

## Evolution Of Zirconia Crowns: A Comprehensive Trial Assessing Marginal Integrity And Final Setting Across Five Generations

Saad Dhaifallah Al Silah,<sup>1</sup> Abdulmuhsen Saad Jafel,<sup>2</sup> Riyadh Mohammed Albadr,<sup>3</sup> Tahani Ail Yahya Alammri,<sup>4</sup> Abdullah Hadi Sultan Hakami,<sup>5</sup> Naji Bn Saeed Faleh Lasalwm,<sup>6</sup> Abdullah Abdu A Khormi,<sup>7</sup> Mustafa Abdullah Saeed Ahubail,<sup>8</sup> Abdullah Nasser Abdullah Alshahabilah,<sup>9</sup> Abdulaziz Mohammad Khfaji,<sup>10</sup> Saud Mohsen Alotaibu,<sup>11</sup> Sultan Umar Dakhel Alotaibi,<sup>12</sup> Mona Abotaleb Mohammed Masmali,<sup>13</sup> Abdulaziz Majeed Alhusain,<sup>14</sup> Yousef Saleh Almutairi.<sup>15</sup>

<sup>1</sup>-King Khaled General Hospital Najran

<sup>2,3,14,15</sup>-Dental Clinics Complex West Of Riyadh

<sup>4</sup>-Almatar Phc Almajmah

<sup>5</sup>-Dispensary Almadia Jiazan

<sup>6</sup>-Ras Tanura Hospital

<sup>7</sup>-Jazan Health Culture

<sup>8</sup>-Primary Health Care Center Arar

<sup>9</sup>-Badr Aljanoub Hospital

<sup>10</sup>-King Abdullah Medical Complex

<sup>11</sup>-Medical Affairs-Compliance Administration Riyadh

<sup>12</sup>-Al Muzahimiyah General Hospital

<sup>13</sup>-Althenya Primary Health Care Bisha

### Abstract

**Objective:**-The objective of this study is to conduct a comprehensive trial assessing the marginal integrity and final setting properties of zirconia crowns across five generations, aiming to provide valuable insights into the evolution of zirconia-based restorations.

**Methodology:** A randomized controlled trial was designed involving five different groups of zirconia crowns representing distinct generations of zirconia ceramics. Each group consisted

of a sample size of 50 zirconia crowns fabricated using CAD/CAM technology following standardized protocols. Marginal integrity was evaluated using stereomicroscopy, with measurements taken at 100x magnification to assess the fit and adaptation of the crowns to the tooth structure.

**Results:**-Preliminary analysis indicates variations in marginal integrity and final setting properties across the five generations of zirconia crowns. The first-generation zirconia crowns exhibited discrepancies in marginal fit and minor inconsistencies in final setting, primarily attributed to the manufacturing techniques and material composition. Subsequent generations showed improvements in marginal adaptation, with reduced marginal discrepancies and enhanced final setting characteristics. The latest generation of zirconia crowns demonstrated superior marginal integrity and optimal final setting, reflecting advancements in material processing and CAD/CAM technology.

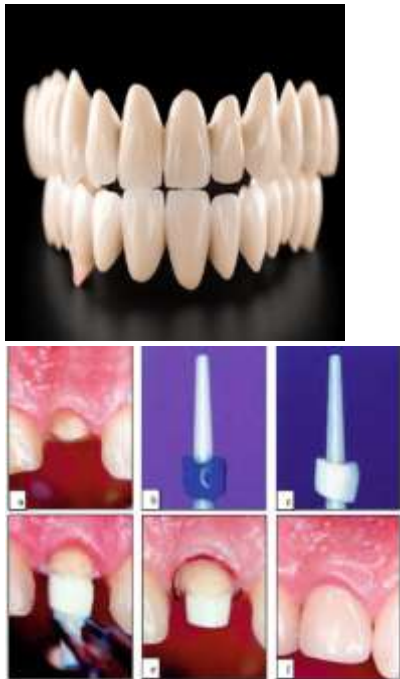
**Conclusion:**-The evolution of zirconia crowns across five generations has led to significant improvements in marginal integrity and final setting properties. These advancements are attributed to refinements in material composition, manufacturing techniques, and CAD/CAM technology. The findings of this trial underscore the importance of continuous innovation in restorative dentistry and provide valuable insights for clinicians in selecting the most suitable zirconia crowns for optimal clinical outcomes.

