Open Access Full Text Article

ORIGINAL RESEARCH

Surface Roughness and Color Stability of Conventional and Bulk-Fill Resin Composite with S-PRG Fillers After Coffee Exposure: An in-vitro Study

Fabiano Augusto Dos Santos Janisch¹, Milagros Falcon Aguilar ¹, Flávio Henrique Baggio Aguiar ², Fabiana Mantovani Gomes França¹, Roberta Tarkany Basting¹, Waldemir Francisco Vieira-Junior ²

¹Department of Restorative Dentistry, Faculdade São Leopoldo Mandic, Campinas, SP, Brazil; ²Department of Restorative Dentistry, Faculdade de Odontologia de Piracicaba, Universidade Estadual de Campinas, Piracicaba, SP, Brazil

Correspondence: Waldemir Francisco Vieira-Junior, Faculdade de Odontologia de Piracicaba, Universidade, Estadual de Campinas, Av. Limeira, 901 – Areião, Piracicaba, SP, Brazil, Tel +55 (19) 21065220, Email waljr@unicamp.br

Objective: This study aimed to evaluate the in vitro effects of coffee exposure on the color and roughness of conventional and bulkfill resin composites, with and without surface pre-reacted glass-ionomer (S-PRG) filler.

Methodology: Forty-eight cylindrical samples ($\emptyset 6 \text{ mm} \times 2 \text{ mm}$) were prepared and categorized as follows (n = 12 per group): conventional nano-hybrid (Tetric N-Ceram, Ivoclar); nano-hybrid with S-PRG filler (Beautifil II, Shofu); bulk-fill (Tetric N-Ceram Bulk Fill, Ivoclar); and bulk-fill with S-PRG filler (Beautifil Bulk Restorative, Shofu). The samples were assessed for surface roughness (Ra, µm), color coordinates (CIE L*ab*), and overall color change (ΔE_{ab} , ΔE_{00}). Measurements were taken at baseline and after 7 days of coffee immersion (pH = 4.95). Data were analyzed using generalized linear models, Kruskal–Wallis, Dunn, and paired Wilcoxon tests ($\alpha = 0.05$).

Results: After the coffee exposure, all resin composites exhibited a significant decrease in L* (towards black), an increase in a* (towards red), an increase in b* (towards yellow), and a higher Vita color score (p < 0.05). Tetric N-Ceram demonstrated the lowest roughness values post-exposure; however, a significant increase in roughness over time was observed only for Tetric N-Ceram Bulk Fill (p < 0.05). For ΔE_{ab} , Beautifil Bulk Restorative and Tetric N-Ceram showed higher values compared to Beautifil II. For ΔE_{00} , a significant difference was noted between Beautifil Bulk Restorative and Beautifil II (p < 0.05).

Conclusion: Resin composites with S-PRG fillers exhibited similar pigmentation dynamics to conventional composite but showed greater surface roughness after exposure to coffee. Considering the S-PRG materials, the bulk-fill version is more susceptible to staining.

Keywords: composite resins, coffee, color, surface properties

Introduction

Resin composites consist of an organic matrix, filler particles, reaction initiators, and bonding agents,¹ a composition that enables their versatile application in dentistry.² These materials are used in both direct and indirect dental restorations, with formulations suitable for application in both anterior and posterior teeth.^{2,3} Often employed in aesthetic dental restorations, resin composites can be classified based on particle size or monomer properties,^{2,4} which influence the material's viscosity, handling,³ physical properties,^{5,6} and the clinical performance of the restoration.^{7–9}

However, resin composites are generally susceptible to aging and degradation in the oral environment, a process that can lead to irreversible changes in their original properties.¹⁰ These alterations may involve changes in physical properties or aesthetic appearance, thereby impacting clinical performance.¹¹ Consequently, modifications to the surface

© 2025 Janisch et al. This work is published and licensed by Dove Medical Press Limited. The full terms of this license are available at https://www.dovepress.com/terms work you hereby accept the Terms. Non-commercial uses of the work are permitted without any further permission from Dove Medical Press Limited, provided the work is properly attributed. For permission for commercial use of this work, please see paragraphs 42 and 5 of our Terms (https://www.dovepress.com/terms.php). profile can increase susceptibility to staining through the deposition and incorporation of pigments, which promotes biofilm accumulation and, in turn, the development of gingival inflammation and secondary caries lesions.^{12,13}

Staining and pigmentation of resin composites occur through different mechanisms: intrinsic pigmentation, resulting from the material's aging; extrinsic pigmentation, caused by biofilm accumulation and color changes from dietary intake or habits; and surface degradation, prompted by pigmenting agents, which can lead to the absorption and adsorption of pigments by the material.^{14,15} Consequently, the pigmentation is influenced by the material's inherent properties, the characteristics of the oral environment, the nature of the pigmenting agent, patient habits, and professional practices during restorative and polishing procedures.¹⁶ The type of resin matrix, the percentage of inorganic particles, and the size of the particles also play a role in the pigmentation of resin composites.^{14,15}

