



Effect of temporary cements and their removal methods on the bond strength of indirect restoration: a systematic review and meta-analysis

Jingyu Ding¹ · Yifu Jin¹ · Shanshan Feng¹ · Huan Chen¹ · Yanyan Hou¹ · Song Zhu¹

Received: 28 July 2022 / Accepted: 13 November 2022 / Published online: 24 November 2022
© The Author(s) 2022

Abstract

Objectives For a conventional indirect restoration, temporary cementation inevitably contaminated collapsed dentin collagen. The purpose of this review was to evaluate the optimal strategy for minimizing its negative effects.

Material and methods Databases such as PubMed, Web of Science, EMBASE, and the Cochrane Library were searched for in vitro studies, involving the influence of immediate dentin sealing (IDS), different temporary cements, and their removal strategies on dentin bond strength. The meta-analysis used the inverse variance method with effect method of the standardized mean difference and statistical significance at $p \leq 0.05$. The I^2 value and the Q -test were used to assess the heterogeneity.

Results A total of 14 in vitro trials were subjected to the meta-analysis. Within the study's limitations, we assumed that IDS eliminated the negative effects of temporary bonding, achieving the comparable immediate bond strength with the control ($p = 0.46$). In contrast, under delayed dentin sealing (DDS), temporary cementation statistically decreased bond strength ($p = 0.002$). Compared with resin-based and non-eugenol zinc oxide cements, polycarboxylate and calcium hydroxide cements performed better on bond strength with no statistical difference from the control group ($p > 0.05$). Among the removal methods of temporary cements, the Al_2O_3 abrasion restored the decreased bond strength ($p = 0.07$) and performed better than hand instruments alone ($p = 0.04$), while pumice removal slightly reduced the bond strength in contrast with the control group ($p = 0.05$, 95% CI = -1.62 to 0).

Conclusions The choices of IDS, polycarboxylate and calcium hydroxide temporary cements, Al_2O_3 abrasion removal method were feasible and efficient to enhance the bond strength.

Clinical relevance It is worthwhile applying IDS technique, polycarboxylate and calcium hydroxide temporary cements during indirect restoration. The Al_2O_3 abrasion of cleaning dentin can minimize the negative effects of temporary cement.

Keywords Immediate dentin sealing · Bond strength test · Dental bonding · Indirect restoration · Dental cements · Temporary dental restoration

Introduction

With the advances in adhesive technology and prosthetic material, the demand for indirect restoration is increasing with the advantages of superior aesthetic and mechanical properties over direct restoration [1]. However, during the first visit, indirect restoration involves multiple procedural steps including tooth preparation, impression making, and temporary restoration [2, 3]. After an inevitable delay of

fabricating laboratory restoration, at the second visit, the temporary restoration and cement are removed, and the final restoration is luted by a luting system [4]. At the moment, this conventional technique of dentin bonding prior to final restoration was referred to delayed dentin sealing (DDS) [5], which could lead to bacterial leakage and dentin hypersensitivity due to unsealed dentin during the temporary period [6, 7]. Aside from the impact of the temporary period on interface quality [5], the collapsed dentin collagen fibers contaminated by blood and temporary cement would cause the difficulty of subsequent adhesive penetrating and hybrid layer forming, bringing about inferior bond strength compared with freshly cut dentin [4, 8].

Based on clinical restrictions mentioned above, immediate dentin sealing (IDS) has emerged to seal the freshly

✉ Song Zhu
zhusong1965@163.com

¹ Department of Prosthodontics, Hospital of Stomatology, Jilin University, 1500 Qinghua Road, Chaoyang District, Changchun 130012, Jilin, China

cut dentin immediately after tooth preparation, when non-collapsed dentin collagen fibers would let the adhesive penetrate easier and prepolymerize without the pollution [8]. Meta-analyses have shown that the IDS technique could enhance the bond strength of resin-based restoration regardless of the adhesive strategy used [4], but lacking clinical trials to prove its advantage of reducing postoperative sensitivity [9]. Therefore, IDS is promising to mitigate the negative effects of temporary cement and temporary period on bond strength compared with DDS, which has not been systematically analyzed yet.

In addition, various strategies for minimizing the negative effects of temporary cement have been proposed, including effective removal ways and optimal selection of temporary cements, which have been shown to affect bond strength substantially [2, 5]. The contamination of blood or saliva could be resolved by primer re-application or water rinsing [10], but additional removal ways were required to clean temporary cement. It has been suggested that adequately removing would not affect immediate bond strength but undermine the bond durability [11, 12]. Therefore, taking appropriate clinical measures was imperative but controversial [2]. In terms of mechanical cleaning ways alone, Santos found that Al₂O₃ abrasion resulted in notably higher bond strength than pumice slurry [13], while Özcan revealed that there was no significant difference between them [14]. Similarly, considering various temporary cements, resin-based cement was discouraged due to its removal challenge and bond strength decline [5, 15], whereas other scholars came to the opposite conclusion [16]. But it was widely acknowledged that zinc oxide cement with eugenol inhibited polymerization, regardless of the adhesive system and bond strength test modality [15, 17].

As a result, aiming at drawing the suitable strategies for minimizing the negative effects of temporary cementation, the current study would conduct a systematic review of the role of IDS and the influence of various temporary cements and their removal methods on the bond strength. The null hypothesis stated neither the adoptions of IDS nor various temporary cements and their cleaning ways had difference in bond strength after temporary restoration.

Material and methods

This systematic review was conducted according to the PRISMA statement [18]. The protocol was registered in the PROSPERO international database (CRD42022325984). PICOS elements for a systematic review were as follows: participant (P): dentin of healthy human permanent teeth for indirect restoration; intervention (I): temporary cementation with temporary cement removal, applying the IDS or DDS techniques; comparison (C): comparative studies

with at least one control group without temporary cementation (blank control) or another method of temporary cement removal (positive control); outcome (O): the bond strength, including microtensile, microshear, or shear bond strength (MTBS, MSBS, and SBS); study types (S): in vitro and in situ laboratory studies.

The literature search was done by 2 independent reviewers until April 8, 2022, in 4 different databases: MEDLINE (PubMed), Web of Science, EMBASE, and the Cochrane Library, with no restriction for language and publication dates. Grey literature was searched in the grey source index of greynet. Search terms were constrained in title/abstract, except for Mesh terms. The search strategy in PubMed is shown in Table 1. Other databases' search strategies are attached in supplementary material.

Inclusion and exclusion criteria

For qualitative synthesis, we only included in vitro laboratory studies that evaluated the effects of temporary cementation or different temporary cement removal strategies on bond strength. Studies containing the following criteria were excluded in this review: (1) participants were non-human animal dentin, such as bovine dentin; (2) studies where zinc oxide and eugenol were used as temporary cement; (3) researches without a temporary period failed to realistically simulate the clinical process, so they were excluded; (4) small sample size: tooth number was less than 3 or sticks for MTBS were less than 24 per group [19]; (5) research subjects were various temporary sealing materials used in endodontics, such as glass ionomer.