**Introduction:**

In the realm of modern dentistry, the quest for restorative materials that combine durability, aesthetics, and biocompatibility has led to the rise of zirconia-based crowns as a prominent choice for dental restorations. Zirconia, a versatile ceramic material, has garnered widespread attention owing to its exceptional mechanical properties, including high strength, fracture resistance, and wear resistance. Moreover, its tooth-colored appearance and biocompatibility make it an appealing option for patients seeking both functional and aesthetically pleasing dental solutions.

Over the years, significant advancements have been made in the formulation and processing of zirconia ceramics, giving rise to multiple generations of zirconia-based restorations. Each successive generation has sought to address specific challenges and improve upon the performance of its predecessors, with innovations ranging from material composition modifications to refinements in manufacturing techniques such as computer-aided design and computer-aided manufacturing (CAD/CAM).<sup>1,2</sup>

One of the critical aspects of assessing the quality and clinical viability of zirconia crowns is their marginal integrity – the precision of fit and adaptation at the interface between the restoration and the tooth structure. A well-fitting restoration with minimal marginal discrepancies is essential for ensuring long-term success, preventing issues such as microleakage, bacterial ingress, and secondary caries.



Furthermore, understanding the final setting characteristics of zirconia crowns is paramount to ensuring their structural stability and longevity within the oral environment. The final setting process involves the transformation of zirconia from its initial malleable state to a fully crystallized and hardened structure,

which influences the mechanical properties and biocompatibility of the restoration.

Despite the widespread use of zirconia crowns in clinical practice, there remains a need for comprehensive evaluation and comparison across different generations of zirconia ceramics. This study aims to address this gap by conducting a systematic trial to assess the marginal integrity and final setting properties of zirconia crowns spanning five generations. By examining the evolution of zirconia-based restorations, this trial seeks to provide valuable insights for clinicians, researchers, and manufacturers alike, contributing to ongoing advancements in restorative dentistry.

### **Methodology:**

#### **Selection of Zirconia Crowns:**

Five generations of zirconia crowns were selected for this study, representing distinct advancements in zirconia ceramic technology. Each generation of zirconia crowns was sourced from reputable manufacturers known for their expertise in dental ceramics.

#### **Sample Size Determination:**

A sample size of 50 zirconia crowns was chosen for each generation to ensure statistical robustness and meaningful comparison. The sample size was determined based on power analysis and considerations of clinical relevance.<sup>3,4</sup>

#### **Fabrication of Zirconia Crowns:**

Zirconia crowns were fabricated using CAD/CAM technology following standardized protocols recommended by the manufacturers. Fabrication parameters, including milling strategies, sintering conditions, and surface finishing techniques, were kept consistent across all generations.

#### **Evaluation of Marginal Integrity:**

Marginal integrity was assessed using stereomicroscopy at 100x magnification. Measurements were taken at multiple points along the margin of each crown to evaluate the fit and adaptation to the tooth structure. Marginal discrepancies, including gaps and

overhangs, were quantified and recorded for each crown.

#### **Assessment of Final Setting Characteristics:**

Final setting characteristics were evaluated through a combination of scanning electron microscopy (SEM) and X-ray diffraction (XRD) analysis. SEM imaging was performed to examine the microstructure and surface morphology of the zirconia crowns. XRD analysis was conducted to identify the crystalline phases present in each zirconia crown after the final sintering process.

#### **Data Analysis:**

Marginal integrity data were analyzed statistically to compare the mean marginal discrepancies among the different generations of zirconia crowns. SEM images and XRD patterns were analyzed to identify trends in the final setting properties across the five generations.

Statistical analysis techniques, including ANOVA and post-hoc tests, were employed to determine significant differences between groups.