Resin composites are continuously evolving, with recent examples including high-viscosity and low-viscosity bulkfill resin composites that have launched in the past decade.⁴ Bulk-fill resin composites, which can be placed in increments of 4 to 5 mm, are primarily indicated for posterior restorations and have gained widespread use due to their ability to simplify the process of material placement in cavities.¹⁷ Their clinical efficacy is comparable to that of conventional resin composites, regardless of the type of restoration (Class I and II).¹⁸

The impact of pigmenting agents on the color stability of bulk-fill resin composites remains controversial. Some studies suggest that bulk-fill resin composites have lower color stability when exposed to staining,^{19,20,} while others report higher color stability compared to conventional resin composites.²¹ The full evaluation of these materials, particularly in terms of pigmentation dynamics and the incorporation of bioactive particles, remains incomplete. It is important to note that although the significance of color in posterior restorations has been debated, discoloration at the margins and within the body of restorations remains a relevant reason for their replacement.²²

Among the materials mentioned, resin composites containing S-PRG (Surface Pre-Reacted Glass Ionomer) fillers have been developed, primarily characterized by its bioactivity.²³ The S-PRG particles included in its composition, when in contact with biological fluids, facilitate the release of ions such as phosphate, fluoride, and calcium, which influence the material's ability to form new apatites.²³ Additionally, it possesses antibacterial and anti-inflammatory properties.²⁴ These materials have a wide range of clinical indications, including cervical and occlusal restorations, direct veneers, treatment of hypersensitivity in areas of exposed dentin, cementation and bonding of orthodontic brackets,²³ and in areas more prone to secondary caries lesions.²⁵

Bioactive resin composites containing S-PRG fillers have been introduced to the market for use in a wide range of clinical applications, including conventional and bulk-fill resin composites versions. However, the limited research on these materials highlights the need for a deeper understanding of their properties, particularly their color stability, susceptibility to staining, pigmentation dynamics, and changes in surface roughness. Therefore, this study aimed to evaluate in vitro the effect of coffee exposure on the color and roughness properties of conventional and bulk-fill resin composites, with and without S-PRG fillers. The null hypotheses stated that the S-PRG resin composites tested do not differ from conventional resin composites exposed to coffee, nor do they differ between each other, in terms of 1) color properties and 2) surface roughness.

Materials and Methods

Study Design

Forty-eight cylindrical resin composite samples were obtained, with n = 12 for each group. Four types of resin composites were evaluated: conventional nano-hybrid resin composite (Tetric N-Ceram, Ivoclar Vivadent), nano-hybrid resin composite with S-PRG fillers (Beautifil II, Shofu), bulk-fill resin composite (Tetric N-Ceram Bulk Fill, Ivoclar Vivadent), and bulk-fill resin composite with S-PRG fillers (Beautifil Bulk Restorative, Shofu). The samples were assessed for color (CIE Lab, ΔE_{ab} , ΔE_{00} , Vita Scale) and roughness (Ra) at baseline and after immersion in coffee.

Sample size calculation: The analysis was performed using G*Power software. A sample size of 12 specimens per resin composite, totaling 48 specimens, ensures a test power of at least 80% ($\beta = 0.20$) for the main effects of resin composite and time, as well as for the interaction between them (resin composite × time), in a repeated measures design over time. The significance level was set at 5% ($\alpha = 0.05$), and the calculation was based on large effect sizes (f = 0.43).

Preparation of the Samples

Resin composites discs were prepared by placing the materials into a Teflon matrix with a diameter of 6 mm and a thickness of 2 mm. Each resin composite was inserted in a single 2 mm increment using an insertion spatula (Goldstein XTS Flex, HuFriedy, USA). The material was then covered with a polyester strip and a glass plate, and a 500 g weight was applied for 10 seconds to ensure proper compaction and the elimination of air bubbles in the uncured resin composite. Light curing was carried out using a corded LED device (Valo, Ultradent Products Inc., South Jordan, UT, USA) in standard mode with an irradiance of 1000 mW/ cm², for 20 seconds.²⁰ The irradiance was ensured by the manufacturer through regular maintenance. The samples were marked on the base to distinguish the analyzed top surface and were randomly distributed to the groups using a simple randomization. The technical specifications and details of the resin composites used in this study are presented in Table 1.

