## Effect of the simulated Indian and Mediterranean climates on the Shore A hardness of maxillofacial silicone

Amanda Ferreira, Meena Aras, Vidya Chitre, Ivy Coutinho, Praveen Rajagopal

Department of Prosthodontics and Crown & Bridge, Goa Dental College and Hospital, Bambolim, Goa, India

**Abstract Purpose:** The purpose of this study was to assess and compare the effect of the simulated Indian and Mediterranean climates on the Shore A hardness of a commercially available nonpigmented room temperature vulcanizing maxillofacial silicone.

**Materials and Methods:** Sixty specimens were fabricated from A-2000 silicone material (Factor II), using a stainless steel mold of dimension 20 mm  $\times$  2 mm. The initial Shore A hardness was noted using a digital durometer. Thirty samples were subjected to the simulated Mediterranean climate (Group I), and the remaining thirty samples were subjected to the Indian tropical climate (Group II) in an accelerated weather chamber to simulate 1 year of clinical use. Final Shore A hardness was noted. A one-way ANOVA and Bonferroni *post hoc* tests were performed for the Shore A hardness at *P* < 0.05.

**Results:** The mean initial Shore A hardness for both the groups was 24.9833. After accelerated weathering, Group I showed mean Shore A hardness of 33.0000 whereas Group II showed mean Shore A hardness of 38.0000.

**Conclusions:** The Shore A hardness of Factor II, before and after accelerated artificial weathering, was statistically significant at 0.05 level (P < 0.05). The change in Shore A hardness was greater in the simulated tropical climate group (Group II) as compared to the simulated Mediterranean climate group (Group I) but within clinical limits.

**Keywords:** Accelerated weathering, maxillofacial silicone, Mediterranean climate, Shore A hardness, tropical climate

Address for correspondence: Dr. Amanda Ferreira, Department of Prosthodontics and Crown & Bridge, Goa Dental College and Hospital, Bambolim, Goa, India. E-mail: amanda12590@gmail.com Received: 10<sup>th</sup> June, 2018, Accepted: 06<sup>th</sup> August, 2018

## **INTRODUCTION**

External maxillofacial prosthesis, restore anatomically, functionally, and cosmetically the regions of the maxilla, mandible, or face, which are missing or altered by disease, accident, or congenitally malformed.<sup>[1]</sup> Silicone materials have become the materials of choice for the fabrication

Access this article online				
Quick Response Code:	Website:			
	www.j-ips.org			
	<b>DOI:</b> 10.4103/jips.jips_197_18			

of facial prostheses.<sup>[2]</sup> Two major drawbacks associated with maxillofacial silicones are the degradation of physical properties and discoloration of the prostheses in a service environment.<sup>[2-5]</sup>

The wearing time for facial prostheses averages only from 3 months to 1 year, as they undergo major alterations in

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

For reprints contact: reprints@medknow.com

How to cite this article: Ferreira A, Aras M, Chitre V, Coutinho I, Rajagopal P. Effect of the simulated Indian and Mediterranean climates on the Shore A hardness of maxillofacial silicone. J Indian Prosthodont Soc 2018;18:305-13.

their structure and appearance during their use mainly due to exposure to solar irradiation, air pollution, temperature changes, and humidity.<sup>[6]</sup>

Since there is no report in literature comparing the effect of a warmer, more humid Indian environment, to a cooler and drier Mediterranean climate on the degradation rate of maxillofacial silicones, the study aims at mimicking the environmental conditions that affect the Shore A hardness of the prosthesis, through simulated accelerated weathering.

The null hypothesis was that the change in the Shore A hardness of the room temperature vulcanizing (RTV) nonpigmented maxillofacial silicone in the simulated Indian climate would be comparable to that in the Mediterranean climate.

#### MATERIALS AND METHODS

A-2000 silicone elastomer is a two component, 1:1 mixing by weight, [Figures 1 and 2] and low viscosity platinum RTV silicone (Factor II, Lakeside, USA). All the specimens were made of the same material.