Risk of bias

After searching in the database, we exported the articles to remove duplicate articles. Based on the titles and abstracts, we carried out an initial screening of the retrieved studies. We reassessed the remaining full texts and only included

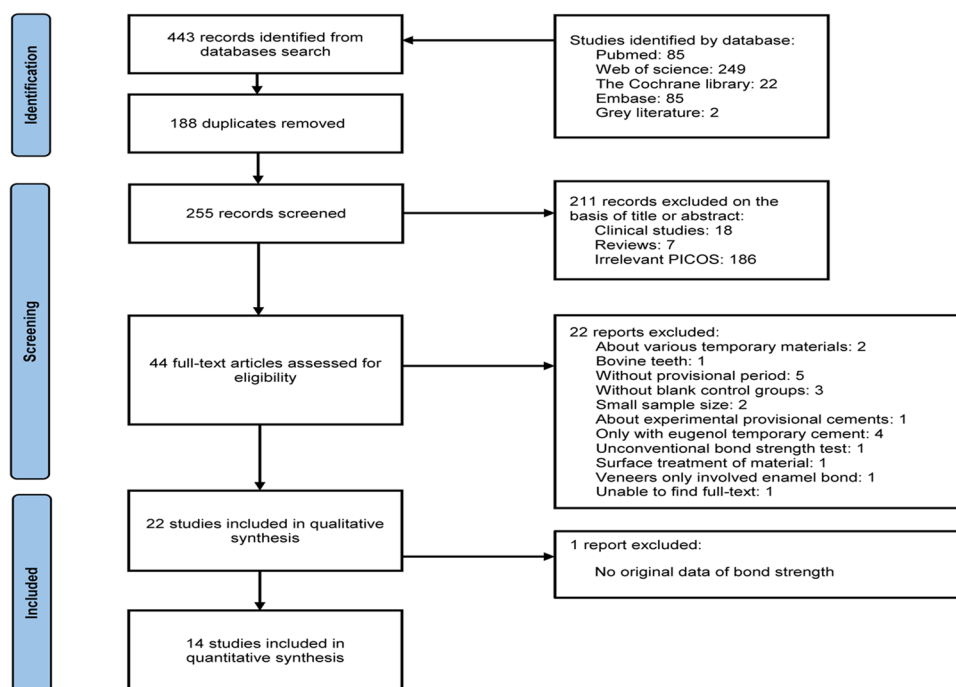
Table 1 Search strategy used in PubMed (MEDLINE)

| Search terms |
|---|
| #1: Bonding OR bond OR bonding efficacy OR dental bonding OR bond strength OR bonding effectiveness OR bonding performance OR bond performance OR adhesive properties OR micro-tensile strength OR microtensile strength OR microtensile bond strength OR bonding properties OR microshear bond strength OR shear bond strength |
| #2: Dentin* OR dentin [MESH] |
| #3: Provisional cement* OR temporary cement* OR interim cement* OR temporary restoration* OR provisional restoration* OR interim restoration* |
| #4: #1 and #2 and #3 |

Table 2 Bias risk assessment

| Study | Specimen randomization | Single operator | Operator blinded | Standardized specimens | Failure mode | Manufacturer's instructions | Sample size calculation | Caries free | Control group | Risk of bias |
|---------------------------|------------------------|-----------------|------------------|------------------------|--------------|-----------------------------|-------------------------|-------------|---------------|--------------|
| Maciel et al. 2021 | NO | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Hayashi et al. 2019 | NO | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Augusti et al. 2017 | YES | YES | NO | YES | YES | YES | NO | YES | YES | Low |
| Özcan et al. 2015 | YES | YES | NO | YES | YES | YES | YES | NO | YES | Low |
| Tajiri-Yamada et al. 2020 | YES | NO | NO | YES | YES | NO | NO | NO | YES | Medium |
| Hironaka et al. 2018 | NO | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Abo-Hamar et al. 2005 | YES | YES | NO | YES | YES | YES | NO | YES | YES | Low |
| Altintas et al. 2011 | YES | YES | NO | YES | YES | YES | NO | YES | YES | Low |
| Lima et al. 2017 | YES | NO | NO | NO | YES | YES | NO | YES | YES | Medium |
| Dillenburger et al. 2009 | YES | NO | NO | YES | YES | YES | NO | NO | YES | Medium |
| Erkut et al. 2007 | NO | NO | NO | NO | NO | YES | NO | YES | YES | High |
| Yap et al. 2001 | YES | NO | NO | NO | YES | YES | NO | YES | YES | Medium |
| Fiore-Júnior et al. 2010 | YES | YES | NO | YES | NO | YES | NO | YES | YES | Medium |
| Chiluka et al. 2017 | YES | NO | NO | NO | NO | YES | YES | NO | YES | Medium |
| Carvalho et al. 2014 | YES | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Bagis et al. 2011 | YES | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Santos et al. 2011 | YES | NO | NO | YES | NO | YES | NO | YES | YES | Medium |
| Januario et al. 2019 | YES | YES | NO | YES | YES | YES | NO | YES | YES | Low |
| Bremer et al. 2019 | YES | NO | NO | NO | YES | NO | NO | YES | YES | Medium |
| Falkensammer et al. 2014 | NO | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Zortuk et al. 2012 | YES | NO | NO | YES | YES | YES | NO | YES | YES | Medium |
| Latta et al. 2005 | No | No | No | No | No | No | No | No | Yes | High |

Fig. 1 PRISMA flowchart of study selection



those that met inclusion criteria. To assess the reliability of the findings, we used the parameters shown in Table 2. If the authors mentioned the parameter, the study received a “YES” for that specific parameter. In contrast, it gained a “NO.” The risk of bias was classified based on the sum of “YES” responses: 1 to 3 indicated a high risk, 4 to 6 indicated a medium risk, and 7 to 9 indicated a low risk [4].

Statistical analysis

Relevant data from the studies were extracted using Microsoft Word 2010 sheets. To retrieve the absent information, we contacted the authors of the included studies by e-mail. If they did not respond, we excluded the information [20]. Review Manager 5.4.1 (RevMan) was used to calculate the continuous data with the inverse variance method and effect method of the standardized mean difference. Statistical significance was measured using the Z-test ($p \leq 0.05$). The statistical heterogeneity was assessed by the Cochran Q -test with $I^2 \geq 50\%$ considered as a suggestion of low-to-moderate heterogeneity transition. When $I^2 \geq 50\%$ existed among groups, the random-effects model was used; otherwise, we chose the fixed-effects model.

Results

We found a total of 443 articles, where we screened 255, removing 188 duplicates. After we read the titles and abstracts, leaving 44 studies assessed for full text, we

systematically reviewed 22 articles meeting the criteria and excluded 1 article because we failed to have access to the full text (Fig. 1). The risk of bias is shown in Table 2. All articles used English and human molars as samples. The comparisons with blank controls are shown in Table 3, and other comparisons among removal ways without blank controls are displayed in Table 4.

For the meta-analysis, we only had immediate bond strength (< 48 h) as the outputs. To meet clinical needs, the temporary period time of less than 15-day groups was assessed, which meant 4-month groups were excluded [26]. We analyzed mechanical removal ways, ignoring different parameters applied. We excluded articles of high risk [25, 31]. The sample size input was the number of teeth.

Data from 14 articles underwent meta-analysis. The results of the meta-analysis are shown in Figs. 2, 3, 4, and 5. In Fig. 2, temporary cementation negatively affected the immediate bond strength (Z-test $p = 0.004$) by -0.45 MPa (95% CI = -0.75 to -0.14). However, the negative effect could be mitigated by the IDS strategy so that the temporary cementation had no significant impact on bond strength (Z-test $p = 0.46$, 95% CI = -0.55 to 0.25). In contrast, under DDS, temporary cementation statistically decreased bond strength (Z-test $p = 0.002$) by -0.69 MPa (95% CI = -1.13 to -0.26). The heterogeneity of IDS was acceptable ($I^2 = 38\%$), while DDS was moderate ($I^2 = 69\%$).