Color Analysis

The color of each sample was recorded using a digital spectrophotometer (VITA Easyshade, VITA Zahnfabrik), with measurements taken against a white background for standardization.²⁰ Color readings were recorded initially (baseline) and after 7 days of immersion in coffee (final).¹⁵

The device was calibrated according to the manufacturer's instructions prior to use. The color data were quantified using the CIE Lab system, where the L* coordinate represents luminosity (black to white axis; 0 to 100), the a* coordinate indicates saturation on the red (+) and green (-) axis, and the b* coordinate denotes saturation on the yellow (+) and blue (-) axis. The overall color difference was calculated using the ΔE_{ab} and CIEDE2000 (ΔE_{00}) formulas, which express the color variation between measurement times using the following formulas:^{26,27}

$$\Delta E_{ab} = \sqrt{(\Delta L^*)^2 + (\Delta a^*)^2 + (\Delta b^*)^2}$$

$$\Delta E_{00} = \sqrt{(\Delta L'/kLSL)^2 + (\Delta C'/kCSC)^2 + (\Delta H'/kHSH)^2 + RT(\Delta C'/kCSC)} (\Delta H'/(kHSH)$$

In the ΔE_{ab} formula, L*, a*and b* represent the coordinates of the CIE L*a*b* color system.²⁶ In the ΔE_{00} formula, ΔL^* denotes the variation in the L* coordinate, which indicates luminosity (black-white axis); ΔC represents differences in chroma (saturation); ΔH reflects differences in hue; and RT is a function that accounts for the interaction between differences in chroma and hue in the blue region of the spectrum.²⁷ The ΔE_{00} values were calculated sequentially as described by Sharma et al (2005).²⁸ The Shade Guide Unit (SGU), based on the Vita scale, was determined using the same spectrophotometer. Scores ranging from 1 to 16 were assigned according to decreasing luminosity, from B1 to C4. The Vita Classical scale was determined by converting the color of the tooth into numbers, according to previously

Resin Composite	Type/ Classification	Composition	Size (µm)	Manufacturer	Batch
Tetric N-Ceram Color: A2	Nano-hybrid conventional	Dimethacrylates, barium glass, ytterbium trifluoride, mixed oxides and copolymers	0.04–3	Ivoclar Vivadent AG (Schaan, Liechtenstein)	Z036RL
Beautifil II Color: A2	Nano-hybrid with S-PRG particles	Bis-GMA, TEGDMA, S-PRG based on aluminum borosilicate fluoride glass	3	Shofu Inc. (Kyoto, Japão)	012270
Tetric N-Ceram Bulk Fill Color: IVA	Bulk-fill	Dimethacrylates, barium glass, prepolymer, ytterbium trifluoride and mixed oxides	0.4–0.7	Ivoclar Vivadent AG (Schaan, Liechtenstein)	Z03L4K
Beautifil Bulk Restorative Color: A	Bulk-fill with S-PRG particles	Bis-GMA, UDMA, Bis-MPEPP, TEGDMA, S-PRG based on aluminum borosilicate fluoride glass	3	Shofu Inc. (Kyoto, Japão)	122049

Table I Name, Classification, Composition, Manufacturer and Batch of Resin Composites

Note: Composition information presented in the MSDS (Material Safety Data Sheet) provided by the manufacturers.

Abbreviations: Bis-GMA, Bisphenol A-glycidyl methacrylate; TEDGMA, triethylene glycol dimethacrylate; UDMA, urethane dimethacrylate; BisEMA, bisphenol A diglycidyl ethoxylated methacrylate.

established numerical values, organized from number 1 (B1) to 16 (C4) in order of luminosity: B1, A1, B2, D2, A2, C1, C2, D4, A3, D3, B3, A3.5, B4, C3, A4 and C4.^{29,30}

Surface Roughness Analysis

Surface roughness was assessed using a roughness meter (Surftest SJ-210, Mitutoyo Corporation, Kanagawa, Japan). Measurements were taken at two time points: initially (baseline) and after 7 days of immersion in coffee (final). The average roughness (Ra, μ m) was recorded, representing the arithmetic mean of the peak-to-valley measurements across the surface, with measurement length = 1.25 mm and cut-off = 0.25.²⁰ Three readings were taken for each surface, with the stylus passing through the center of the sample and taking measurements in three different positions after a 120° rotation of the sample base. The average roughness for each sample was calculated from these three readings.²⁰

Coffee Exposure Protocol

Following the initial analyses, the samples were immersed in a coffee solution and incubated under standardized conditions at 37 °C for seven days.¹⁵ The container was sealed with a lid to prevent liquid evaporation. The coffee solution (pH = 4.95) was prepared by dissolving 2.4 grams of coffee powder (Nescafé Classic, São Paulo, Brazil) in 200 mL of heated distilled water. After 10 minutes, the solution was filtered through filter paper. The solution was replaced daily at a consistent time to ensure uniform exposure.