The sample size was calculated based on the following formula:

$$N = \frac{2\sigma^{2} \times (Z\alpha + Z\beta)^{2}}{\Delta^{2}}$$
  

$$\sigma \longrightarrow \text{Standard deviation}$$
  

$$\Delta \longrightarrow \text{Difference of mean}$$

Taking values from the key article and based on the result obtained from using the formula, a sample size of 30 per group was decided. A total of 60 specimens were prepared and utilized for the study. The specimens were distributed into two groups with each group having 30 specimens. Distribution of specimens

- Group I Thirty nonpigmented silicone specimens subjected to the simulated Mediterranean environmental conditions
- Group II Thirty nonpigmented silicone specimens subjected to the simulated Indian environmental conditions.

The flowchart of the methodology can be shown in Figure 3.

#### Description of the specimen

Each silicone test specimen of dimension 20 mm in diameter and 2-mm thickness was made using a metallic cylindrical matrix [Figure 4].

#### Fabrication of stainless steel mold

A rectangular metal plate with 15 cylindrical matrices of dimension 20 mm in diameter and 2 mm in thickness was cut from a stainless steel plate. Two glass slabs were used: one below and one on the top of the rectangular plate with 15 cylindrical matrices. This was done to get the uniform size of the test specimen and to retrieve the samples without distortion.

#### Fabrication of specimens

The A-2000 silicone elastomer is available as a base (Part A) and a catalyst (Part B) which are to be mixed in a ratio of 1:1 by weight or volume. Base and catalyst were taken in a ratio of 1:1 by weight. The base and catalyst were measured in a digital precision weighing scale using a plastic spoon to maintain 1:1 by weight ratio [Figure 1]. These components were mixed on a white ceramic tile using a stainless steel spatula to obtain a homogeneous mixture [Figure 2]. The mix was poured in a dappen dish, followed by a vacuum deaeration at 0.9 bars for 5 min as per manufacturer instructions to eliminate the



Figure 1: Base and catalyst ratio 1:1 by weight



**Figure 2:** Base and catalyst mix for the nonpigmented room temperature vulcanizing group

smaller bubbles [Figure 5]. The mix was then inserted in the matrices, and a spatula was passed on the surface to regularize the thickness [Figure 6].

A-2000 elastomer being a RTV silicone was kept undisturbed overnight to set. The specimens were then retrieved, and the flash was removed carefully with a scissor [Figure 7]. The 20-mm diameter and 2-mm thickness of the specimen obtained were verified using a digital Vernier caliper [Figure 4]. The specimens were stored in black plastic boxes [Figure 8].

#### Accelerated aging protocols

Thirty samples from Group I were placed in the accelerated weather chamber [Figure 9] with ultraviolet B (UVB)-313



Figure 3: Flowchart of the methodology



Figure 5: Vacuum deaeration at 0.9 bars for 5 minutes

lamp for 192 h and subjected to alternating light and dark cycles. The light cycle lasted for 8 h and included an irradiance of 310 nm of 0.63 W/m<sup>2</sup>/nm, humidity of 50%, and a chamber temperature of  $60^{\circ}$ C ± 3°C with condensation. The dark cycle lasted for 4 h with a temperature of  $50^{\circ}$ C ± 3°C with condensation and irradiance at 310 nm of 0.63 W/m<sup>2</sup>/nm. These parameters were selected keeping in mind tropical climatic conditions.

For the Mediterranean climate, 30 samples from Group II were placed in the accelerated weather chamber with UVB-313 lamp for 192 h and subjected to alternating light and dark cycles. The light cycle lasted for 4 h and included an irradiance of 310 nm of 0.63 W/m<sup>2</sup>/nm, humidity of 50%, and a chamber temperature of  $60^{\circ}$ C  $\pm$  3°C with condensation. The dark cycle lasted for 4 h with a temperature of  $50^{\circ}$ C  $\pm$  3°C with condensation and irradiance at 310 nm of 0.63 W/m<sup>2</sup>/nm.

These tests were in accordance with IS 15907:2010 with IS no 1969:1985, which provided the standard methods for the determination of hardness of high-density polyethylene [Figure 10].