In Fig. 3, four temporary cements were considered, non-eugenol zinc oxide cement, resin cement, polycarboxylate cement, and calcium hydroxide cement. The last three groups indicated no statistically significant impact

Table 3 Characteristics of the studies compared with blank controls

| Author | Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|--|-------------|-------------|-------------|--|--|--|--|--|
| Maciel [21] N=9 (teeth) 2021 | MTBS | IDS | IDS | Etch-and-rinse system (Adper Scotchbond Multipurpose) | Non-eugenol zinc-oxide resin cement (RelyX Temp NE, 3 M) | 1 week | Periodontal curette 100 µm NaHCO ₃ sandblasting (5.51 bar; 10 s; 2.0 cm) 30 µm Al ₂ O ₃ sandblasting (5.51 bar; 10 s; 2.0 cm) Diamond bur | Water for 48 h |
| Hayashi [11] N=15 (teeth) 2019 | MTBS | IDS | IDS | All-in-one (Clearfil Universal Bond Quick) + flowable composite (Clearfil Majesty ES Flow) | None Non-eugenol zinc-oxide cement (TempBond NE, Kerr) None TempBond NE, Kerr None | None 1 week None 1 week None 24 h | Blank control Polishing brush Blank control Polishing brush Blank control Hand excavator | Cyclic load of 118 N over 90 cycles/min for 3 × 10 ⁵ cycles |
| Fiori-Júnior [22] N=10 (teeth) 2010 | SBS | DDS | DDS | None | Zinc oxide-based cement (eugenol-free) Calcium hydroxide-based None | None | Blank control | Water for 24 h |
| Augusti [23] N=3 (teeth) N=10 (specimen) 2017 | MSBS | IDS | IDS | Etch-and-rinse adhesive (OptiBond FL) | Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | None 24 h | Blank control Hand scaler 50 µm Al ₂ O ₃ air abrasion (20 s; 10 mm; 2.8 bar) 25 µm glycine air abrasion (20 s; 10 mm; 2.8 bar) Liquid chemical solvent of D-limonene | Water for 24 h |
| | | | | | Resin-based provisional agent (TempBond Clear, Kerr) | As above | Hand scaler 50 µm Al ₂ O ₃ air abrasion 25 µm glycine air abrasion | |
| | | | | | None | None | Blank control | |

Table 3 (continued)

| Author | Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|----------------|--|-------------|-------------|---------------------------------------|--|--|---|--------------------------------------|
| Özcan [14] | N = 3 (teeth) N = 12 (specimen) 2015 | MSBS | IDS | Etch-and-rinse adhesive (OptiBond FL) | Eugenol-free zinc oxide cement (Freegenol, GC) | 24 h | 50 μm Al ₂ O ₃ (2 bar; 5 s; 10 mm) 50 μm Al ₂ O ₃ (3.5 bar; 5 s; 10 mm) 30 μm SiO ₂ (2 bar; 5 s; 10 mm) 30 μm SiO ₂ (3.5 bar; 5 s; 10 mm) Prophylaxis paste using brush (1500 rpm; 15 s) Pumice-water slurry using brush (1500 rpm; 15 s) Blank control | Water for 24 h |
| Abo-Hamar [20] | N = 10 (specimen) 2005 | SBS | DDS | None | None Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | None 1 week | Blank control 30 μm alumina air-abrasion (4 bar; at 3 mm) Excavator | Water for 24 h |
| TAJIRI [24] | N = 6 (teeth) N = 30 (specimen) 2020 | MTBS | DDS | None | None Polycarboxylate cement (HY-BOND) | None 1 week | Blank control Air scaler (20 s) Rotating brush with water (20 s) | Water for 24 h, 1 month, or 6 months |
| Altintas [3] | N = 5 (teeth) N = 10 (specimen) 2011 | SBS | DDS | None | None Eugenol-free resin cement (Cavex) Calcium hydroxide cement (Dycal) Resin cement (TempBond Clear, GC) None | None 1 week As above As above None | Air scaler (20 s) + phosphoric acid (20 s) + water rinsing (20 s) + NaClO (60 s) Air scaler (20 s) + cleaner with MDP (10 s) + agitated with a micro-brush (10 s) Blank control Dental explorer Cleaning bur for 1 min Dental explorer Cleaning bur for 1 min Dental explorer Cleaning bur for 1 min Blank control | Water for 24 h |

Table 3 (continued)

| Author | Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|-----------------|----------------|-------------|-------------|--|--|-----------------------|--|---|
| Erkut [25] | N = 10 (teeth) | SBS | IDS | Bonding agent (Single Bond) | Non-eugenol zinc-oxide resin cement (RelyX Temp NE, 3 M) | 1 week | Scaler + fluoride-free pumice with water | Thermocycling × 1000 cycles between 5 °C and 55 °C + water for 1 week |
| | | | DDS | Resin-based (RelyX ARC one step) | As above | As above | As above | |
| Hironaka [12] | N = 10 (teeth) | MTBS | IDS | Self-etching (Clearfil SE Bond 2) + layer of Protect Liner F | Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | 2 weeks | Explorer + pumice with water | Artificial saliva for 24 h |
| | 2018 | | DDS | None | As above | As above | As above | |
| Dillenburg [26] | N = 3 (teeth) | MTBS | IDS | Etch and rinse (Adper Single Bond 2) | Non-eugenol zinc-oxide resin cement (RelyX Temp NE, 3 M) | 2 d | AO: excavator + 50 µm Al ₂ O ₃ (5.51 bar; 10 s; 2 cm) + air/water (10 s) | Artificial saliva for 24 h |
| | 2009 | | | | | 4 months | | |
| | | | | | | 2 d | PA: excavator + 37% phosphoric acid (15 s) + air/water (15 s) | |
| | | | | | | 4 months | | |
| | | | | | | 2 d | AO + PA: excavator + 50 µm Al ₂ O ₃ (5.51 bar; 10 s; 2 cm) + PA | |
| | | | | | | 4 months | | |
| | | | | | | None | Blank control | |
| | | | | | | 2 d | AO | |
| | | | | | | 4 months | | |
| | | | | | | 2 d | PA | |
| | | | | | | 4 months | | |
| | | | | | | 2 d | AO + PA | |
| | | | | | | 4 months | | |
| | | | | | | None | Blank control | |
| Yap [27] | N = 8 (teeth) | SBS | DDS | Etch and rinse (Prime & Bond NT) | Non-eugenol zinc-oxide resin cement (RelyX Temp NE, 3 M) | 1 week | An ultrasonic scaler + pumice-water slurry | Water for 24 h |
| | 2001 | | | None | Polycarboxylate eugenol-free cement | None | Blank control | |
| Chilulka [28] | N = 20 (teeth) | SBS | DDS | None | Zinc oxide cement (eugenol-free) | 1 week | Hand scaler | 100% humidity for 24 h |
| | 2017 | | | | | None | | |
| | | | | | | 2 weeks | | |
| | | | | | | None | Blank control | |

Table 3 (continued)

| Author | Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|---------------|---|-------------|-------------|--|---|-----------------------|---|------------------------------------|
| Carvalho [29] | N = 5 (teeth) 2014 | MTBS | DDS | None | Non-eugenol resin cement (RelyX Temp NE, 3 M) | 1 week | Stainless steel spatula + pumice-water (60 s) + water stream (20 s) | Water for 24 h |
| Bagis [30] | N = 5 (teeth) 2011 | MTBS | DDS | None | None | None | Blank control | |
| | | | | | Zinc oxide cement (Temp-Bond NE, Kerr) | 1 week | Excavator | Water for 24 h |
| LJMA [16] | N = 6 (teeth) N = 12 (specimen) 2017 | MSBS | IDS | Etch and rinse (Adper Scotchbond Multipurpose) | None | None | Blank control | |
| | | | | | Resin cement (RelyX Temp NE, 3 M) | 7 d | Hand scaler | 100% humidity environment for 24 h |
| | | | | | Resin cement (Provitemp) | | | |
| Latta [31] | N = 10 (teeth) 2005 | MSBS | IDS | Etch and rinse (Prime & Bond NT) | None | None | Blank control | |
| | | | | | Non-eugenol zinc oxide cement (Nogenol, GC) | 7 d | Dental instrument | Water for 24 h |
| | | | | | As above | As above | Dental instrument + phosphoric acid (PA) | |
| | | | | Self-etching (Clearfil SE Bond) | As above | As above | Dental instrument | |
| | | | DDS | None | As above | As above | Dental instrument + PA | |
| | | | | | None | None | Dental instrument | |
| | | | | | | | Blank control | |