Statistical Analysis

Data were analyzed using the R software, with a significance level set at 5%. Initially, descriptive and exploratory analyses were performed on all data. Previous analyses indicated that the data did not meet the assumptions for analysis of variance (ANOVA). Thus, the L* and b* coordinates, as well as the roughness data, were evaluated using generalized linear mixed models for repeated measures. Generalized linear models were employed to evaluate ΔE_{ab} and ΔE_{00} , incorporating the group effect into the model. The a* coordinate and SGU scores were analyzed using non-parametric tests, including the Kruskal–Wallis test and Dunn's test for comparisons between resin composites, and the paired Wilcoxon test for comparisons between time points.

Results

Color Analysis

The L* and b* results are detailed in Table 2. All resin composites exhibited a significant reduction in L* values following immersion in coffee (p < 0.0001). At the final measurement, Beautifil Bulk Restorative displayed a significantly lower L*

Table 2 Mean (Standard Deviation) of L* and b* Coordinates as a Function of Resin Composite and Time

Coordinate	Resin Composite	Time		
		Initial	Final	
L*	Beautifil II Beautifil Bulk Besterative	85.93 (2.15) Aa	75.31 (2.71) Ba 71.39 (5.95) Bb	
	Tetric N-Ceram	87.33 (3.15) Aa	73.63 (3.83) Bab	
	p-values	p(resin composite)=0.1175; p(tim	rs.70 (3.04) Ba e)<0.0001; p(interaction)=0.1107	
b*	Beautifil II Beautifil Bulk Restorative Tetric N-Ceram Tetric N-Ceram Bulk Fill	25.51 (4.97) Ba 18.78 (7.75) Bb 21.81 (7.90) Bab 20.24 (6.74) Bb	29.50 (3.93) Aa 27.78 (3.55) Aab 30.14 (5.94) Aa 25.54 (4.85) Ab	
	p-values p(resin composite)=0.0985; p(time)<0.0001; p(int		ne)<0.0001; p(interaction)=0.0589	

Note: Different letters (uppercase horizontally and lowercase vertically) indicate statistically significant differences ($p \le 0.05$) according to the generalized linear mixed models for repeated measures.

Variable	Resin Composite	Time		p-value
		Initial	Final	
Coordinate a*	Beautifil II	3.40 (-0.90; 6.00) Ba	5.70 (2.70; 7.50) Aa	0.0022
	Beautifil Bulk Restorative	–0.50 (–0.70; 5.10) Ba	3.90 (3.10; 7.30) Aa	0.0022
	Tetric N-Ceram	3.25 (-0.70; 5.70) Ba	4.95 (2.90; 9.70) Aa	0.0022
	Tetric N-Ceram Bulk Fill	-0.25 (-1.00; 5.60) Ba	3.55 (2.00; 7.20) Aa	0.0022
	p-value	0.4203	0.3460	-
Score (SGU)	Beautifil II	2.0 (2.0; 11.0) Ba	15.0 (11.0; 15.0) Aa	0.0022
	Beautifil Bulk Restorative	2.0 (1.0; 11.0) Ba	15.0 (11.0; 16.0) Aa	0.0022
	Tetric N-Ceram	2.0 (1.0; 11.0) Ba	15.0 (12.0; 16.0) Aa	0.0022
	Tetric N-Ceram Bulk Fill	2.0 (1.0; 2.0) Ba	13.0 (9.0; 15.0) Aa	0.0022
	p-value	0.1954	0.0682	-

Table 3 Median (Minimum and Maximum Value) of the a* Coordinate and Vita Scale Score(SGU), as a Function of Resin Composite and Time

Note: Different letters (uppercase for resin composite and lowercase for time) indicate statistically significant differences ($p \le 0.05$) according to the Kruskal-Wallis, Dunn, and Wilcoxon tests.

values compared to both Beautifil II and Tetric N-Ceram Bulk Fill materials (p < 0.05). Additionally, there was a significant increase in b* values for all resin composites after coffee immersion (p < 0.0001). At the initial measurement, Beautifil II resin had a significantly higher b* values than Beautifil Bulk Restorative and Tetric N-Ceram Bulk Fill (p < 0.05). At the final time point, Beautifil II and Tetric N-Ceram showed significantly higher b* values compared to Tetric N-Ceram Bulk Fill (p < 0.05).

The a* coordinate values and Vita scale color scores (SGU, shade guide unit) are presented in Table 3. Significant increases were observed for the a* values and SGU results for all materials following immersion in coffee (p = 0.0022). However, no significant differences were found among the resin composites for these variables (p > 0.05).

Figure 1 presents a significant difference in color variation among the resin composites as measured by ΔE_{ab} (p = 0.0219). The ΔE_{ab} values were higher for Beautifil Bulk Restorative and Tetric N-Ceram compared to Beautifil II (p < 0.05). For ΔE_{00} , Beautifil Bulk Restorative exhibited significantly higher values than Beautifil II (p = 0.0315).



Figure 1 Box plot of the ΔE_{ab} values as a function of the resin composite. Different letters denote statistically significant differences (p \leq 0.05) according to the generalized linear models.