Figure 4: Nonpigmented room temperature vulcanizing silicone specimens of specified dimensions



Figure 6: Dispensing the nonpigmented room temperature vulcanizing silicone material in the mold



Figure 7: Flash trimmed using a sharp pair of scissors



Figure 9: QUV accelerated weathering Tester (Q Labs, USA)



Figure 8: Specimens stored in black plastic boxes



Figure 10: Accelerated aging protocol in accordance to IS 15907



Figure 11: Presser foot of the digital durometer

#### Hardness test

The Shore A hardness of the prepared specimens was tested before and after artificial weathering using a digital durometer. This method is based on the penetration of a needle on the surface of the material. The digital durometer was placed in a vertical position, and the presser foot was applied perpendicular to the surface of the specimens as



Figure 12: Shore A durometer readings noted

rapidly as possible without shock [Figure 11]. Readings were noted, 1 s after firm contact of the needle with the surface of the material was achieved. The results from six readings taken at six different positions on the surface (6 mm apart) for each specimen were noted, and the average was calculated [Figure 12]. The absolute differences were then calculated using the measured values before and after each procedure for each sample. Three samples were placed over each other and measured to achieve 6 mm in thickness, in accordance to the American Standards for Testing and Materials (ASTM) D2240 specifications.

The readings were submitted for statistical analysis.

## **OBSERVATION AND RESULTS**

In the present study, the initial Shore A hardness measurements of all the 60 specimens were made using a digital Shore A durometer (ABS instruments Pvt. Ltd., Chennai, Tamil Nadu, India), and the readings were recorded. The samples were divided into two groups, containing 30 specimens each. Group I was subjected to the simulated Mediterranean climate whereas Group II was subjected to the simulated tropical climate using accelerated weathering in a weathering chamber. The Shore A hardness was measured again using the digital durometer. The results obtained have been tabulated and shown in Tables 1 and 2, respectively.

- The statistical software, namely Statistical Package for Social Sciences (SPSS Software: IBM, Armonk, NY, USA) version 20 was used for the analysis of the data, and Microsoft office Word and Excel 2010 have been used to generate graphs and tables
- One-way ANOVA was carried out to determine whether there was a difference in the Shore A hardness before and after accelerated weathering. The same test compared the change in hardness in the Mediterranean group and the tropical group
- The level of statistical significance was determined by the "P" value. If the P < 0.05, it was assumed that there is a real difference. Conceptually, the P values are used to assess the degree of dissimilarity between two or more sets of measurements or between one set of measurements and a standard.

The Bonferroni test (*post hoc* test) was used to compare the mean Shore A hardness change within the Mediterranean and tropical group taken two at a time (pairwise) to assess where a significant mean difference exists.

The results are summarized in Tables 3-5 along with appropriate graphical representations of the same.

The Bonferroni test showed that the change in Shore A hardness for Group I and Group II was statistically significant at 0.00 level (P < 0.05).

Sample number	Initial hardness	After weathering
1	24	32
2	25	33
3	25	33
4	24	33
5	25	34
6	26	34
7	26	34
8	24	32
9	25	32
10	25	33
11	24	32
12	26	34
13	26	34
14	25	33
15	24	33
16	26	33
17	25	33
18	25	33
19	25	33
20	25	34
21	26	34
22	26	33
23	25	32
24	24	32
25	25	33
26	24	32
27	25	33
28	25	33
29	24	32
30	26	34

Table 1: Shore A hardness values for Group I after accelerated weathering (Mediterranean climate)

Table 2: Shore	A hardness	values for	Group II after
accelerated we	eathering (Tr	opical clim	nate)

Sample number	Initial hardness	After weathering
31	26	39
32	24	37
33	25	38
34	25	38
35	24	37
36	25	37
37	24	38
38	25	37
39	26	38
40	26	39
41	25	39
42	25	38
43	25	38
44	25	38
45	26	38
46	24	39
47	25	38
48	26	39
49	26	38
50	24	37
51	25	38
52	25	37
53	24	37
54	26	39
55	26	39
56	24	39
57	24	38
58	25	38
59	25	38
60	24	37

	n	Mean±SD	SE	95% confidence interval for a mean		Minimum	Maximum
				Lower bound	Upper bound	-	
Initial hardness	60	24.9833±0.74769	0.09653	24.7902	25.1765	24.00	26.00
After weathering (Group I)	30	33.0000±0.74278	0.13561	32.7226	33.2774	32.00	34.00
After weathering (Group II)	30	38.0000±0.74278	0.13561	37.7226	38.2774	37.00	39.00