Table 4 Characteristics of the studies compared with positive controls

| Author Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|--|-------------|-------------|---|---|-----------------------|--|---|
| Santos ¹³ N = 13 (specimen) 2011 | SBS | DDS | None | Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | 1 week | Excavator (10 s) 0.12% chlorhexidine digluconate (10 s) 40% polyacrylic acid (10 s) Pumice slurry (10 s) 50 µm Al ₂ O ₃ particles (6 bar; 10 s; 2 cm) | Water for 24 h |
| Januario ²⁹ N = 8 (teeth) 2019 | SBS | DDS | None | Non-eugenol zinc-oxide resin cement (RelyX Temp NE, 3 M) | 15 d | Excavator + air–water rinse (10 s; 5 mm) Excavator + pumice paste with brush (10 s) Excavator + 50 µm Al ₂ O ₃ air abrasion (2.5 bar; 20 s; at 90°; 10 mm) Excavator + NaHCO ₃ air abrasion (2.5 bar; 20 s; at 90°; 10 mm) Excavator + glycine powder air abrasion (2.5 bar; 20 s; at 90°; 10 mm) | Water for 90 d |
| Breemer ³¹ N = 10 (teeth) 2019 | SBS | IDS | Self-etching (Clearfil SE Bond) with 3 strategies | Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | 2 weeks | Pumice slurry (10 s) Pumice + 30 µm silicoated Al ₂ O ₃ (10 mm, angle 45 degrees, 2 bar) + silane coupling agent Pumice slurry (10 s) Pumice + 30 µm silicoated Al ₂ O ₃ + silane coupling agent Pumice slurry (10 s) | Thermocycling × 10,000 cycles, between 5 °C and 55 °C |
| Falkensammer ³² N = 11 (teeth) 2014 | SBS | DDS IDS | None Self-etching adhesive (AdheSE) | As above Non-eugenol zinc-oxide cement (TempBond NE, Kerr) | As above 1 week | As above Fluoride-free pumice paste (1000 rpm, 5 s) Silicoated Al ₂ O ₃ air abrasion (5 s; 2 cm; 90 degrees) (dry condition) Glycine air abrasion (5 s; 2 cm; 90 degrees) (wet condition) CaCO ₃ air abrasion (5 s; 2 cm; 90 degrees) (wet condition) | Saline solution for 24 h |
| | | DDS | None | As above | As above | Blank control | |

Table 4 (continued)

| Author Sample size | Methodology | IDS or DDS? | Dentin bonding adhesive | Temporary cement | Temporary period time | Temporary cement removal method | Aging process |
|---|-------------|-------------|-------------------------|--------------------------------------|-----------------------|--|---|
| Zortuk ³³ N = 9 (teeth) 2012 | SBS | DDS | None | Eugenol-free resin cement (Cavex) | 2 d | Dental explorer Pumice under water (1 min; 5000 rpm) Bur (1 min; 5000 rpm) With an Er:YAG laser under an air water spray at 200 mL, 20 Hz, tip diameter of 800 nm, a working distance of 0.5 mm | Thermocycling × 5000 cycles; between 5 °C and 55 °C |

on immediate bond strength (Z -test $p > 0.05$), while non-eugenol zinc oxide cement lowered the bond strength compared with the control group (Z -test $p = 0.02$) by -0.58 MPa (95% CI = -1.05 to -0.11). The first two groups' intragroup heterogeneity was higher, whereas that of polycarboxylate ($I^2 = 0$) and calcium hydroxide cements ($I^2 = 40\%$) was lower.

In Fig. 4, the Al_2O_3 abrasion and pumice were compared with the control group. The pumice strategy involved was a mixture of flour pumice and water (pumice slurry). Both comparisons were homogeneous ($I^2 = 0\%$). The Al_2O_3 abrasion restored the bond strength that decreased after temporary cement contamination (Z -test $p = 0.07$), while the bond strength of pumice removal slightly decreased in contrast with the control group (95% CI = -1.62 to 0).

In Fig. 5, the hand instruments included periodontal curette [21], hand scaler [23], or excavator [13], which were applied until the dentin surfaces were visually clean. Compared with hand instruments, Al_2O_3 abrasion significantly enhanced immediate bond strength (Z -test $p = 0.04$) by 0.67 MPa (95% CI = 0.03 to 1.31). However, Al_2O_3 abrasion was not superior to pumice on cleaning cements (Z -test $p = 0.39$). Their heterogeneity was acceptable ($I^2 \leq 50\%$).

We removed each article's findings to assess the sensitivity. In the DDS subgroup, after removing Fiori-Júnior [22], the overall I^2 decreased to 51%. In the resin temporary cement subgroup, after omitting Lima [16], there was a decline in intragroup heterogeneity (I^2 from 68 to 56%) and swift of effect (Z -test p from 0.11 to 0.007), leading to an 8% drop of overall I^2 . The altered result was that resin temporary cement lowered the bond strength by -0.73 MPa (95% CI = -1.26 to -0.2). The overall effect and heterogeneity were stable by removing others.

Discussion

The main objective of this review was to assess the influence of IDS or DDS, temporary cement types, and cleaning methods on immediate bond strength. For a conventional indirect restoration, the temporary cement inevitably contaminated collapsed dentin collagen [32], making it difficult to completely remove, especially when it penetrated deeply [30], complying with this finding that the bond strength under DDS significantly declined after temporary cementation. In sensitivity analysis, the study by Fiori-Júnior greatly increased heterogeneity because of its anomalous conclusion that the combination of zinc oxide cement and etch-and-rinse adhesive obtained higher bond strength than the non-contaminated group [22].

On the contrary, IDS eliminated the negative effect of temporary bonding with low heterogeneity, regardless of distinct luting systems and removal ways, which was supported by Augusti [23] and Mine [33]. The success of IDS was that it