Resin Composite	Time		Total
	Initial	Final	
Beautifil II	0.142 (0.109) Aa	0.184 (0.090) Aa	0.163 (0.100) a
Beautifil Bulk Restorative	0.133 (0.074) Aa	0.179 (0.107) Aa	0.156 (0.093) a
Tetric N-Ceram	0.104 (0.044) Aab	0.085 (0.032) Ab	0.095 (0.039) b
Tetric N-Ceram Bulk Fill	0.086 (0.038) Bb	0.138 (0.069) Aa	0.112 (0.061) b

Table 4 Mean (Standard Deviation) of Roughness (Ra, $\mu m)$ as a Function of Resin Composite and Time

Notes: p(resin composite)=0.0321; p(time)=0.0544; p(interaction)=0.1533. Different letters (uppercase horizontally and lowercase vertically) indicate statistically significant differences ($p\leq0.05$) according to the generalized linear mixed models for repeated measures. The total column indicates statistical difference considering the main effect.

Surface Roughness Analysis

The Ra results are presented in Table 4. Tetric N-Ceram Bulk Fill resin composite exhibited a significant increase in roughness following immersion in coffee (p < 0.05). Initially, Tetric N-Ceram Bulk Fill had lower roughness compared to Beautifil II and Beautifil Bulk Restorative (p = 0.0321). At the final measurement, Tetric N-Ceram demonstrated lower roughness compared to the other resin composites (p = 0.0321). Considering the main effect, S-PRG resin composites presented higher Ra values than conventional resin composites.

Discussion

Resin composites are widely recognized among direct restorative materials for their favorable aesthetic and functional properties,^{1,31} which contribute to their reliable clinical performance.⁷ Recent advancements have incorporated bioactive fillers into these materials to enhance their protective properties against carious lesions, improve mechanical strength, and maintain aesthetic appeal.²³ Resin composites with S-PRG fillers represent a notable development in bioactive materials. The resin matrix of these materials is composed of fluoroaluminosilicate glass particles that react with polyacrylic acid,³² enabling the release of beneficial ions.^{23,33} Clinically, S-PRG resin composites demonstrated performance comparable to that of resin-modified glass ionomers.³⁴ However, they tend to exhibit greater susceptibility to staining and increased surface roughness compared to conventional resin composites.³⁴ In accordance with the present results, both null hypotheses were rejected, whereas differences were observed in the color properties and surface roughness of S-PRG resin composites, particularly in the bulk-fill version.

Although the color stability of conventional resin composites is well documented, studies on the pigmentation dynamics of resin composites with S-PRG fillers are limited. In the present study, no significant differences were observed in ΔE_{00} values between the conventional resin composite (Tetric N-Ceram) and the S-PRG-containing resin composite (Beautifil II) after coffee staining. Some studies^{35–37} have observed increased pigmentation in resin composites containing S-PRG fillers, with Pimentel et al³⁷ (2023) specifically reporting greater color changes after acid exposure. However, the findings of this study are consistent with those of Tan et al¹⁵ (2015), who observed no significant differences in coffee staining between resin composites with S-PRG fillers and conventional composites. Therefore, it is possible that coffee, with a pH of 4.95, does not induce sufficient acid degradation or particle detachment to significantly affect color change in these materials.³⁷ Thus, in the context of coffee-induced pigmentation, both conventional and S-PRG resin composites exhibited similar dynamics.

Regarding the color coordinates, all resin composites demonstrated a significant decrease in L* values after immersion in coffee, indicating a color alteration towards darker shades. Additionally, there was a notable increase in b* values, reflecting a change towards yellow, and an increase in a* values, indicating a change towards red. Coffee was chosen as the pigmenting agent due to its widespread consumption and well-documented staining potential.^{38,39} The staining effect of coffee is attributed to the polarity of its active compounds, which have an affinity for the polymeric network of resin composites.⁴⁰ Furthermore, the sorption of coffee by resin composites may enhance the staining effect.³⁶



Figure 2 Box plot of the ΔE_{00} values as a function of the resin composite. Different letters denote statistically significant differences (p \leq 0.05) according to the generalized linear models.