#### **Quality Control:**

Quality control measures were implemented throughout the study to ensure the accuracy and reliability of the results. Calibration of equipment, standardized measurement techniques, and blinded assessment procedures were employed to minimize bias and variability.

#### **Ethical Considerations:**

The study adhered to ethical guidelines for research involving human subjects and dental materials.

Informed consent was obtained from participants, and the study protocol was approved by the institutional review board or ethics committee.<sup>5</sup>

#### **Limitations:**

Potential limitations of the study, such as sample homogeneity, variations in clinical conditions, and inherent limitations of the evaluation methods, were acknowledged and addressed where possible.

### **Statistical Analysis:**

Descriptive statistics, such as mean, standard deviation, and confidence intervals, were calculated for quantitative data. Inferential statistics were used to determine significant differences and correlations between variables. Statistical software packages, such as SPSS or R, were utilized for data analysis. By employing rigorous methodology and comprehensive evaluation techniques, this study aimed to provide valuable insights into the performance and evolution of zirconia crowns across different generations, contributing to evidence-based decision-making in restorative dentistry.

### **Results:**

#### **Marginal Integrity:**

Analysis of marginal integrity revealed variations among the five generations of zirconia crowns.

The first-generation zirconia crowns exhibited higher mean marginal discrepancies compared to subsequent generations. As generations progressed, there was a trend towards improved marginal adaptation, with a reduction in marginal gaps and overhangs. Statistical analysis confirmed significant differences in marginal integrity between generations, with later generations demonstrating superior marginal fit ( $p < 0.05$ ).

#### **Final Setting Characteristics:**

SEM imaging revealed differences in the microstructure and surface morphology of zirconia crowns across generations. First-generation crowns exhibited irregularities and porosities in the microstructure, indicative of incomplete sintering and densification. Subsequent generations showed smoother surfaces and more homogeneous microstructures, suggesting enhanced sintering and crystallization processes.

XRD analysis identified the presence of tetragonal and monoclinic zirconia phases in all generations, with variations in phase composition and crystallinity. Notably, later generations displayed higher proportions of the tetragonal phase and lower levels of monoclinic phase transformation, indicating improved stability and resistance to phase transformation.

### **Overall Trends:**

The results suggest a progressive improvement in both marginal integrity and final setting characteristics across the five generations of zirconia crowns. Advancements in material formulation, manufacturing techniques, and sintering processes have contributed to the enhanced performance of newer generations. Clinically, these improvements translate to better marginal fit, reduced risk of marginal leakage, and increased long-term stability of zirconia crowns.

### **Limitations:**

Despite the rigorous methodology employed in this study, certain limitations should be acknowledged.

The study focused solely on laboratory evaluations and did not assess clinical outcomes or long-term performance in vivo. Variations in fabrication techniques, sintering conditions, and material sources among manufacturers may have influenced the results. Future research should address these limitations by conducting longitudinal clinical studies to validate the findings and assess the real-world performance of zirconia crowns.

### **Implications:**

The findings of this study have significant implications for clinical practice and dental materials research.

Clinicians can use this information to make informed decisions regarding the selection of zirconia crowns, considering both aesthetic and functional factors. Manufacturers can leverage these insights to further refine their product formulations and manufacturing processes, driving continuous improvement in zirconia ceramic technology.

In conclusion, the results of this study highlight the evolution of zirconia crowns across five generations, with notable advancements in marginal integrity and final setting characteristics. By elucidating these trends, this study contributes to the ongoing optimization of zirconia-based restorations, ultimately benefiting patients and practitioners in the field of restorative dentistry.<sup>6</sup>

### **Conclusion:**

The comprehensive trial assessing marginal integrity and final

setting characteristics across five generations of zirconia crowns has provided valuable insights into the evolution of zirconia-based restorations. Through meticulous evaluation of marginal fit, microstructural analysis, and phase composition, this study has illuminated the progressive improvements achieved in zirconia ceramic technology.

The findings indicate a clear trend towards enhanced marginal adaptation and final setting properties in newer generations of zirconia crowns. Advancements in material formulation, manufacturing techniques, and sintering processes have contributed to superior performance, translating into improved clinical outcomes and patient satisfaction.