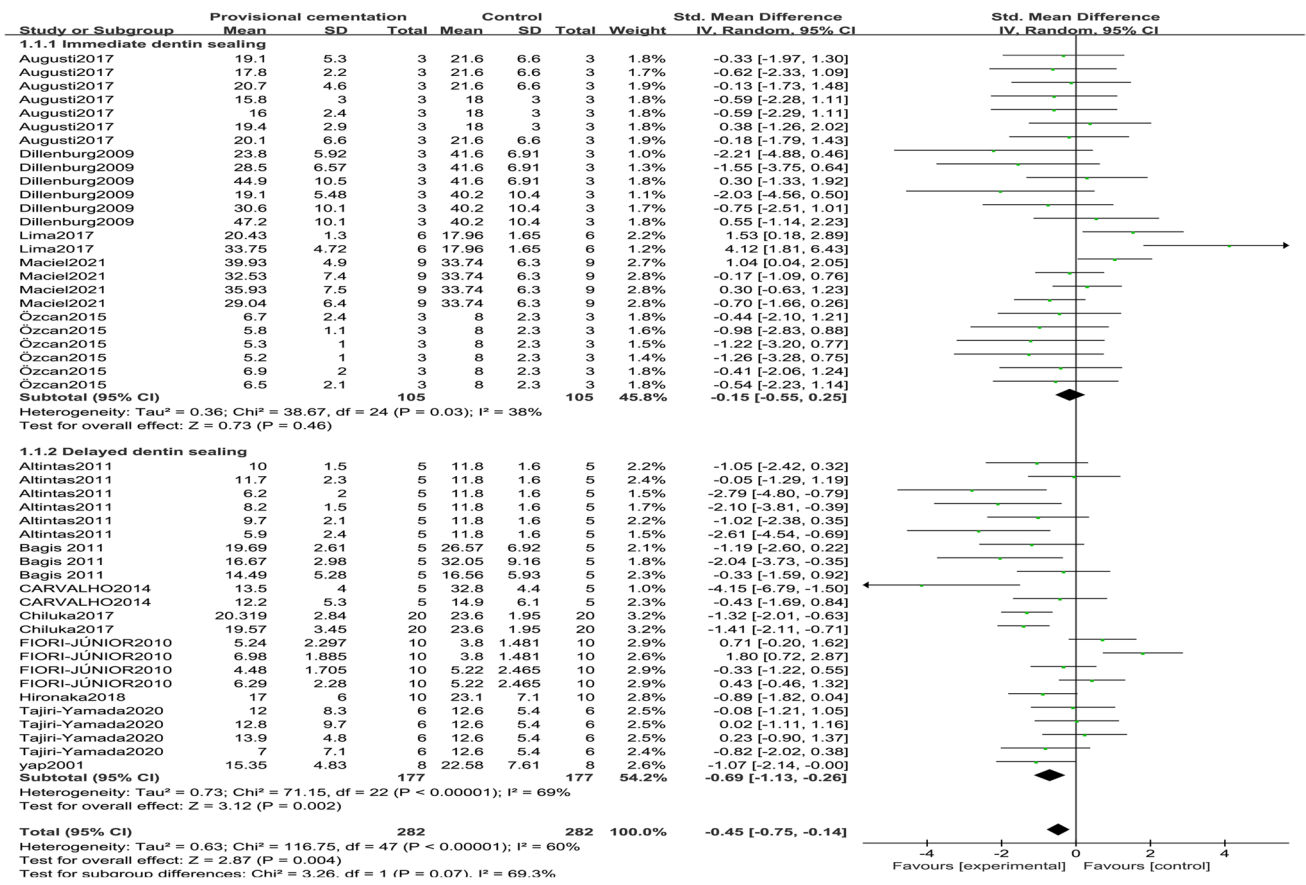


Fig. 2 Forest plot of global and subgroups (immediate or delayed dentin sealing) meta-analyses. The immediate (<48 h) dentin bond strength with and without temporary cementation (experiment and control groups)

pre-cured dentin adhesive immediately after tooth preparation and formed a hybrid layer better without contamination from temporary cements or blood [34–36], which was verified by its thick and continuous interfacial zone [12]. By micro-Raman spectroscopy, the particular interface peak (1330 cm⁻¹) of IDS revealed a chemical interaction of resin cement and dentin [12]. What is more, the polymerized IDS layer prevented the hybrid layer from degrading and kept it stable over time [26, 32, 37]. The IDS layer, in addition to acting as a stress breaker for external forces [11, 38], also released the stress of polymerization shrinkage, leading to higher fracture resistance and greater survival of veneer [39, 40].

This analysis only targeted immediate bond strength, but some other experiments with various aging processes have also validated the critical role of IDS [11, 25, 32]. Through the Weibull values, the failure predictability and bond durability of IDS outperformed DDS after aging [11]. By simulating over 14-month cyclic loading, though the IDS restored the bond strength after temporary cementation, its Weibull values decreased, suggesting contamination of the first pre-cured IDS layer might have a long-term negative impact on the bond strength [11, 17]. A thicker IDS layer

was recommended, considering the effect that Al₂O₃ abrasion might weaken the surface of IDS layer [26, 41]. In conclusion, the IDS technique could reduce the negative effects of temporary bonding in the short or long term compared with DDS.

Since temporary cement residue could impede the wetting and infiltrating ability of luting cements [30], cleaning them was required before proceeding to the next step [11]. This analysis concluded that resin-based, polycarboxylate, and calcium hydroxide cements had no significant effect on the immediate bond strength, except for non-eugenol zinc oxide cements that had an adverse impact. The subgroup difference showed no heterogeneity (I² = 0), supporting the pooled results, whereas the heterogeneity of polycarboxylate and calcium hydroxide cements subgroups was acceptable (I² < 50), but only 2 articles were included. The polycarboxylate cement was chemically bonded to dentin via an ion-exchange mechanism, making it difficult to remove. To adequately remove it, the applications of phosphoric acid (PA) plus NaClO or a cleaner containing 10-methacryloyloxydecyl dihydrogen phosphate (MDP) were more suitable and effective [24].

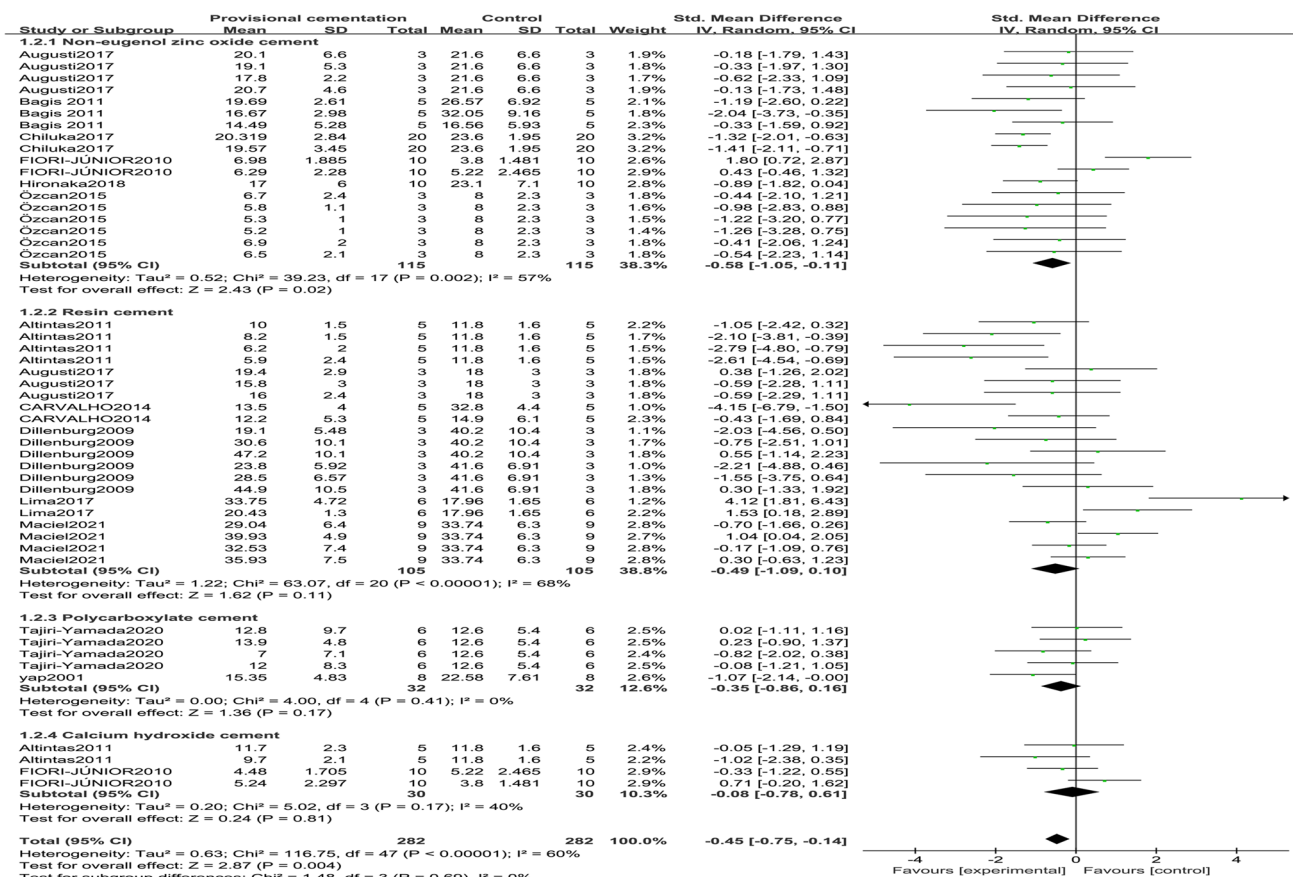


Fig. 3 Forest plot of global and subgroups among four temporary cements. The immediate (<48 h) dentin bond strength with and without temporary cementation (experiment and control groups)

The intragroup heterogeneity of non-eugenol zinc oxide cement was higher, owing to IDS or DDS selection and inconsistent final luting systems. The acidic primer of self-etching adhesive exacerbated the adverse impact of zinc oxide cement [30], because they might react with each other, impeding resin penetration [25]. The finding was in accordance with another study that the negative effect of self-etching system was stronger than etch-and-rinse procedure after temporary cementation [20]. Conversely, self-adhesive cement attained comparable bond strength before and after zinc oxide cement [30]. After all, when choosing zinc oxide cement, be aware that its performance with self-etching cement was undesirable.

