

**DIMENSIONAL ACCURACY OF ACRYLIC RESIN DENTURE BASES; HIGH  
STRENGTH HEAT CURED VERSUS MICROWAVE PROCESSED  
ACRYLIC RESIN– AN IN VITRO STUDY.**

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Dimensional accuracy of acrylic resin denture bases; high strength heat cured versus microwave processed acrylic resin.

**ABSTRACT**

**Aims and objective:** Poly-methyl-metacrylate resin has been used commonly for denture bases

. Polymerisation shrinkage and release of thermal stresses are the major disadvantages exhibited of these materials. The present study was conducted to evaluate and compare Dimensional accuracy of acrylic resin denture bases; high strength heat cured versus microwave processed acrylic resin

**Methodology:** 30 maxillary acrylic bases (2 mm thick) were made on cast model. These specimens were divided into 3 groups.

Group 1: control, high strength heat cure PMMA cured by water bath method (short cycle ) Group2; high strength heat cure PMMA samples cured by water bath method (Long cycle) Group 3; microwave acrylic resin samples cured by microwave energy (550 Wfor 6 min). The base/ cast sets were sectioned transversally in the posterior palatal seal zone. The measurements were made at the right marginal limit, left marginal limit, right ridge crest, left ridge crest and the palatal midline. The existence of gaps between the casts and acrylic was assessed using a stereomicroscope .

**Results:** There was no significant difference between high strength heat cure PMMA samples cured by water bath method (Long cycle) and microwave acrylic resin samples cured by microwave energy.

**Conclusion:** The greatest discrepancy were seen in high strength heat cure PMMA samples cured by water bath (short cycle) and lowest discrepancy was seen with the microwaveable acrylic resin samples cured by microwave energy (550 Wfor 6 min)

**Key words:** Dimensional accuracy, Microwave, Denture base material, Poly-methyl-metacrylate

## Introduction

Denture bases for high strength or implant supported prosthesis usually are made of methacrylate-based polymers activated by thermal energy delivered by different methods eg immersion in hot water bath, microwave irradiation and injection moulding techniques. <sup>1</sup> **Takamata T, Setcos JC** reported Poly-methyl-metacrylate have optimal physical properties and excellent esthetics with relatively low toxicity compared to other plastic denture base materials. <sup>2</sup> Despite its popularity

disadvantage of this material<sup>3</sup>. The combination of polymerization shrinkage and distortion due to the thermal stresses affects the dimensional accuracy of denture bases to underlying tissue and creating a microgap <sup>4,5</sup>. The problems associated with the compression moulding technique increase the gap between the denture base and the underlying mucosa, compromising the fit of dentures. <sup>6</sup> Therefore acrylic resin and processing methods have been modified to improve physical and chemical properties of denture bases. The microwave disinfection at 690 W for 6 min promoted significant increase of baseplate distortion in a denture resin polymerized by microwave energy but not when same resin was polymerized by high strength water bath<sup>7</sup>. The results of various studies have been mixed and conflicting. The present study was conducted to evaluate and compare Dimensional accuracy of acrylic resin denture bases; high strength heat cured versus microwave processed acrylic resin

### Aims and Objectives

1. To evaluate dimensional accuracy in high strength heat polymerized resin cured by water bath technique (short cycle).
2. To evaluate dimensional accuracy in high strength heat polymerized resin cured by water bath technique (long cycle)
3. To evaluate dimensional accuracy in microwave acrylic resin cured by microwave energy.
4. To comparatively evaluate dimensional accuracy of high strength heat resin cured by water bath (short and long cycle) and microwave resin cured by microwave energy.

### Material and Methodology:

Silicone rubber base impression was made of maxillary arch and poured with Type IV dental stone to obtain cast model. <sup>8</sup> **30** maxillary acrylic bases (2mm thick) were made on cast model Trevalon high strength heat cure material and Acron MC microwaveable resin was used for present study The specimens divided into 3 groups.

