Titanium dioxide, L. acidophilus= Lactobacillus acidophilus, S. mutans= Streptococcus mutans

Nanotechnology has been employed in many fields in recent years. Currently, nanoparticles are used for different physical, biomedical, and pharmaceutical applications. Metal-based nanoparticles have promising antibacterial properties. Among these materials, the Ag nanoparticle and TiO₂ nanoparticle have been investigated in numerous studies.

It has been reported that Ag is highly toxic to the majority of microorganisms [18, 19]. The nanoparticle form of Ag exhibits an increased bactericidal effect because of enhanced surface area exposure to the microorganisms [19]. However, the mechanism of action of Ag on microorganisms is not fully understood. It has been suggested that loss of ability to replicate DNA and/or changes in the bacterial cell wall occur after the application of Ag nanoparticles [20]. In addition, the photocatalysis properties of TiO, have been employed in many fields. Produced free radicals (HO• and $O_2 \bullet -$) from TiO, following UV exposure, are known as reactive oxygen species (ROS). ROS are strong oxidants that have the capability to induce oxidative damage in the cell walls of microorganisms [21]. Studies have shown that TiO₂ has photocatalysis and bactericidal properties; however, the use for this capability has been less studied in dental adhesives.

It has shown good antibacterial property in resin composites; however, mechanical properties might decrease. Shirai et al. reported that after completion of UV radiation, the antimicrobial property of TiO, continued. This property could be employed as an adjunct treatment to eliminate residual bacteria after debridement [21]. The bioactivity of TiO₂ added to an adhesive was proven by Welch et al. with the formation of hydroxyl apatite at the surface. The advantages of this feature included closure of gaps between resin material and the tooth, as well as remineralization of the adjacent tooth [16]. Sun et al. reported that the mechanical properties and degree of conversion of the adhesive improved by the addition of the TiO₂ nanoparticle [22]. Dentinal tubules are reported to enhance bond strength with resinous materials due to formation of resin tags [16]. Dentinal tubules have diameters of approximately 1-2.5 µm [16, 23]. Therefore, we did not anticipate that our nanoparticle-containing adhesive would interfere with the bonding system. The nanoparticles were smaller than the dentinal tubules. The results of a preliminary study revealed that shear bond strength of the nanoparticle-containing adhesive was comparable to commercial counterparts. This finding agreed



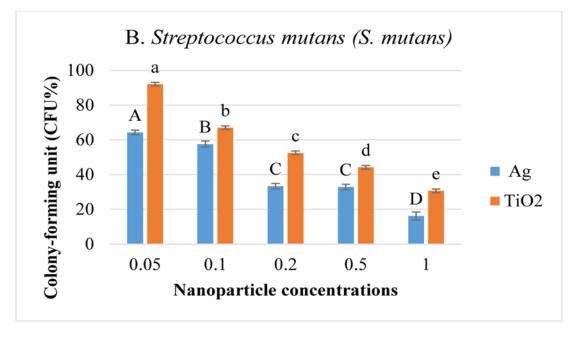


Figure 1: The effect of nanoparticle concentration on colony-forming unit (CFU%) in both *Lactobacillus acidophilus (L. acidophilus)* (A) and *Streptococcus mutans (S. mutans)* (B). Values marked by different capital and lowercase letters are significantly different in the silver (Ag) and titanium dioxide (TiO₂) groups (P<0.05)

with other studies [16, 24, 25] that added different nanoparticles to commercial adhesives and reported no reductions in shear bond strength. However, we synthesized antibacterial adhesives and the nanoparticle in our study was added to our experimental base formulation *et al.* [26] reported significant improvement in mechanical properties of synthetic dental adhesives, especially with incorporation of 0.1% and 0.2% diamond nanoparticles. No decrease in bond strength data might be explained by usage of the tri-functional monomer TMPTMA in our adhesive formulation.

glycol dimethacrylate (TEGDMA) with a crosslinker monomer (TMPTMA) improved the chemical-mechanical properties of adhesives [27]. Here, we used Ag and TiO_2 nanoparticles to develop an intrinsic bactericidal methacrylate based dental adhesive. Various concentrations of each of the incorporated nanoparticles were made to identify the effect of concentration on bactericidal properties of Ag and TiO_2 . The results indicated that adhesive containing nanoparticles exhibited definite antibacterial properties. This bactericidal

According to Silva, replacement of triethylene

property was dose-dependent, which agreed with results reported by Degrazia et al. [28]. Each dosage had a statistically significant difference in CFU% compared to other concentrations, with the exception of the 0.2 wt% and 0.5 wt% Ag-containing samples in S. mutans and the 0.2 wt% and 0.5 wt% TiO₂-containing samples in L. acidophilus. This similarity should be noted when choosing the desired concentration because of the potential impact on mechanical properties while there would be no significant changes in bactericidal properties. We observed that the Ag nanoparticle specimens had a noticeably sharp drop in colonies from the 0.2 wt% to 0.5 wt% in L. acidophilus and from the 0.1 wt% to 0.2 wt% in S. mutans (Figure 1, Table 4). The TiO₂ nanoparticle specimens had a sharp drop in colonies from the 0.5 wt% to 1 wt% in L. acidophilus, whereas we observed that the CFUs of S. mutans followed an approximately regular pattern. The 1 wt% showed the highest antibacterial activity in both nanoparticles. The Ag particles had stronger bactericidal action against S. mutans and L. acidophilus compared to the TiO₂ particles. This difference was more noticeable with S. mutans, especially at the higher dosages. Cheng et al. [29] incorporated Ag nanoparticles into an amorphous calcium nanocomposite. They used 0.028 wt% nanoAg. [29]. The Ag containing specimens reduced approximately 15.2 CFU% compared to neat nanocomposite. This CFU% reduction was lower than our 0.05% Ag nanoparticle specimens that had a 35 CFU% reduction in S. mutans. This might be attributed to the higher amount of Ag used in our study. In addition, the methodology and antibacterial test differed between studies. Cheng et al. placed the bacteria on a large resin surface, whereas we immersed adhesive powder in the bacterial suspension. Welch et al. incorporated nano TiO₂ into a commercially available bonding agent to achieve a bioactive and bactericidal dental adhesive [16]. They reported that the antibacterial properties of the nano TiO, depended on UV irradiation time and were not concentration dependent. However, our results demonstrated that the bactericidal properties of the TiO₂ nanoparticle were concentration dependent. Welch et al. used Staphylococcus epidermidis, which is a part of the human skin's normal flora. The choice of this bacteria to assess bactericidal properties of a dental adhesive, which is faced with challenges from cariogenic bacteria seems irrelevant. In this study, we performed the CFU test to obtain preliminary information on the efficacy of the nanomaterial antibacterial agent. Considering the promising findings, further studies can be done with various microbial tests on these adhesives. We suggest assessing the effect of addition of these nanoparticles on the mechanical behavior of dental adhesive. Higher concentrations of these materials should be tested to obtain the highest bactericidal activity. Other nanoparticles such as zinc oxide (ZnO) might have antibacterial properties, supported by strong mechanical improvement.

Conclusions

We tentatively incorporated metal-based nanoparticles into a synthesized etch and rinse dental adhesive to assess antibacterial properties of the newly developed material on cariogenic bacteria. We found that these metal-based nanoparticle exhibited bactericidal activities in a dose-dependent manner without affecting shear bond strength. The Ag nanoparticles showed higher antibacterial activity compared to the TiO₂ nanoparticles. Incorporation of such materials into dental adhesives is a promising way to reduce the risk of secondary caries. However, further clinical evaluation should be performed.

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Conflict of Interest: None declared.

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