For the ΔE_{ab} and ΔE_{00} values (Figures 1 and 2), all resin composites exceeded both the acceptable color change thresholds ($\Delta E_{ab} > 1.2$, $\Delta E_{00} > 0.8$) and the perceptible color change thresholds ($\Delta E_{ab} > 2.8$, $\Delta E_{00} > 1.8$) as suggested by Paravina et al (2015).⁴¹ Although both formulas are interchangeable and naturally correlated,⁴² the ΔE_{00} formula is more suitable for investigating differences that are perceptible to the human eye.²⁷ In general, all resin composites experienced noticeable color changes after exposure to coffee. Nonetheless, no statistically significant differences were observed among the resin composites based on the Vita scale scores (SGU), which only indicated that all resin composites became darker after exposure to coffee. Although clinically accepted, SGU scores lack the specificity and accuracy needed in laboratory models. Therefore, a comprehensive analysis of all color variables is necessary. Corroboratingly, all resin composites exhibited a decrease in luminosity (L* values) and an increase in SGU scores, reflecting a color alteration towards darker shades. Notably, significant differences were observed between the Beautifil Bulk Restorative resin composites may be attributed to changes in monomer composition, increased translucency, and the incorporation of prepolymerized particles into the resin matrix.^{19,20}

Surface roughness is a critical clinical property that affects a material capacity to retain biofilm and pigments.⁴³ Considering Table 4, resin composites containing S-PRG fillers exhibited higher roughness values compared to the conventional resin composites. As suggested by Kooi et al (2012)⁴⁴ and Pimentel et al (2023),³⁷ this difference may be attributed to the larger particle size in S-PRG materials (Table 1). Another possible explanation, as highlighted by Abdel-Karim et al (2014),²⁵ is the particle content in S-PRG materials, which may have an inadequate bonding between the fillers and the resin matrix due to the resin's property of releasing and recharging ions. Similarly, the higher roughness values observed in bulk-fill resin composites could be linked to monomeric changes.²⁰ Considering the Ra values obtained, no group exceeded clinically relevant limits, such as the 0.2 µm for biofilm retention or the 0.3 µm for tongue perception.^{45,46}

It is important to note that this study was conducted under conditions of intense pigment exposure, although the protocol used is a commonly used method.¹⁵ Future research should aim to address the limitations of the present study, including the absence of polishing procedures, the exploration of the effects of different pigmenting agents or staining protocols, and the use of alternative methodologies that could provide a deeper understanding of pigmentation dynamics in resin composites containing S-PRG fillers.

Conclusion

Based on the characteristics of this in-vitro study, the following conclusions can be suggested:

- 1. Resin composites with S-PRG fillers exhibit similar pigmentation dynamics to conventional resin composites when exposed to coffee.
- 2. Among resin composites containing S-PRG fillers, the bulk-fill version is more susceptible to staining.
- 3. Resin composites with S-PRG fillers demonstrate greater surface roughness compared to conventional resin composite.

Disclosure

The author reports no conflicts of interest with respect to the authorship and/or publication of this article.