Previous articles have advised against using resin-based temporary cement because of its high risk of bonding sealed dentin [5, 15], making it difficult to remove even by sandblasting [23]. Resin temporary cement would plug the dentinal tubules, interfering with subsequent adhesive penetration [3, 25]. However, this article concluded that the resin-based temporary cement had no significant effect on bond strength with moderate intragroup heterogeneity, most likely due to the exceptional research by Lima [16].

Abnormally, Lima indicated that the resin cement acquired significantly higher bond strength than the control group, possibly because the acrylate-based temporary cement interacted with unreacted monomers in oxygen-inhibited layer and promoted adhesion. After omitting this research, we concluded the opposite result that resin temporary cement was harmful to bond strength under most conditions. When followed by an etch-and-rinse system, resin temporary cement did not significantly undermine the immediate bond strength [14, 21, 23]. But we should avoid it due to its negative effects in most situations.

To enhance bond performance between the contaminated dentin and luting cement, we required to clean effectively [30], which primarily served two purposes: the adequate cleaning of residual cement and the roughening of dentin surface [23], thus promoting the wettability of adhesive. Merely manual instruments (hand scaler, periodontal curette, and excavator) were inefficient procedures to microscopically remove cements [23, 30, 42, 43], especially for resin-based cement [3, 23], so they were often the first step to remove cement, combining with other mechanical or

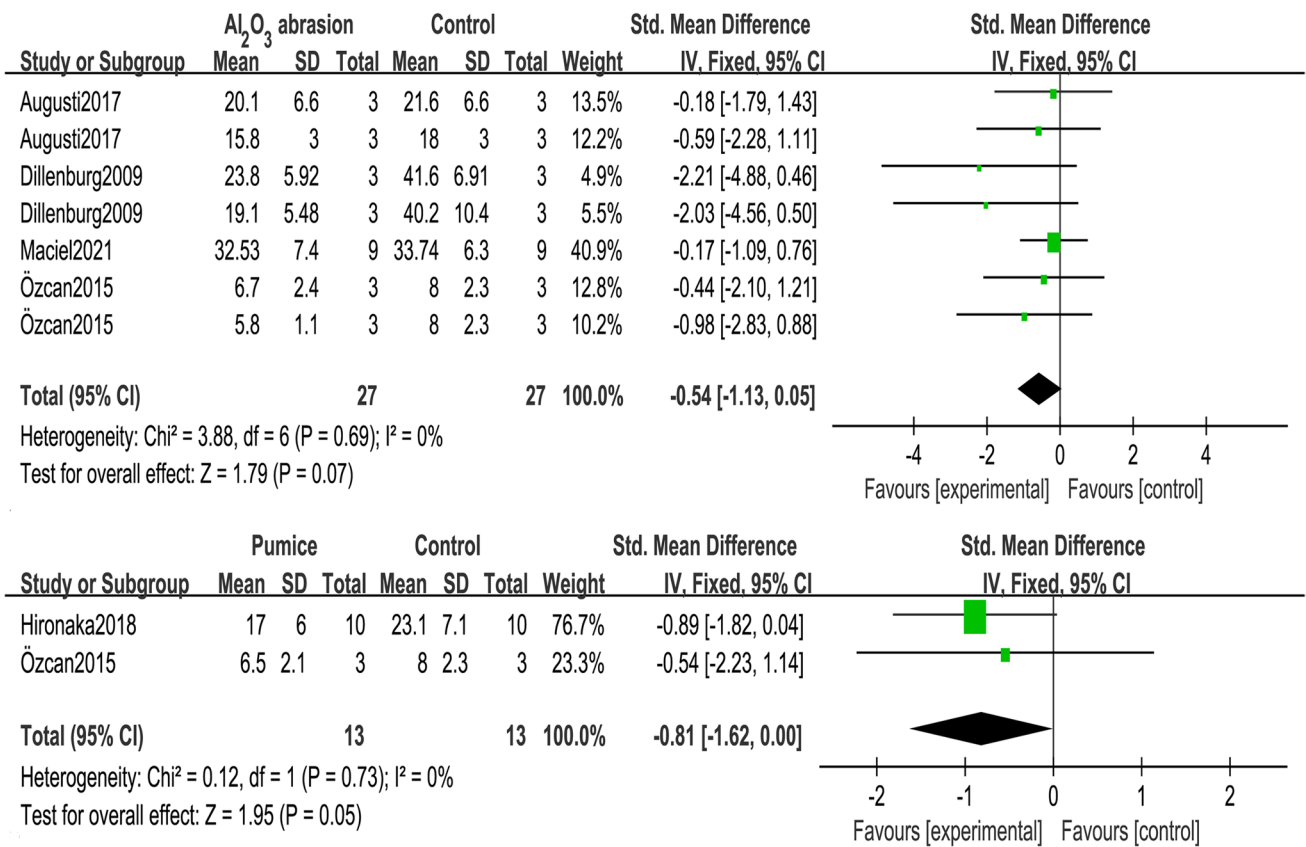
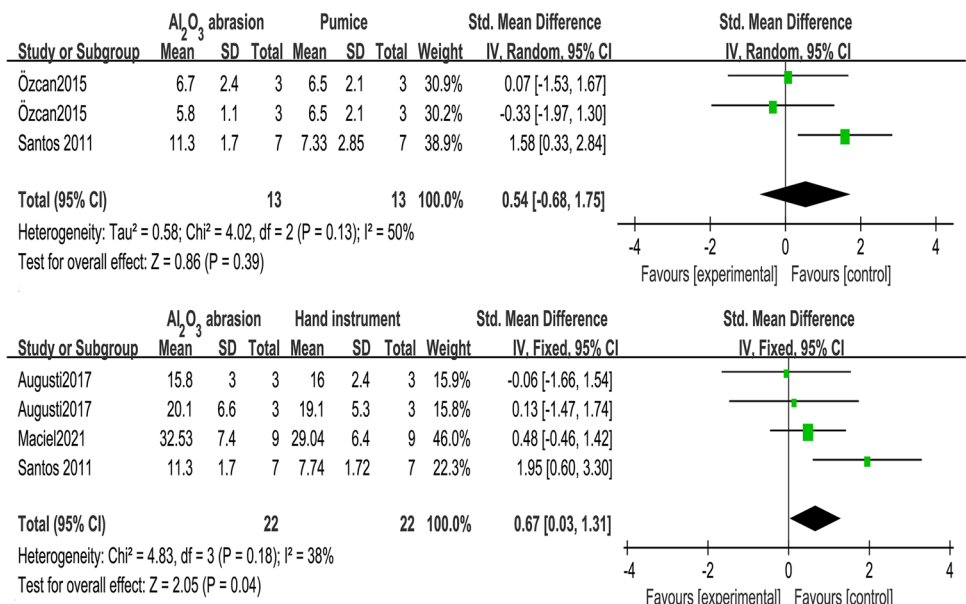


Fig. 4 Forest plots of subgroups of two mechanical removal ways (Al₂O₃ abrasion, pumice) on immediate (< 48 h) dentin bond strength with and without temporary cementation (experiment and control groups)

chemical removal ways to prevent the reduction of bond strength [12, 26].

Airborne particle abrasion of Al₂O₃ or glycine [13, 21, 23, 42] and Al₂O₃ abrasion plus PA produced the highest bond strength values [26]. The present analysis showed that

Fig. 5 Forest plots of subgroups of mechanical removal way comparisons (Al₂O₃ abrasion vs. pumice, Al₂O₃ abrasion vs. hand instruments) on immediate (< 48 h) dentin bond strength with temporary cementation



Al₂O₃ abrasion outperformed hand instruments on bond strength and achieved the comparable immediate bond strength to the control group. Januario also revealed that Al₂O₃ abrasion performed best after a 90-day period of water storage [42]. The probable reason for its advantage was that it created an irregular and rough dentin surface without residual cement, which improved wettability [13, 21, 42], similar to the mechanism of glycine powder [42]. Besides, since silicoated Al₂O₃ modified the surface by depositing silica particles, resulting in chemical interaction between silane and resin luting cement, it was applied with silane coupling agent, but which failed to have an advantage over pumice alone [32, 37]. For particle mentioned above, there was no analysis of which particle performed best due to a lack of comparisons. Conversely, abrasions of NaHCO₃ or CaCO₃ particles were ineffective in enhancing bond strength [42, 44]. Because NaHCO₃ abrasion left smear layer and its residue increased superficial pH, the reaction between PA and acidic monomer was interfered [42, 45, 46].