Group 1: control, high strength heat cure PMMA cured by water bath method ( short cycle )

Group 2; high strength heat cure PMMA samples cured by water bath method ( Long cycle ) Group 3 ; microwave acrylic resin samples cured by microwave energy( 550 Wfor 6 min)

### **Curing procedure for Group 1: control, high strength heat cure PMMA samples cured by water bath (short curing cycle)**

The prepared wax models were invested in the flask following the manufacturer's instructions for water – powder ratio, mixing time and setting time. Thereafter dewaxing was done by immersing in boiling water for 3 minutes. A mixture of polymer and monomer in the ratio of 3:1 by volume was proportioned prior to mixing. Once the mix reached the dough consistency it was kneaded and then packed in the mould. The flasks were clamped and closure was done under pressure of 20 KN and kept for 30 mins. The acrylic resin was processed in a water bath curing tank for one hour thirty minutes at 74 degree C and another 1 hour at 100 degree C and thereafter flasks were then kept at room temperature for one hour.

A total of 10 test specimens were prepared using this procedure.

**Curing procedure for Group 2 high strength heat cure PMMA samples cured by water bath (long curing cycle)** The prepared wax models were invested in the flask following the manufacturer's instructions for water – powder ratio, mixing time and setting time. Thereafter dewaxing was done by immersing in boiling water for 3 Minutes. A mixture of polymer and monomer in the ratio of 3:1 by volume was proportioned prior to mixing. Once the mix reached the dough consistency it was kneaded and then packed in the mould. The flasks were clamped and closure was done under pressure of 20 KN and kept for 30 mins. The curing temperature is programmed to 100 degree C for 8 hours and then flasks were then kept at room temperature for one hour. A total of 10 test specimens were prepared using this procedure

### **Curing procedure for Group 3 Microwave acrylic resin Acron MC samples cured by microwave energy**

The resin was mixed, and investing done in special flask. Curing was done in domestic microwave with time power of 550 W for 6 min<sup>9</sup>

A total of 10 test specimens were prepared using this curing technique.

Thus each group consists of 10 test samples and total of 30 samples from 3 study groups.

### **Measurement of dimensional accuracy in Test specimens**

The base/ cast sets were sectioned transversally in the posterior palatal seal zone. The measurements were made at the right marginal limit (A), left marginal limit, right (B) ridge crest (C), left ridge crest (D) and the palatal midline. (E) (FIG 1) The existence of gaps between the casts and acrylic was assessed using a stereomicroscope.

### **Statistical Analysis:**

The statistical analysis were done using Kruskal-wallis test and Mann-whitney U test

### **Level of Significance (p-value)**

❖ **P-value < 0.05 - Significant**

## ❖ RESULTS

The comparison of the mean marginal discrepancy was compared between the groups 1,2 and 3 at Right marginal limit, Left marginal limit, Right Ridge crest, Left Ridge crest and Palatal midline using the Kruskal-wallis test. There was a significant difference in the mean marginal discrepancy between the groups 1,2 and 3 at all the margins. (**Table 1**)

The post-hoc inter-group comparison was done between the groups 1,2 and 3 at Right marginal limit, Left marginal limit, Right Ridge crest, Left Ridge crest and Palatal midline using the Mann-whitney U test. At all the margins, the mean marginal discrepancy was significantly more among group 1 in comparison to groups 2 and 3. Whereas, there was no significant difference between groups 2 and 3.