Table 3: Descriptive statistics for the change in Shore A hardness for different groups

CI: Confidence interval, SD: Standard deviation, SE: Standard error

 Table 4: Comparison of change in Shore A hardness before

 and after accelerated weathering in different groups

Sum of	df	Mean	F	Significant
squares		square		
3693.008	2	1846.504	3324.560	0.001
64.983	117	0.555		
3757.992	119			
	squares 3693.008 64.983	<b>squares</b> 3693.008 2 64.983 117	squares         square           3693.008         2         1846.504           64.983         117         0.555	squares         square           3693.008         2         1846.504         3324.560           64.983         117         0.555

Figure 13 shows the comparison of change in final Shore A hardness after accelerated weathering.

#### DISCUSSION

Facial defects often result in devastating a cosmetic, functional, and psychological consequence, which makes it challenging for maxillofacial surgeons and prosthodontists to rehabilitate. Thus, a facial prosthesis presents the only attractive and practical alternative, when esthetic and functional demands cannot be surgically fulfilled.<sup>[7,8]</sup>

Silicone elastomers have been widely used for the construction of maxillofacial prosthesis. They are usually comprised polydimethylsiloxane (PDMS) elastomers. The PDMS chains, silica fillers, and the interactions between these components affect the overall strength and serviceability of the silicone elastomers.<sup>[9-11]</sup> Despite their wide use, they are far from ideal. The longevity of maxillofacial prostheses is dependent on the prosthesis material and the patients' attitude toward the prosthesis,<sup>[12]</sup> and it can be directly associated with the effectiveness of the prosthesis in use.<sup>[13]</sup> Silicone-based maxillofacial prostheses require replacement every 3-12 months,<sup>[6]</sup> as they suffer degradation of their mechanical and esthetic properties due to the weathering of polymers.<sup>[3-5,12,14]</sup> The main environmental characteristics that cause degradation are sunlight, temperature, moisture, wind, dust, and pollutants.<sup>[3]</sup> Weathering parameters in the present study simulate silicone prosthesis in service for 12 months. Each day, patients wear their prostheses for 8-12 h during which it is expected to be exposed to at least 2 h of daylight, normal environmental conditions, while the prosthesis is on the defect site.

India experiences seasonal variations in the form of winter, summer, monsoon, and postmonsoon (autumn) seasons during 1 year. The years' coldest months are December and January when temperatures average around 15°C–25°C.



Figure 13: Comparison of change in final Shore A hardness after accelerated weathering

In summer, temperatures average around  $32^{\circ}$ C– $40^{\circ}$ C. Mediterranean climates experience warm (but not hot) and dry summers and mild-to-cool wet winters. The temperature ranges from  $-3^{\circ}$ C to  $25^{\circ}$ C.

The parameters for the simulated Indian weather were alternating light and dark cycles where the light cycles lasted for 8 h and included an irradiance of 310 nm of  $0.63 \text{ W/m}^2/\text{nm}$ , humidity of 50%, and a chamber temperature of  $60^{\circ}C \pm 3^{\circ}C$  with condensation. The dark cycles lasted for 4 h, with a temperature of  $50^{\circ}C \pm 3^{\circ}C$  with condensation, and irradiance at 310 nm of  $0.63 \text{ W/m}^2/\text{nm}$ . For the Mediterranean climate, the light cycles lasted for 4 h and included an irradiance of 310 nm of 0.63 W/m<sup>2</sup>/nm, humidity of 50%, and a chamber temperature of  $60^{\circ}C \pm 3^{\circ}C$  with condensation. The dark cycles lasted for 4 h with a temperature of  $50^{\circ}C \pm 3^{\circ}C$  with condensation and irradiance at 310 nm of 0.63 W/m<sup>2</sup>/nm. Thus, the artificial weathering conditions used in the study simulate the Indian tropical and Mediterranean environmental conditions.