Another popular cleaning method was to apply pumice slurry or fluoride-free pumice paste with a rotary instrument to remove plaque and surface debris, particularly for unfilled adhesives [16, 42, 44]. In this meta-analysis, cleaning with pumice failed to achieve bond strength comparable to the control group, but there was no discernible difference between Al₂O₃ abrasion and pumice. Despite this, the application of pumice was discouraged owing to its less reliability than Al₂O₃ abrasion [14]. The possible reason was that partial dentin tubules were occluded by particle remnants by the force of rotation [13, 14], leading to less wettability and roughness [42, 44].

As to chemical removal ways, the additional use of PA might lower the bond strength [31], which could be improved by adding NaClO with its deproteinization function, dissolving the exposed collagen fibers and allowing the resin to penetrate further [47]. Others also found that the combination or a new cleaner containing MDP did not differ significantly from the control even after 6-month water storage. Not only did hydrophilic and hydrophobic groups of MDP act as a surfactant to clean, but also its remaining phosphoric group could interact with apatite and copolymerize with resin monomers [24]. The combination of PA and NaClO and a cleaner containing MDP were worth developing in terms of removal effectiveness and bond durability.

The limitation of the study was that we only analyzed immediate bond strength (< 48 h) because of the lacking and heterogeneous aging procedures. Second, we compared mechanically cleaning ways based on various parameters that might affect bond strength [48, 49]. Third, the number of similar literature included (only two) was insufficient for four comparisons. In future studies, aging processes and pulpal pressure need to be considered to simulate the oral environment [50, 51]. Further researches are required to determine which specific parameters of removal ways have

optimal cleaning effects. Additionally, CAD/CAM technique was prospective for development, making it possible to eradicate negative effects of temporary cementation by fabricating restorations on the same day. Consequently, the null hypothesis in this research was rejected.

Conclusions

Within the limitations of this analysis, the following conclusions were drawn. (1) IDS was extremely effective in eliminating the negative effects of temporary bonding in the short or long term, regardless of the luting systems and removal methods. (2) Compared with resin-based and non-eugenol zinc oxide cements, polycarboxylate and calcium hydroxide temporary cements led to higher bond strength. Self-etching adhesive would exacerbate the adverse impact of temporary cement. (3) Pumice and hand instrument removal ways failed to clean effectively and reliably, whereas Al₂O₃ abrasion achieved the comparable bond strength with the control group and outperformed hand instruments.

Supplementary Information The online version contains supplementary material available at <https://doi.org/10.1007/s00784-022-04790-6>.

Author contribution Jingyu Ding: data collection and assessment, writing, review, and editing. Yifu Jin: data assessment and screening. Shanshan Feng: data processing—retrieving and reviewing the full text. Huan Chen: visualization—making table. Yanyan Hou: visualization—editing figure. Song Zhu: project administration, management, and coordination responsibility for the research activity planning and execution. All authors have read and agreed to the published version of the manuscript.

Funding This study was funded by the Scientific and Technological Development Scheme of Jilin Province (No. YDZJ202202CXJD044).

Declarations

Competing interests The authors declare no competing interests.

Ethics approval Not applicable.

Consent to participate Not applicable.

Conflict of interest The authors declare no competing interests.

Open Access This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>.

References

- Morimoto S, Rebello de Sampaio FB, Braga MM, Sesma N, Özcan M (2016) Survival rate of resin and ceramic inlays, onlays, and overlays: a systematic review and meta-analysis. *J Dent Res* 95:985–994
- Elbishari H, Elsubeihi ES, Alkhoujah T, Elsubeihi HE (2021) Substantial in-vitro and emerging clinical evidence supporting immediate dentin sealing. *Jpn Dent Sci Rev* 57:101–110
- Altintas SH, Tak O, Secilmis A, Usumez A (2011) Effect of provisional cements on shear bond strength of porcelain laminate veneers. *Eur J Dent* 5:373–579
- Hardan L, Devoto W, Bourgi R, Cuevas-Suarez CE, Lukomska-Szymanska M, Fernandez-Barrera MA et al (2022) Immediate dentin sealing for adhesive cementation of indirect restorations: a systematic review and meta-analysis. *Gels* 8:1–17
- Qanungo A, Aras MA, Chitre V, Mysore A, Amin B, Daswani SR (2016) Immediate dentin sealing for indirect bonded restorations. *J Prosthodont Res* 60:240–249
- Abu Nawareg MM, Zidan AZ, Zhou JF, Chiba A, Tagami J, Pashley DH (2015) Adhesive sealing of dentin surfaces in vitro: a review. *Am J Dent* 28:321–332
- Clóvis P, Fernanda Alves F, Silva SRM, E, Geraldo Marques de M, Débora Pinto A, Rodrigo Furtado de C, (2013) Dentinal hypersensitivity: pre-hybridization as an alternative treatment. *Braz dent sci* 16:18–25
- Magne P, Kim TH, Cascione D, Donovan TE (2005) Immediate dentin sealing improves bond strength of indirect restorations. *J Prosthet Dent* 94:511–519
- Josic U, Sebold M, Lins RBE, Savovic J, Mazzitelli C, Maravic T et al (2022) Does immediate dentin sealing influence postoperative sensitivity in teeth restored with indirect restorations? A systematic review and meta-analysis. *J Esthet Restor Dent* 34:55–64
- Chung CW, Yiu CK, King NM, Hiraishi N, Tay FR (2009) Effect of saliva contamination on bond strength of resin luting cements to dentin. *J Dent* 37:923–931
- Hayashi K, Maeno M, Nara Y (2019) Influence of immediate dentin sealing and temporary restoration on the bonding of CAD/CAM ceramic crown restoration. *Dent Mater J* 38:970–980
- Hironaka NGL, Ubaldini ALM, Sato F, Giannini M, Terada RSS, Pascotto RC (2018) Influence of immediate dentin sealing and interim cementation on the adhesion of indirect restorations with dual-polymerizing resin cement. *J Prosthet Dent* 119:678e1–678e8
- Santos MJMC, Bapoo H, Rizkalla AS, Santos GC (2011) Effect of dentin-cleaning techniques on the shear bond strength of self adhesive resin luting cement to dentin. *Oper Dent* 36:512–520
- Özcan M, Lamperti S (2015) Effect of mechanical and air-particle cleansing protocols of provisional cement on immediate dentin sealing layer and subsequent adhesion of resin composite cement. *J Adhes Sci Technol* 29:2731–2743
- Samartzis T-K, Papalexopoulos D, Sarafianou A, Kourtis S (2021) Immediate dentin sealing: a literature review. *Clin Cosmet Inv Dent* 13:233–256
- Lima MF, Maciel CM, de Oliveira Correia AM, Griza S, Melo de Mendonca AA (2017) Effect of temporary cements on the bond strength of a resin cement to a pre-hybridized dentin. *Biosci J* 33:247–256
- Garcia IM, Leitune VCB, Ibrahim MS, Melo MAS, Matoses VF, Sauro S et al (2020) Determining the effects of eugenol on the bond strength of resin-based restorative materials to dentin: a meta-analysis of the literature. *Appl Sci-Basel* 10:1–23
- Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD et al (2021) The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *Rev Esp Cardiol* 74:790–799
- Armstrong S, Breschi L, Özcan M, Pfefferkorn F, Ferrari M, Van Meerbeek B (2017) Academy of dental materials guidance on in vitro testing of dental composite bonding effectiveness to dentin/enamel using micro-tensile bond strength approach. *Dent Mater* 33:133–143
- Abo-Hamar SE, Federlin M, Hiller KA, Friedl KH, Schmalz G (2005) Effect of temporary cements on the bond strength of ceramic luted to dentin. *Dent mater* 21:794–803
- Maciel CM, Souto TCV, Melo de Mendonça AA, Takeshita WM, Griza S, Silva-Concílio LR et al (2021) Morphological surface analysis and tensile bond strength of the immediate dentin sealing submitted to different temporary cement removal treatments. *Int J Adhes Adhes* 104
- Fiori-Júnior M, Matsumoto W, Silva RA, Porto-Neto ST, Silva JM (2010) Effect of temporary cements on the shear bond strength of luting cements. *J appl oral sci* 18:30–36
- Augusti D, Re D, Özcan M, Augusti G (2017) Removal of temporary cements following an immediate dentin hybridization approach: a comparison of mechanical and chemical methods for substrate cleaning. *J Adhes Sci Technol* 32:693–704
- Tajiri-Yamada Y, Mine A, Nakatani H, Kawaguchi-Uemura A, Matsumoto M, Hagino R et al (2020) MDP is effective for removing residual polycarboxylate temporary cement as an adhesion inhibitor. *Dent mater j* 39:1087–1095
- Erkut S, Küçükesmen HC, Eminkahyagil N, Imirzalioglu P, Karabulut E (2007) Influence of previous provisional cementation on the bond strength between two definitive resin-based luting and dentin bonding agents and human dentin. *Oper Dent* 32:84–93
- Dillenburg AL, Soares CG, Paranhos MP, Spohr AM, Loguercio AD, Burnett LH Jr (2009) Microtensile bond strength of pre-hybridized dentin: storage time and surface treatment effects. *J adhes dent* 11:231–237
- Yap AU, Shah KC, Loh ET, Sim SS, Tan CC (2001) Influence of eugenol-containing temporary restorations on bond strength of composite to dentin. *Oper Dent* 26:556–561
- Chiluka L, Shastry YM, Gupta N, Reddy KM, Prashanth NB, Sravanthi K (2017) An in vitro study to evaluate the effect of eugenol-free and eugenol-containing temporary cements on the bond strength of resin cement and considering time as a factor. *J Int Soc Prev Community Dent* 7:202–207
- Carvalho EM, Carvalho CN, Loguercio AD, Lima DM, Bauer J (2014) Effect of temporary cements on the microtensile bond strength of self-etching and self-adhesive resin cement. *Acta Odontol Scand* 72:762–769
- Bagis B, Bagis YH, Hasanreisioğlu U (2011) Bonding effectiveness of a self-adhesive resin-based luting cement to dentin after provisional cement contamination. *J Adhes Dent* 13:543–550
- Latta MA, Kelsey WP, Murdock CM (2005) Effects of adhesive liner and provisional cement on the bond strength of nickel/chrome/beryllium alloy cemented to dentin. *Quintessence Int* 36:817–823
- van den Breemer CR, Özcan M, Pols MR, Postema AR, Cune MS, Gresnigt MM (2019) Adhesion of resin cement to dentin effects of adhesive promoters, immediate dentin sealing strategies, and surface conditioning. *Int J Esthet Dent* 14:52–63
- Mine A, Nikaido T, Matsumoto M, Takagaki T, Ishida M, Ban S et al (2021) Status of decontamination methods after using dentin adhesion inhibitors on indirect restorations: an integrative review of 19 publications. *Jpn Dent Sci Rev* 57:147–153
- Brigagao VC, Barreto LFD, Goncalves KAS, Amaral M, Vitti RP, Neves ACC et al (2017) Effect of interim cement application on bond strength between resin cements and dentin: Immediate and delayed dentin sealing. *J Prosthet Dent* 117:792–798
- Leesungbok R, Lee SM, Park SJ, Lee SW, Lee DY, Im BJ et al (2015) The effect of IDS (immediate dentin sealing) on dentin