## DISCUSSION

Poly-methyl-metacrylate has been most commonly material used since decades. It has excellent esthetic properties, strength, low water sorption, low solubility, lack of toxicity and is one of the material of choice <sup>10,11</sup> **Anthony, DH, FA Peyton** <sup>12</sup> reported that the accurate fit of denture base is a principal criterion in the physical mechanism of complete denture retention. The polymerization shrinkage and distortion due to the thermal stresses affects the dimensional accuracy of denture base to underlying tissue, and thereby creating a microgap. **Jafar Gharechahi, Nafiseh Asadzadeh, Foad Shahabian, Maryam Gharechan** <sup>13</sup> stated that the acrylic specimen produced by injection moulded technique exhibited less dimensional accuracy compared to those produced with high strength water bath technique. The curing shrinkage was compensated by water storage time decreasing dimensional changes. **Webb et al** <sup>9</sup> stated that microwaving dentures at 550 W during 6 min may be more effective method of sterilization than soaking denture in 0.02 % sodium hypochlorite. **Burns et al** <sup>14</sup> reported that specimens made from three different denture base material had excellent stability after 13 MIN at 650 W of microwave radiation. The results of various studies by researches were mixed hence the present study was conducted to evaluate and compare Dimensional accuracy of acrylic resin denture bases; high

strength heat cured versus microwave processed acrylic resin

The mean marginal discrepancy was significantly more in control, high strength heat cure PMMA cured by water bath method (short cycle) in comparison to high strength heat cure PMMA samples cured by water bath method (Long cycle). The probable reason may be that high residual monomer in short curing cycle have deleterious effect on properties of denture base resin thereby affecting their dimensional stability.

There was no significant difference between high strength heat cure PMMA samples cured by water bath method (Long cycle) and microwave acrylic resin samples cured by microwave energy (550 W for 6 min).

The mean marginal discrepancy was significantly more among control, high strength heat cure

PMMA cured by water bath method (short cycle) in comparison to microwave acrylic resin samples cured by microwave energy (550 W for 6 min). The probable reason may be that the dimensional stability may be influenced by combined effect of type of resin/polymerized technique and microwave irradiation setting.

## CONCLUSION

1. The greatest dimensional discrepancy were seen in high strength heat cure PMMA samples cured by water bath (short cycle)
2. The lowest dimensional discrepancy was seen with the microwaveable acrylic resin samples cured by microwave energy (550 W for 6 min)
3. There was no significant difference of dimensional discrepancy between high strength heat cure PMMA samples cured by water bath method (Long cycle) and microwave acrylic resin samples cured by microwave energy (550 W for 6 min)

## REFERENCES:

1. Porto Alegre RS, Effect of repeated microwave disinfection on surface roughness and baseplate dimensional of denture resin polymerized by different techniques Rev odonto cienc 2009;24;(1)40- 44.
2. Takamata T, Setcos JC. Resin denture bases ;review of accuracy and methods of polymerization .Int J Prosthodont 1989 ;2;555-3.
3. Anusavice KJ 2003 Phillips science of dental materials 11<sup>th</sup> edition. St. Elsevier Wallace PW  
  
Graser GN, Myers ML Proskin HM Dimensionall accuracy of denture resin cured by microwave energy. J Prosthet 1991 ;66; 403-408
4. Jackson AD, BR Lang RF Wang The influence of teeth on denture base processing accuracy Int J Prosthodont 1993 ;6;333-340
5. Garfunkel E, Evaluation of dimensional accuracy in complete denture processed by injection pressing and pack and press technique J Prosthet Dent 1983;50;757-61.
6. Jafar Gharechahi, Nafiseh Asadzadeh, Foad Shahabian, Maryam Gharechan Dimensional accuracy of acrylic resin denture bases; high strength versus injection moulded technique J Dent Tehran 2014 (11(4) 398-405
7. Flex G, Ferneda F, Ferreida da Silva DF, Mota EG Shinkai RS. Effect of two microwave disinfection protocols on dimensional of poly methyl metaacrylate denture bases. Minerva Stomatol 2007;56;121-7
8. Pavan S, Filho JNA, Santos PHD, Mollo FDA. Effect of microwave treatment on dimensional accuracy of maxillary acrylic resin denture bases Braz.Dent J 2005 16(2) 1-6
9. Webb BC, Thomas CJ, Harty DWS, Willcox MDP. Effectiveness of two methods of denture sterilization. Joral Rehabil 1998;24;416-423
10. FA Rueggeberg From vulcanite to vinyl, history of resins in restorative dentistry. J Prosthet