Weathering of polymers leads to significant changes in their mechanical and physical properties. When photo-oxidative degradation occurs the following steps might happen:

 Initiation: Formation of free radicals. The formation proceeds by a radical chain process initiated either by dissociation caused by the collision of a photon with sufficient energy with a polymer molecule or as the

		Mean	STD.	Sig.	95% Interval Confidence	
		Difference	Error	Lower Bound	Upper Bound	
Initial Hardness						
After Weathering Group I	-8.01667*	0.16665	0.001	-8.4214	-7.6119	
After Weathering Group II	-13.01667*	0.16665	0.001	-13.4214	-12.6119	
After Weathering Group I						
After Weathering Group II	-5.00000*	0.19243	0.001	-5.4674	-4.5326	

.....

result of some impurity present, for example, trace metals from the polymerization catalyst

- Propagation: Reaction of free polymer radicals with • oxygen, production of polymer oxy radicals and peroxy radicals, and secondary polymer radicals, resulting in chain scission
- Termination: Reaction of different free radicals with each other resulting in further cross-linking.

The main structural modifications in irradiated polymers are changes in their molecular weight distribution, due to main chain scission, cross-linking and end linking, and the production of volatile degradation products. These phenomena tend to modify the material's physical properties.<sup>[5]</sup> The changes in physical properties affect the polymer structural network in different ways. The density of the structural network increases during cross-linking due to the formation of bonds between the existing monomers or between the chains.<sup>[5]</sup> Therefore, cross-linking leads to the formation of harder materials. On the other hand, when chain scission is the dominant mechanism, the fracturing bonds within the main chain or between two different chains incur a decrease in density of the structural network, and the materials become softer.<sup>[5]</sup> In irradiated polymers, both the above mechanisms take place; therefore, it is critical to investigate which of them is dominant, to explain the structural analysis.

The hardness of silicone elastomers is controlled by the surface characteristics of the polymer network and by the density of cross-links. Silicone elastomers undergo cross-linking once exposed to high-energy radiation, and the amount of cross-linking is proportional to the radiation dose and duration.<sup>[15]</sup> Sebum fatty acids, perspiration tends to interact with silicone, breaking chain bonds, and decomposing the elastomer by a phenomenon called as "reversion."<sup>[16]</sup> This degradation effect is accelerated with light radiation, leading to softer and weaker elastomer. Thus, the actual performance of silicone elastomers under extraoral factors can be evaluated by exposure tests simulating conditions involving sterilization, hygiene maintenance procedures, biological skin fluid absorption, and outdoor exposure.

This study evaluated the change in hardness of a commercially available nonpigmented RTV maxillofacial silicone when exposed to accelerated weathering that simulated the Indian and Mediterranean climates for 1 year.

RTV maxillofacial silicone was tested in this study, as it is commonly used due to its ease of manipulation. RTV of the maxillofacial silicone elastomer is known to show lesser progressive hardening of the elastomer as compared to the heat vulcanization technique.<sup>[17]</sup>

Factor II shows favorable properties compared to other commercially available maxillofacial silicones due to its high tear strength, softness, and ease of manipulation as reported by Tariq Aziz, Mark Waters, and Robert Jaggers.<sup>[18]</sup> Thus, it was chosen as a material of choice to conduct the study.

The maxillofacial prosthesis should demonstrate reasonable tensile strength and yet be flexible and soft enough to respond adequately with facial movement.

The hardness of the maxillofacial material is a measure of its flexibility. The ideal hardness is similar to that of the missing facial tissue. In this study, the initial shore hardness obtained was 25A, and after simulated accelerated weathering, it was 33A for the Mediterranean climate and 38A for the tropical climate, which is in agreement with other researchers and within the clinically acceptable limit. Considering that facial features are composed of soft and hard textures, Lewis and Castleberry stated that 25-35 Shore A indentation units were ideal, but 10-45 units were acceptable.<sup>[19]</sup> Sweeney et al.<sup>[20]</sup> considered a desirable range of hardness to be 48-52 Shore-A units. Conroy et al.[21] considered that 25-55 Shore-A units were the correct range of hardness.

As no difference was found in the hardness of the samples cured against polished metal, untreated stone, and stone sealed with cold-mold seal material,<sup>[22]</sup> our samples were cured in a polished metal mold comprising 15 compartments in the desirable dimensions.