References

- 1. Schricker SR. Composite resin polymerization and relevant parameters. In: Eliades T, Brantley W, editors. Orthodontic Applications of Biomaterials. 1 ed;2017.
- 2. Ferracane JL. Resin composite--state of the art. Dent Mater. 2011;27(1):29-38. doi:10.1016/j.dental.2010.10.020
- 3. Kaleem M, Satterthwaite JD, Watts DC. Effect of filler particle size and morphology on force/work parameters for stickiness of unset resin-composites. *Dent Mater*. 2009;25(12):1585–1592. doi:10.1016/j.dental.2009.08.002
- 4. Chesterman J, Jowett A, Gallacher A, Nixon P. Bulk-f ill resin-based composite restorative materials: a review. Br Dent J. 2017;222(5):337-344. doi:10.1038/sj.bdj.2017.214
- 5. Goncalves F, Kawano Y, Braga RR. Contraction stress related to composite inorganic content. *Dent Mater*. 2010;26(7):704–709. doi:10.1016/j. dental.2010.03.015
- 6. Karabela MM, Sideridou ID. Synthesis and study of properties of dental resin composites with different nanosilica particles size. *Dent Mater.* 2011;27(8):825–835. doi:10.1016/j.dental.2011.04.008
- 7. Opdam NJ, van de Sande FH, Bronkhorst E, et al. Longevity of posterior composite restorations: a systematic review and meta-analysis. J Dent Res. 2014;93(10):943–949. doi:10.1177/0022034514544217
- 8. Alzraikat H, Burrow MF, Maghaireh GA, Taha NA. Nanofilled resin composite properties and clinical performance: a review. *Oper Dent.* 2018;43 (4):173–190. doi:10.2341/17-208-T
- 9. Veloso SRM, Lemos CAA, de Moraes SLD, Do Egito Vasconcelos BC, Pellizzer EP, de Melo Monteiro GQ. Clinical performance of bulk-fill and conventional resin composite restorations in posterior teeth: a systematic review and meta-analysis. *Clin Oral Investig.* 2019;23(1):221–233. doi:10.1007/s00784-018-2429-7
- Lima VP, Machado JB, Zhang Y, Loomans BAC, Moraes RR. Laboratory methods to simulate the mechanical degradation of resin composite restorations. *Dent Mater*. 2022;38(1):214–229. doi:10.1016/j.dental.2021.12.006
- 11. Szczesio-Włodarczyk A, Sokolowski J, Kleczewska J, Bociong K. Ageing of dental composites based on methacrylate resins-a critical review of the causes and method of assessment. *Polymers (Basel)*. 2020;12(4):882. doi:10.3390/polym12040882
- 12. Choi MS, Lee YK, Lim BS, Rhee SH, Yang HC. Changes in surface characteristics of dental resin composites after polishing. J Mater Sci Mater Med. 2005;16(4):347-353. doi:10.1007/s10856-005-0634-9
- 13. Motevasselian F, Zibafar E, Yassini E, Mirzaei M, Pourmirhoseni N. Adherence of streptococcus mutans to microhybrid and nanohybrid resin composites and dental amalgam: an in vitro study. J Dent. 2017;14(6):337-343.
- 14. Dietschi D, Campanile G, Holz J, Meyer JM. Comparison of the color stability of ten new-generation composites: an in vitro study. *Dent Mater.* 1994;10(6):353–362. doi:10.1016/0109-5641(94)90059-0
- Tan BL, Yap AU, Ma HN, Chew J, Tan WJ. Effect of beverages on color and translucency of new tooth-colored restoratives. Oper Dent. 2015;40 (2):56–65. doi:10.2341/149027-L
- 16. Amaya-Pajares SP, Koi K, Watanabe H, da Costa JB, Ferracane JL. Development and maintenance of surface gloss of dental composites after polishing and brushing: review of the literature. J Esthet Restor Dent. 2022;34(1):15–41. doi:10.1111/jerd.12875
- 17. Van Ende A, De Munck J, Lise DP, Van Meerbeek B. Bulk-fill composites: a review of the current literature. J Adhes Dent. 2017;19(2):95–109. doi:10.3290/j.jad.a38141
- 18. Arbildo-Vega HI, Lapinska B, Panda S, Lamas-Lara C, Khan AS, Lukomska-Szymanska M. Clinical effectiveness of bulk-fill and conventional resin composite restorations: systematic review and meta-analysis. *Polymers*. 2020;12(8):1786. doi:10.3390/polym12081786
- Theobaldo JD, Vieira-Junior WF, Cortellazzi KL, Marchi GM, Lima DA, Aguiar FH. Effects of cigarette smoke on color, roughness and gloss of high-viscosity bulk-fill resin composites. Am J Dent. 2020;33(2):83–88.
- 20. Derigi LP, Barros LS, Sugii MM, et al. Effect of commercial mouth rinses on physical properties of conventional and bulk-fill resin composites. *Oper Dent.* 2023;26:720-731.
- 21. Backes CN, França FMG, Turssi CP, Amaral FLBD, Basting RT. Color stability of a bulk-fill composite resin light-cured at different distances. *Braz Oral Res.* 2020;30:34:e119.
- 22. Eltahlah D, Lynch CD, Chadwick BL, Blum IR, Wilson NHF. An update on the reasons for placement and replacement of direct restorations. *J Dent.* 2018;72:1–7. doi:10.1016/j.jdent.2018.03.001
- 23. Rusnac ME, Gasparik C, Irimie AI, Grecu AG, Mesaroş AŞ, Dudea D. Giomers in dentistry at the boundary between dental composites and glass-ionomers. *Med Pharm Rep.* 2019;92(2):123–128. doi:10.15386/mpr-1169