- bond strength under various thermocycling periods. *J Adv Prosthodont* 7:224–232
36. Ishii N, Maseki T, Nara Y (2017) Bonding state of metal-free CAD/CAM onlay restoration after cyclic loading with and without immediate dentin sealing. *Dent Mater J* 36:357–367
 37. van den Breemer C, Ozcan M, Cune MS, Ayres AA, Van Meerbeek B, Gresnigt M (2019) Effect of immediate dentin sealing and surface conditioning on the microtensile bond strength of resin-based composite to dentin. *Oper Dent* 44:E289–E298
 38. Murata T, Maseki T, Nara Y (2018) Effect of immediate dentin sealing applications on bonding of CAD/CAM ceramic onlay restoration. *Dent Mater J* 37:928–939
 39. Yazigi C, Kern M, Chaar MS (2017) Influence of various bonding techniques on the fracture strength of thin CAD/CAM-fabricated occlusal glass-ceramic veneers. *J Mech Behav Biomed Mater* 75:504–511
 40. Gresnigt MMM, Cune MS, Schuitemaker J, van der Made SAM, Meisberger EW, Magne P et al (2019) Performance of ceramic laminate veneers with immediate dentine sealing: an 11 year prospective clinical trial. *Dent Mater* 35:1042–1052
 41. Stavridakis MM, Krejci I, Magne P (2005) Immediate dentin sealing of onlay preparations: thickness of pre-cured dentin bonding agent and effect of surface cleaning. *Oper Dent* 30:747–757
 42. do NascimentoJanuario AB, Duarte Moura DM, de Medeiros Araujo AM, de Oliveira Dal Piva AM, Oezcan M, Bottino MA et al (2019) Effect of temporary cement removal methods from human dentin on zirconia-dentin adhesion. *J Adhes Sci Technol* 33:2112–2127
 43. Zortuk M, Gumus HO, Kilinc HI, Tuncdemir AR (2012) Effect of different provisional cement remnant cleaning procedures including Er:YAG laser on shear bond strength of ceramics. *J Adv Prosthodont* 4:192–196
 44. Falkensammer F, Arnetzl GV, Wildburger A, Krall C, Freudenthaler J (2014) Influence of different conditioning methods on immediate and delayed dentin sealing. *J Prosthet Dent* 112:204–210
 45. Soares CJ, Pereira JC, Souza SJ, Menezes MS, Armstrong SR (2012) The effect of prophylaxis method on microtensile bond strength of indirect restorations to dentin. *Oper Dent* 37:602–609
 46. Nishimura K, Nikaido T, Foxton RM, Tagami J (2005) Effect of air-powder polishing on dentin adhesion of a self-etching primer bonding system. *Dent Mater J* 24:59–65
 47. Watanabe EK, Yatani H, Ishikawa K, Suzuki K, Yamashita A (2000) Pilot study of conditioner/primer effects on resin-dentin bonding after provisional cement contamination using SEM, energy dispersive x-ray spectroscopy, and bond strength evaluation measures. *J Prosthet Dent* 83:349–355
 48. Chaiyabutr Y, Kois JC (2008) The effects of tooth preparation cleansing protocols on the bond strength of self-adhesive resin luting cement to contaminated dentin. *Oper dent* 33:556–563
 49. Chinelatti MA, do Amaral THA, Borsatto MC, Palma-Dibb RG, Corona SAM (2007) Adhesive interfaces of enamel and dentin prepared by air-abrasion at different distances. *Appl Surf Sci* 253:4866–4871
 50. Santana VB, de Alexandre RS, Rodrigues JA, Ely C, Reis AF (2016) Effects of immediate dentin sealing and pulpal pressure on resin cement bond strength and nanoleakage. *Oper Dent* 41:189–199
 51. Flury S, Peutzfeldt A, Schmidlin PR, Lussi A (2017) Exposed dentin: influence of cleaning procedures and simulated pulpal pressure on bond strength of a universal adhesive system. *PLoS ONE* 12:1–10

Publisher's note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.