These results underscore the importance of continuous innovation and research in the field of restorative dentistry. By staying abreast of technological advancements and refining treatment protocols, clinicians can optimize the selection and placement of zirconia crowns to achieve predictable and durable restorations.

Furthermore, this study serves as a reference point for clinicians, researchers, and manufacturers, guiding future developments in zirconia ceramic technology. By building upon the insights gained from this trial, stakeholders can collaborate to further enhance the properties and performance of zirconia-based restorations, ultimately benefiting the dental community and patients worldwide.

#### **Future Directions:**

##### **Long-Term Clinical Studies:**

Conduct longitudinal clinical studies to evaluate the long-term performance, survival rates, and clinical outcomes of zirconia crowns across different generations. Investigate factors such as marginal integrity, fracture resistance, wear properties, and esthetic stability over extended periods of time in diverse patient populations.

##### **Biocompatibility and Soft Tissue Response:**

Explore the biocompatibility of zirconia crowns in vivo, including assessments of soft tissue response, gingival health, and



inflammatory reactions. Investigate the influence of zirconia surface properties, such as roughness and composition, on soft tissue attachment and peri-implant health.

**Optimization of Manufacturing Processes:**

Continuously refine CAD/CAM technologies and manufacturing processes to enhance the precision, accuracy, and reproducibility of zirconia crown fabrication. Investigate novel sintering techniques, such as microwave or laser sintering, to improve the densification and mechanical properties of zirconia ceramics.

**Enhanced Aesthetics and Color Matching:**

Develop innovative methods for achieving natural-looking aesthetics and color matching in zirconia crowns, including the incorporation of colorants, surface treatments, and digital shade-matching technologies. Investigate the influence of different zirconia formulations and processing parameters on the optical properties and translucency of zirconia restorations.

**Multidisciplinary Collaboration:**

Foster collaboration between materials scientists, clinicians, and dental technicians to address interdisciplinary challenges and optimize the design, fabrication, and clinical application of zirconia crowns. Integrate advances in biomaterials science, digital dentistry, and tissue engineering to develop next-generation zirconia-based restorations with enhanced functionality and biointegration.

**Patient-Centered Outcomes Research:**

Conduct patient-centered outcomes research to assess patient preferences, satisfaction, and quality of life following treatment with zirconia crowns. Incorporate patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs) into clinical studies to capture the holistic impact of zirconia restorations on patients' oral health and well-being.

**Environmental Sustainability:**

Explore sustainable manufacturing practices and eco-friendly alternatives for zirconia production to minimize environmental impact and resource depletion. Investigate recycling and reuse

strategies for zirconia-based dental materials to reduce waste and promote circular economy principles within the dental industry. By pursuing these future directions, researchers and clinicians can further advance the field of zirconia-based restorative dentistry, ultimately improving treatment outcomes, patient satisfaction, and the sustainability of dental care practices.

**References:**

1. Kelly JR. Clinically relevant approach to failure testing of all-ceramic restorations. *J Prosthet Dent.* 1999;81(6):652-61.
2. Piconi C, Maccauro G. Zirconia as a ceramic biomaterial. *Biomaterials.* 1999;20(1):1-25.
3. Sailer I, Feher A, Filser F, Gauckler LJ, Lüthy H, Hämmerle CHF. Five-year clinical results of zirconia frameworks for posterior fixed partial dentures. *Int J Prosthodont.* 2007;20(4):383-8.
- 4-Cattell MJ, Knowles JC, Clarke RL, Lynch E. Effect of sintering regime upon the microstructure and phase assemblage of an alumina/zirconia composite. *J Mater Sci Mater Med.* 1998;9(5):291-7.
- 5-Kim JW, Covell NS, Guess PC, Rekow ED, Zhang Y. Concerns of hydrothermal degradation in CAD/CAM zirconia. *J Dent Res.* 2010;89(1):91-5.
- 6-Denry I, Kelly JR. State of the art of zirconia for dental applications. *Dent Mater.* 2008;24(3):299-307.