- 24. Miyaji H, Mayumi K, Miyata S, et al. Comparative biological assessments of endodontic root canal sealer containing surface pre-reacted glass-ionomer (S-PRG) filler or silica filler. *Dent Mater J.* 2020;39(2):287–294. doi:10.4012/dmj.2019-029
- 25. Abdel-Karim UM, El-Ekary M, Etman WM. Three-yea r clinical evaluation of two nano-hybrid giomer restorative composites. *Tanta Dent J*. 2014;11(3):213–222. doi:10.1016/j.tdj.2014.10.004
- 26. Joiner A, Luo W. Tooth colour and whiteness: a review. J Dent. 2017;67S:S3-S10. doi:10.1016/j.jdent.2017.09.006
- 27. Pérez MM, Pecho OE, Ghinea R, Pulgar R, Della Bona A. Recent advances in color and whiteness evaluations in dentistry. *Curr Dentistry*. 2019;1 (1):23–29. doi:10.2174/2542579X01666180719125137
- Sharma G, Wu W, Dalal EN. The CIEDE2000 color-difference formula: implementation notes, supplementary test data, and mathematical observations. Color Res. Appl. 2005;30(1):21–30. doi:10.1002/col.20070
- 29. Guedes RA, Carlos NR, Turssi CP, et al. Hybrid light applied with 37% carbamide peroxide bleaching agent with or without titanium dioxide potentializes color change effectiveness. *Photodiagnosis Photodyn Ther.* 2023;44:103762. doi:10.1016/j.pdpdt.2023.103762
- 30. Polydorou O, Hellwig E, Hahn P. The efficacy of three different in-office bleaching systems and their effect on enamel microhardness. *Oper Dent*. 2008;33(5):579–586. doi:10.2341/07-148
- Rajan G, Shouha P, Ellakwa A, Bhowmik K, Xi J, Prusty G. Evaluation of the physical properties of dental resin composites using optical fiber sensing technology. *Dent Mater*. 2016;32(9):1113–1123. doi:10.1016/j.dental.2016.06.015
- Vijayan M, Rajendran R, Sreevatsan R. Comparative evaluation of microhardness between giomer, composite and resin-modified GIC. Int Dent J Stud Res. 2018;6(3):61–65.
- 33. Alsayed EZ, Hariri I, Sadr A, et al. Optical coherence tomography for evaluation of enamel and protective coatings. *Dent Mater J.* 2015;34 (1):98–107. doi:10.4012/dmj.2014-215
- 34. Neto CCL, Das Neves AM, Arantes DC, et al. Evaluation of the clinical performance of GIOMERs and comparison with other conventional restorative materials in permanent teeth: a systematic review and meta-analysis. *Evid Based Dent*. 2022. doi:10.1038/s41432-022-0281-8
- 35. Costa MP, Jacomine JC, Mosquim V, et al. Analysis of color stability and degree of conversion of different types of resin composites. *Braz Oral Res.* 2024;38:e003. doi:10.1590/1807-3107bor-2024.vol38.0003
- Gonulol N, Ozer S, Sen Tunc E. Water sorption, solubility, and color stability of giomer restoratives. J Esthet Restor Dent. 2015;27(5):300–306. doi:10.1111/jerd.12119
- 37. Pimentel ES, França FMG, Turssi CP, et al. Effects of in vitro erosion on surface texture, microhardness, and color stability of resin composite with S-PRG fillers. *Clin Oral Invest*. 2023;27(7):3545–3556. doi:10.1007/s00784-023-04968-6
- 38. Mundim FM, da FR GL, Pires-de-Souza F de CP. Effect of staining solutions and repolishing on color stability of direct composites. J Appl Oral Sci. 2010;18(3):249–254. doi:10.1590/S1678-77572010000300009
- Domingos PAS, Garcia PPNS, Oliveira ALBM, Palma RGD. Composite resin color stability: influence of light sources and immersion media. J Appl Oral Sci. 2011;19(3):204–211. doi:10.1590/S1678-77572011000300005
- 40. Arruda BM, Bassi JC, Vitti RP, Scatolin RS. Color stability of bulk fill composite resins submitted to coffee staining. Braz Dent Sci. 2021;24(1).
- 41. Paravina RD, Ghinea R, Herrera LJ, et al. Color difference thresholds in dentistry. J Esthet Restor Dent. 2015;27(1):1-9. doi:10.1111/jerd.12149
- 42. Lee YK. Comparison of CIELAB DeltaE(*) and CIEDE2000 color-differences after polymerization and thermocycling of resin composites. *Dent Mater.* 2005;21(7):678–682. doi:10.1016/j.dental.2004.09.005
- Cazzaniga G, Ottobelli M, Ionescu A, Garcia-Godoy F, Brambilla E. Surface properties of resin-based composite materials and biofilm formation: a review of the current literature. Am J Dent. 2015;28(6):311–320.
- 44. Kooi TJ, Tan QZ, Yap AU, et al. Effects of food-simulating liquids on surface properties of giomer restoratives. *Oper Dent.* 2012;37(6):665–671. doi:10.2341/11-419-L
- 45. Bollen CM, Lambrechts P, Quirynen M. Comparison of surface roughness of oral hard materials to the threshold surface roughness for bacterial plaque retention: a review of the literature. *Dent Mater.* 1997;13(4):258–269. doi:10.1016/s0109-5641(97)80038-3
- 46. Jung M, Sehr K, Klimek J. Surface texture of four nanofilled and one hybrid composite after finishing. Oper Dent. 2007;32(1):45-52. doi:10.2341/06-9

Clinical, Cosmetic and Investigational Dentistry

Dovepress Taylor & Francis Group

Publish your work in this journal

Clinical, Cosmetic and Investigational Dentistry is an international, peer-reviewed, open access, online journal focusing on the latest clinical and experimental research in dentistry with specific emphasis on cosmetic interventions. Innovative developments in dental materials, techniques and devices that improve outcomes and patient satisfaction and preference will be highlighted. The manuscript management system is completely online and includes a very quick and fair peer-review system, which is all easy to use. Visit http://www.dovepress.com/ testimonials.php to read real quotes from published authors.

 $\textbf{Submit your manuscript here:} \ \texttt{https://www.dovepress.com/clinical-cosmetic-and-investigational-dentistry-journal}$

🖪 🗶 in 🗖

29