

**Comparative evaluation of apically extruded debris using various file systems during root canal instrumentation**

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**Conflicts of Interest:** Nil

**Abstract**

**Background and objectives:** The study aimed to compare the apically extruded debris using various file systems during the root canal instrumentation.

**Materials and method:** Forty-five single rooted teeth were selected and randomly divided into three groups (n=15) according to instrumentation system used Group 1: Hy Flex EDM files, Group 2: Race files, Group 3: Protaper Universal files. The endodontic access cavity was prepared, canal orifices was located and confirmed with a 10 K-file. The working length was determined using a 20 K-file. Then the canals were prepared sequentially using various file systems. During instrumentation, intermittent irrigation with distilled water was done. The extruded debris along with irrigated

solutions during instrumentation at apical area was collected into preweighed Eppendorf tubes. The tubes were then stored in the incubator at 70°C for 5 days for the evaporation of distilled water. The difference of weight of dry extruded debris between PR instrumentation and post instrumentation was calculated using a microbalance. The data collected was analyzed using a Kruskal Wallis test.

**Result:** The test results demonstrate that the mean Apical Debris Extruded in Hy Flex EDM group was  $0.080 \pm 0.045$ , for Race group was  $0.025 \pm 0.015$  and in Protaper Universal group, it was  $0.044 \pm 0.014$ . This mean difference in the Apical Debris Extruded between 3 groups was statistically significant at  $P < 0.001$

**Interpretation and conclusion:** Within the limitations of the study, it could be concluded that the Hy Flex EDM files extruded maximum amount of apical debris than the other two file systems used in this study.

**Keywords:** Apical extruded debris, Eppendorf tubes, Hy Flex EDM, Protaper Universal, Race

### **Introduction**

The aims of endodontic instrumentation include debridement and disinfection of the root canal system in addition to creating an appropriate shape to achieve a complete 3D obturation.

During root canal preparation, pulp tissue, dentine chips, irrigants, and microorganisms may be extruded beyond the apical foramen.

Apically extruded materials may cause undesired consequences such as flare-ups, periapical inflammation, postoperative pain, and delay of periapical healing.

Recently, several new instrumentation techniques that enable the use of a single nickel-titanium (NiTi) file with different designs, alloy treatments and kinematics for the preparation of root canals have been introduced such as Protaper Universal, Protaper Next, Hy flex CM, Hy flex EDM, Race file system, One shape file system, Hero shaper file system, etc.

In the present study, Hy flex EDM file, Race file and Protaper Universal files were used. These files were selected because of the ease of availability and to compare the amount of apically extruded debris between each group.

Therefore, the purpose of the study was to assess the amount of apically extruded debris using various file systems during root canal instrumentation.

### **Materials and methods**

Forty -five extracted human single rooted teeth with mature apices, single canals, and of similar lengths were selected for this study.

The teeth were kept in 5.25% sodium hypochlorite for 2 hr to clean the periodontal tissue remnants on the root surface.

The root surfaces were further scaled with a periodontal curette.

Teeth were selected and randomly divided into three groups (n=15) according to instrumentation system used

Group 1: Hy flex EDM files,

Group 2: Race files,

Group 3: Protaper Universal files

### **Debris collection**

Weight of the Eppendorf tube was determined using a microbalance with an accuracy of  $10^{-5}$  g

Each tube was weighed three times, and the mean value was recorded.

A hole was created in the cap and a 27-G needle was then placed alongside the cap to balance the air pressure inside and outside.

Each tooth was inserted up to the cemento-enamel junction.

Then, each cap with the tooth and the needle was attached to an Eppendorf tube, and the tubes were fitted into vials.

The entire Eppendorf tube was handled only by the vial. The Eppendorf tube was never handled with bare fingers.

### **Root canal instrumentation**

Standard access cavities were made using round diamond burs with a high-speed handpiece and air water spray cooling.

Apical patency of all root canals was confirmed with a size 10 K-file.

The working length (WL) was determined using a size 15 K-file. The WL was set 1 mm short of the apex.

To standardize root canal preparation and the amount of irrigating solution used for each sample, these steps were

repeated 5 times until the working length was reached and a total of 20 mL distilled water irrigating solution was used.

For the irrigation of each sample, a 30-G closed-ended side-perforated irrigation needle was used to the point reached by the instrument during the preparation.

**Evaluation of apically extruded material**

After the root canal preparation was complete, the stopper, needle, and the tooth were separated from the Eppendorf tube.

The debris adherent to the external root surface was collected by washing the root with 1 mL distilled water in the tube.

The tubes were then stored in an incubator at 70°C for 5 days to evaporate the distilled water.

All tubes were weighed three times using the same balance to calculate the mean.

The amount of extruded debris was calculated by subtracting the original weight of the empty Eppendorf tube from the gross weight.