Dent

.2002;87;367-379

11. Babu MR, Rao CS, Ahmed ST, Bharat JSV, Rao NV, Vinod V.A Comparative evaluation of the dimensional accuracy of heat polymerized PMMMA denture bases cured by different curing cycles and clamped by R S Technique and high strength method-an in vitro study J Int Oral Health 2014 ;6(2);68-75
12. Anthony, DH, FA Peyton Dimensional accuracy of various denture base materials. J Prosthet Dent 1962;12;67-81
13. Jafar Gharechahi, Nafiseh Asadzadeh, Foad Shahabian, Maryam Gharechan Dimensional accuracy of acrylic resin denture bases; high strength versus injection moulded technique J Dent Tehran 2014 (11(4) 398-405
14. Burns DR, Kazanoglu A, Moon PC, Gunsolley JC. Dimensional stability of acrylic resin materials after microwave sterilization. Int Prosthodont 1990;3;489-493

**LEGENDS OF TABLE AND FIGURE**

TABLE I: Comparative mean marginal discrepancy between all groups at the right marginal limit, left marginal limit, right ridge crest, left ridge crest and the palatal midline

Figure 1. The gap between maxillary denture base and cast at the right marginal limit, (A) left marginal

limit(B), right ridge crest(C), left ridge crest(D) and the palatal midline(E)

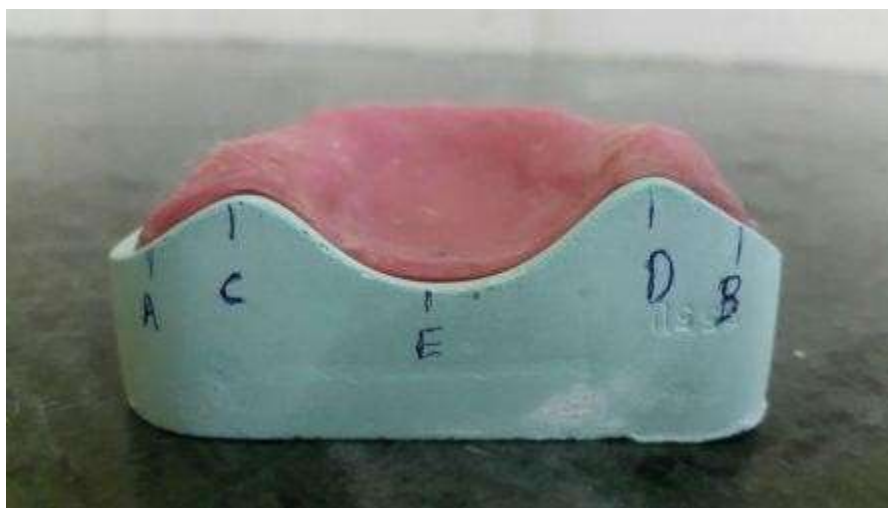


FIGURE 1

TABLE I

	Right marginal limit	Left marginal limit	Right Ridg e crest	Left Ridg e crest	Palatal midlin e
Group 1	2.600±1.598	2.700±1.625	0.800±0.329	1.010±0.899	2.012±1.892
Group 2	1.020±0.674	1.400±0.912	0.040±0.023	0.004±0.008	0.421±0.335
Group 3	0.900±0.489	1.100±0.608	0.030±0.019	0.002±0.012	0.320±0.299
p-value <sup>a</sup>	< 0.001*	0.009*	< 0.001*	0.001*	0.003*
Group 1 vs 2 <sup>b</sup>	0.006*	0.041*	< 0.001*	0.002*	0.010*
Group 1 vs 3 <sup>b</sup>	0.003*	0.010*	< 0.001*	0.001*	0.006*
Group 2 vs 3 <sup>b</sup>	0.964 <sup>#</sup>	0.825 <sup>#</sup>	0.995 <sup>#</sup>	0.823 <sup>#</sup>	0.978 <sup>#</sup>

\* Significant difference

# Non-significant difference

<sup>a</sup> Kruskal-wallis test<sup>b</sup> Mann-whitney U test