In the present study, black plastic boxes were used to store the specimens.<sup>[23]</sup> This was done to rule out the light transmission affecting aging.

The experimental procedures were conducted according to the specifications for the vulcanized rubber established by the International Standards Organization and the ASTM. Specimens were tested after 24 h of conditioning at room temperature.

## Limitations

Although the study was carried out following the standard protocols, it has some limitations as follows:

- 1. The present study was an *in vitro* simulation of the clinical usage of prostheses and the photochemical insult that they are subjected to. The actual clinical use of the prostheses in daily life can be different and variable
- 2. A single brand of RTV maxillofacial silicone material was used in the study. Further research with various other silicone materials is indicated
- 3. The evaluation was done for nonpigmented silicone samples. Extrinsic and intrinsic pigments could affect Shore A hardness as well. Further research is warranted
- 4. India has different climatic conditions in different regions; the simulation did not account for these variations.

## **Clinical implications**

- Silicone elastomers have been used over the years for the fabrication of maxillofacial prostheses. The prosthesis has to be refabricated on an average every 3–12 months, mainly due to the degradation of their mechanical and esthetic properties due to the weathering of polymers
- Accelerated artificial weathering simulates the natural environmental conditions in which an extraoral prosthesis is used, thus denoting the service life of the prosthesis in use
- The hardness of the maxillofacial material is a measure of its flexibility. The ideal hardness is similar to that of the missing facial tissue whose hardness ranges from hard to soft and flexible. This study provided an insight into the appropriate use of the maxillofacial silicone at various sites
- There is currently no report in literature comparing the effect of a warmer, more humid Indian subcontinental environment, to a cooler and relatively drier Mediterranean climate on the degradation rate of maxillofacial silicones.

## CONCLUSION

Within the limitations of this study, the following conclusions can be drawn:

- 1. The Shore A hardness of a RTV maxillofacial silicone, before and after accelerated artificial weathering was statistically significant at 0.05 level (P < 0.05)
- 2. The change in Shore A hardness was greater in the simulated tropical climate group (Group II) as compared to the simulated Mediterranean climate group (Group I) but within clinical limits.

# Financial support and sponsorship Nil.

## **Conflicts of interest**

There are no conflicts of interest.

## REFERENCES

- Kiat-Amnuay S, Mekayarajjananonth T, Powers JM, Chambers MS, Lemon JC. Interactions of pigments and opacifiers on color stability of MDX4-4210/type A maxillofacial elastomers subjected to artificial aging. J Prosthet Dent 2006;95:249-57.
- Polyzois GL. Color stability of facial silicone prosthetic polymers after outdoor weathering. J Prosthet Dent 1999;82:447-50.
- Eleni PN, Krokida MK, Polyzois GL. The effect of artificial accelerated weathering on the mechanical properties of maxillofacial polymers PDMS and CPE. Biomed Mater 2009;4:035001.
- Eleni PN, Krokida M, Polyzois G, Gettleman L, Bisharat GI. Effects of outdoor weathering on facial prosthetic elastomers. Odontology 2011;99:68-76.
- Eleni PN, Katsavou I, Krokida MK, Polyzois GL, Gettleman L. Mechanical behavior of facial prosthetic elastomers after outdoor weathering. Dent Mater 2009;25:1493-502.
- Sampers J. Importance of weathering factors other than UV radiation and temperature in outdoor exposure. Polym Degrad Stab 2002;76:455-65.
- Kurunmäki H, Kantola R, Hatamleh MM, Watts DC, Vallittu PK. A fiber-reinforced composite prosthesis restoring a lateral midfacial defect: A clinical report. J Prosthet Dent 2008;100:348-52.
- Scolozzi P, Jaques B. Treatment of midfacial defects using prostheses supported by ITI dental implants. Plast Reconstr Surg 2004;114:1395-404.
- Aziz T, Waters M, Jagger R. Development of a new poly (dimethylsiloxane) maxillofacial prosthetic material. J Biomed Mater Res B Appl Biomater 2003;65:252-61.
- Bellamy K, Limbert G, Waters MG, Middleton J. An elastomeric material for facial prostheses: Synthesis, experimental and numerical testing aspects. Biomaterials 2003;24:5061-6.
- 11. Lai JH, Wang LL, Ko CC, DeLong RL, Hodges JS. New organosilicon maxillofacial prosthetic materials. Dent Mater 2002;18:281-6.
- Hooper SM, Westcott T, Evans PL, Bocca AP, Jagger DC. Implant-supported facial prostheses provided by a maxillofacial unit in a U.K. Regional hospital: Longevity and patient opinions. J Prosthodont 2005;14:32-8.
- 13. Adisman IK. Prosthesis serviceability for acquired jaw defects. Dent Clin North Am 1990;34:265-84.
- Hatamleh MM, Haylock C, Watson J, Watts DC. Maxillofacial prosthetic rehabilitation in the UK: A survey of maxillofacial prosthetists' and technologists' attitudes and opinions. Int J Oral Maxillofac Surg 2010;39:1186-92.
- Hatamleh MM, Polyzois GL, Silikas N, Watts DC. Effect of extraoral aging conditions on mechanical properties of maxillofacial silicone elastomer. J Prosthodont 2011;20:439-46.
- 16. Polyzois GL, Tarantili PA, Frangou MJ, Andreopoulos AG. Physical