**Statistical analysis**

Statistical Package for Social Sciences [SPSS] for Windows Version 22.0 Released 2013. Armonk, NY: IBM Corp., will be used to perform statistical analyses.

Kruskal Wallis test followed by Mann Whitney's post hoc analysis was used to compare the mean Apical Debris Extruded between 3 study groups.

The level of significance was set at P<0.05.

**Result**

Table 1: Table showing apically extruded debris by each sample in each group

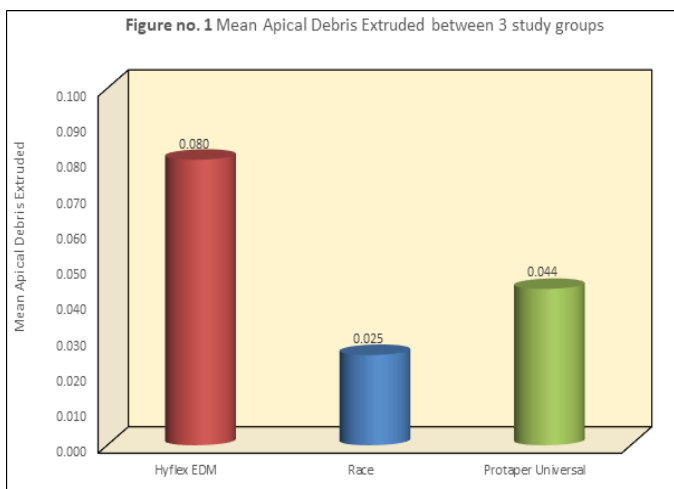
Sn.	Hy flex edm	Race	Protaper universal
1.	0.06	0.06	0.04
2.	0.08	0.05	0.06
3.	0.05	0.02	0.03

4.	0.04	0.02	0.02
5.	0.05	0.01	0.05
6.	0.03	0.02	0.05
7.	0.10	0.03	0.06
8.	0.08	0.04	0.05
9.	0.06	0.02	0.05
10.	0.18	0.01	0.04
11.	0.06	0.02	0.06
12.	0.05	0.01	0.03
13.	0.08	0.02	0.04
14.	0.10	0.02	0.02
15.	0.18	0.03	0.06

Table 2: Table illustrates the comparison of mean Apical Debris Extruded between 3 groups.

Comparison of mean apical debris extruded between 3 study groups using krushal Wallis test						
Groups	N	Mean	SD	Min	Max	P-Value
Hy flex EDM	15	0.080	0.045	0.03	0.18	<0.001*
Race	15	0.025	0.015	0.01	0.06	
Protaper Universal	15	0.044	0.014	0.02	0.06	

The test results demonstrate that the mean Apical Debris Extruded in Hy flex EDM group was 0.080 ± 0.045, for Race group was 0.025 ± 0.015 and in Protaper Universal group, it was 0.044 ± 0.014. This mean difference in the Apical Debris Extruded between 3 groups was statistically significant at P<0.001



This infers that Race group showed a significantly least mean Apical Debris Extruded, followed by Protaper Universal and highest in Hy flex EDM group.

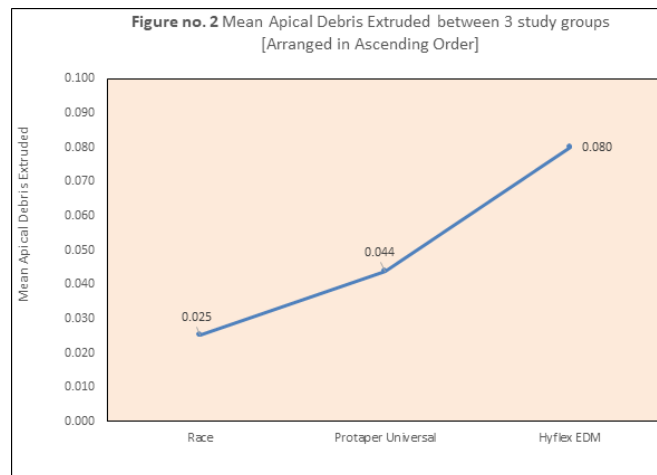


Table 3: table illustrates the multiple comparisons of mean differences in Apical Debris Extruded between 3 groups.

Multiple comparison of mean difference in apical debris extruded between groups using Mann Whitney post hoc test					
(I) Groups	(J) Groups	Mean Diff. (I-J)	95% CI for the Diff.		P-Value
			Lower	Upper	
Hy flex EDM	Race	0.054	0.029	0.080	<0.001*
	Protaper Universal	0.036	0.010	0.061	0.005*
Race	Protaper Universal	-0.018	-0.044	0.007	0.004*

The test results showed that Race group showed significantly least Apical Debris Extruded as compared to Protaper Universal and Hy flex EDM group at P=0.004 & P<0.001 respectively.

This was then followed next by Protaper Universal group showing significantly lesser mean value as compared to Hy flex EDM group at P=0.005.

