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Editorial

Distraction Osteogenesis of Dental Implant Distractors and the Effect of Concentrated Growth Factor

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Introduction

Composite resin is a technique sensitive restorative material especially when indicated as direct restoration. The inherent polymerization shrinkage of the material is not the only challenge for the operator but starting by the case selection, passing through the preparation of operatory field up to finishing of the restoration are major challenges also. Manufacturers are competing in-between them to introduce composite resin materials and recommended different techniques to reduce the material sensitivity to manipulative variables and by the way increase their market share and profits of promoting their materials. But, the final word and decision will be always for the science. In this presentation, we will discuss all the up to date consensus commandments to get successful direct composite restoration with the least insignificant post-operative pitfalls and long-term successful clinical serviceability. This study was designed to evaluate the resisting levels in GCF of patients suffering from periodontitis and Type 2 Diabetes Mellitus (T2DM) after non-surgical periodontal therapy and Sub antimicrobial Dosage of Doxycycline (SDD). Thirty periodontal sites within 24 patients with age ranging between (24-51) years old were selected for this study.

A total of 30 periodontal sites were randomly divided into three groups; each group included ten periodontal sites; Group I: Systemically healthy periodontitis patients who had received Scaling and Root Planning (SRP), Group II: Periodontitis patients with T2DM who had received SRP, and Group III: periodontitis patients with T2DM who were received SRP and SDD 20 mg twice/day. All patients were examined with the same clinical periodontal parameters which are Plaque Index (PI), Gingival Index (GI), Probing Depth (PD) and Clinical Attachment Level (CAL). Patients in each group went through nonsurgical periodontal therapy as well as a maintenance program (which includes brushing with regular toothpaste).

Collection of GCF samples was done in all patients at baseline, one month and 3 month following the periodontal therapy. Quantification of resisting in human samples was measured using resist in ELISA test. Non-surgical periodontal therapy was found to show relative improvement in all clinical parameters as well as a decline in resisting levels. In addition, GCF levels of resisting, PD, GI showed greater reduction after non-surgical treatment in group III than group II. Nonsurgical periodontal therapy is found to be effective in the management of periodontitis patients with and without diabetes mellitus and also GCF resist in can be a useful biomarker to detect the periodontal disease condition. Also, adjunctive use of SDD showed more clinical benefit to patients with periodontitis by host response modulation. Irrigation dynamics is a majorly neglected aspect to be studied in root canal irrigation. The fundamental rule to understand mechanics is to observe patterns of flow during the process. Thus, this work is conducted to systematically assess the *in-vitro* and *Ex-vivo* based studies on various parameters affecting the irritant flow using a manual syringe needle alone for root canal irrigation. The literature search was conducted through libraries such as PubMed, Medline, Embrace, Scopus, web of science and other gray literature from Google scholar, the British medical library etc. The articles were selected based on Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. A modified risk of bias assessment was carried out for selected articles, as most of the selected studies were *in-vitro* and *ex vivo* based with no specific sample determination. The literature search resulted in 101 items, of which 19 records were included in this review.

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