properties of a silicone prosthetic elastomer stored in simulated skin secretions. J Prosthet Dent 2000;83:572-7.

- Kheur MG, Sethi T, Coward T, Jambhekar SS. A comparative evaluation of the change in hardness, of two commonly used maxillofacial prosthetic silicone elastomers, as subjected to simulated weathering in tropical climatic conditions. Eur J Prosthodont Restor Dent 2011;20:1-5.
- Aziz T, Waters M, Jagger R. Analysis of the properties of silicone rubber maxillofacial prosthetic materials. J Dent 2003;31:67-74.
- 19. Lewis DH, Castleberry DJ. An assessment of recent advances in external maxillofacial materials. J Prosthet Dent 1980;43:426-32.
- Sweeney WT, Fischer TE, Castleberry DJ, Cowperthwaite GF. Evaluation of improved maxillofacial prosthetic materials. J Prosthet Dent 1972;27:297-305.
- 21. Conroy BF, Haylock C, Hulterstrom A, Pratt G, Winter R. Report of a four-year research and development programme involving the institute of maxillo-facial technology and the university of wales institute of science and technology aimed at the production of a new facial prosthetic system. Proceedings of the Institute of Maxillo-Facial Technology and the International Facial Prosthetic Workshop. Proc Inst Maxillofac Technol; 1979. p. 218-45
- 22. Veres EM, Wolfaardt JF, Becker PJ. An evaluation of the surface characteristics of a facial prosthetic elastomer. Part III: Wettability and hardness. J Prosthet Dent 1990;63:466-71.
- Goiato MC, Haddad MF, Pesqueira AA, Moreno A, Dos Santos DM, Bannwart LC, *et al*. Effect of chemical disinfection and accelerated aging on color stability of maxillofacial silicone with opacifiers. J Prosthodont 2011;20:566-9.

## Author Help: Reference checking facility

The manuscript system (www.journalonweb.com) allows the authors to check and verify the accuracy and style of references. The tool checks the references with PubMed as per a predefined style. Authors are encouraged to use this facility, before submitting articles to the journal.

- The style as well as bibliographic elements should be 100% accurate, to help get the references verified from the system. Even a single spelling error or addition of issue number/month of publication will lead to an error when verifying the reference.
- Example of a correct style Sheahan P, O'leary G, Lee G, Fitzgibbon J. Cystic cervical metastases: Incidence and diagnosis using fine needle aspiration biopsy. Otolaryngol Head Neck Surg 2002;127:294-8.
- Only the references from journals indexed in PubMed will be checked.
- Enter each reference in new line, without a serial number.
- Add up to a maximum of 15 references at a time.
- If the reference is correct for its bibliographic elements and punctuations, it will be shown as CORRECT and a link to the correct article in PubMed will be given.
- If any of the bibliographic elements are missing, incorrect or extra (such as issue number), it will be shown as INCORRECT and link to
  possible articles in PubMed will be given.