### Discussion

The pain and swelling after root canal treatment are often associated with the preparation procedures such as inflammatory reaction against the intracanal contents forced through the periapical region (dentine particles, necrotic pulp tissue, or microorganisms), irrigation solutions and foreign body reactions to filling materials. Extrusion of intracanal debris and irrigants is common during root canal preparation and no technique or instrument has completely solved this problem. There has been a rapid evolution of rotary instruments through the last decade, and many have been assessed for their debris extrusion potential and the amount of this debris.

The NiTi single-file systems that operate in a reciprocal movement have recently become popular in root canal preparation.

Files working with reciprocal movement cause apical extrusion of intracanal debris during root canal preparation.<sup>1</sup>

In the present study, three file system namely Hyflex EDM, Protaper Universal and Race system were assessed for the apical extrusion of debris.

Straight single-root teeth were used in this study because of the ease of availability and the elimination of possible complications in the curved canals.

Distilled water was used as an irrigant to avoid any crystallization of sodium hypochlorite because sodium crystals that remain after the evaporation of the solution cannot be separated from the debris, and these crystals can markedly impact the results.

Experimental model of Myers & Montgomery was used in this study.

Apical extrusion was not limited because the physical back pressure provided by periapical tissues was absent; thus, gravity may have carried the irrigant solution out of the canal.<sup>12</sup>

The literature reports that this technique has many advantages versus competing approaches because it allows quantitative separation between the amount of debris and the quantity of irrigant.

In the present study, Hy flex EDM files more amount of apically extruded debris. [Refer figure 01 and 02]

Hy Flex EDM files are single-file systems used with a continuous rotary movement. HEDM files are produced with the controlled memory alloy using electrical discharge machining technology.

The file has 3 different horizontal sections along the working part: quadratic in the apical part and trapezoidal and triangular in the middle and coronal parts.<sup>2</sup>

There are always four points of contact for the file with the canal walls that enhance the cutting efficacy.

The results of the present study are in accordance with earlier studies by Uslu Gul sab et.al. (2018) and Elashiry et.al. (2019) which have also proved that Hy flex EDM extrudes more apical debris than Wave one gold files.<sup>2,</sup>

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The Protaper Universal system comprises of a unique design element with varying tapers along the instrument's long axes.

The system has three shaping and three finishing files. Shaping files have coronally increased tapers and finishing files have tapers which are more apically.<sup>3, 16</sup>

PTU has triangular cross-sectional area that cuts dentin with three-point contact symmetrically.<sup>4, 13</sup>

The greater cutting efficiency inherent in this design has been safely improved by balancing the pitch and helix angle, preventing the instruments from inadvertently threading into the canal.<sup>14, 15</sup>

The Protaper Universal rotary-file system generated greater expression of neuropeptides like SP (substance P) and CGRP (Calcitonin gene related peptide).<sup>5</sup>

The increased levels of SP and CGRP with Protaper Universal was because of the triangular cross section, semi active and active tips, and a large central mass in the structure of the instrument.

The results of the present study are in accordance with earlier studies by Kocak et.al. (2014) and Ozsu Damla et.al. (2019) which have also proved that Protaper Universal extrudes more apical debris than Protaper Next and Wave one file system.<sup>18, 19</sup>

In this study, Race files produced least amount of apically extruded debris. [Refer figure 01 and 02]

Race instruments have a triangular cross-sectional design with alternating cutting edges and are claimed to prevent the instrument from screwing into the root canal thus reducing intraoperative torque values.<sup>6, 11</sup>

The recommended working speed is 300–600 rpm.<sup>7</sup>

The surfaces of Race instruments are electrochemically treated for improvement of cutting efficacy.

Race instruments for the initial steps of crown-down preparation are manufactured from stainless steel as well

as from Ni-Ti alloy. Tapers range from 2 to 10%, sizes from 15 to 60.

The Race rotary system induced less extrusion of the debris.<sup>8</sup>

This can be attributed to an increased torsion resistance due to the electrochemical treatment and the alternating cutting edges in Race files which prevent threading.

Race files have an alternating cutting edge, and this design helps in two functions:

1. To eliminate screwing in and blocking in continuous rotation
2. To reduce the working torque.

Race system also possess a non-cutting tip.<sup>9</sup>

The Race system can be the instrumentation of choice in cases where a flare-up is suspected.

The results of the present study are in accordance with earlier studies by Altundasar et. al. (2011) and Nabavizadeh et.al. (2021) which have also proved that Race files system extrudes least amount of apical debris than Protaper files.<sup>10,20</sup>

### Conclusion

Within the limitations of this in vitro study, all the instruments tested caused extrusion of some debris from the apical foramen.

The amount of apically extruded debris registered for the different files tested was HEDM > Protaper Universal > Race system respectively.

The inflammatory reaction is not influenced by the number of files but the type of movement and instrument design.

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