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Review Article

A Systematic Review on the Color Stability of Maxillofacial Silicone **Materials after Disinfection and Aging Procedures**

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ABSTRACT

Maxillofacial prostheses are intended to restore the appearance of individuals and ensure the maintenance of their normal psychological state and quality of life. The longevity of these silicone prostheses is closely related to their color and mechanical properties. To systematically evaluate the current research on the color stability of maxillofacial silicone materials after disinfection and aging for 10 minutes, a comprehensive search was conducted on Google Scholar and PubMed, covering studies published between January 2000 and December 2020. In addition, a manual search of standard dental journals from 2000 to 2020 was carried out using keywords such as color stability, maxillofacial silicone, disinfection, and aging. A total of 52 studies were identified, and 6 in vitro studies were included in this review. The results showed that the color stability of maxillofacial silicone materials is affected by disinfection and aging processes.

Keywords: Maxillofacial silicone, Nanoparticles, Aging process, Disinfection, Colour stability, Maxillofacial prosthesis

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Introduction

Color is a key aspect valued by patients who receive maxillofacial prostheses [1, 2]. The primary goal of a maxillofacial prosthodontist is to restore the patient's appearance, boost their self-esteem, and support them in leading as normal a life as possible [3]. The typical lifespan of maxillofacial silicone is about one year. To prevent contamination, patients are required to clean their prosthesis daily for 3 to 5 minutes using a brush [4]. Various disinfection methods and materials are available for cleaning maxillofacial prostheses, with chlorhexidine being regarded as one of the most effective disinfectants in dentistry [5].

Chemical disinfection can lead to alterations in the properties of maxillofacial silicone materials used to create prostheses, making it crucial to assess these changes during the fabrication process when chemical disinfection intended. Additionally, disinfectants must be non-reactive to human tissues and preserve the properties of the maxillofacial silicones [6]. Various disinfectants, such as 2% to 4% chlorhexidine, 1% sodium hypochlorite, neutral soap, and cleansing tablets, have been utilized in numerous studies [1, 4, 7].

Nanomaterials like titanium dioxide, fumed silica, silane silica, cerium oxide, zinc oxide, magnesium silicate, polyhedral silsesquioxane, and tulle have been employed as reinforcement agents in maxillofacial silicone. These additions have been found to enhance various mechanical properties of silicone, including tensile strength, tear strength, elongation, hardness, dimensional stability, and color retention [8].

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There has been a lack of systematic reviews focusing on the color stability of maxillofacial silicone after disinfection. Consequently, this review aimed to investigate how disinfection and aging over 252, 504, and 1004 hours affect the color stability of maxillofacial silicone. The primary research question guiding this review was: "What impact does the disinfection solution have on the color stability of maxillofacial silicones?"

Materials and Methods

This review was conducted following the PRISMA guidelines [9]. A thorough electronic search was performed on PubMed and Google Scholar for relevant articles published from January 2000 to December 2018, using the search terms "color stability of maxillofacial silicone" and "disinfection maxillofacial silicone," both individually and in combination with "AND" or "WITH." Furthermore, a manual search was carried out for articles published between January 2000 and December 2020 in journals such as the Journal of Prosthetic Dentistry, International Journal of Prosthodontics, Journal of Prosthodontics, Journal of Prosthodontic Research, Journal of Advanced Prosthodontics, Journal of Indian Prosthodontic Society, and Indian Journal of Dental Research.

Eligibility criteria

The studies selected for inclusion were in vitro investigations focused on color stability, published in English. Exclusion criteria encompassed animal studies, case reports, and review articles.

Study selection

2 reviewers, SD and ASC, independently screened the titles. Studies that fulfilled the inclusion criteria were then collected.

Results and Discussion

A total of 52 studies were found through database searches, with 18 from PubMed/Medline and 34 from Google Scholar. After applying the inclusion/exclusion criteria and eliminating duplicate articles, 12 studies were excluded. Ultimately, 6 studies were selected for the systematic review (**Figure 1**).

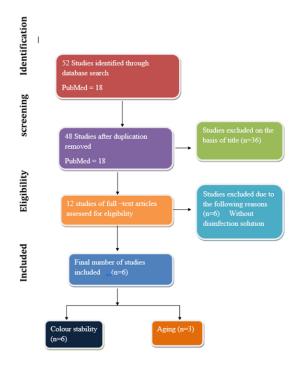


Figure 1. Diagram of the search strategy

This systematic review aimed to assess the color stability of maxillofacial silicone materials following disinfection and aging processes. Recent studies have indicated that the addition of oil-based pigments, nanoparticles, and opacifiers to silicone materials enhances the longevity of maxillofacial silicone prosthetics, improves color stability, and provides protection against UV rays [6, 10-13].

Disinfection refers to the process of removing microorganisms from surfaces using chemical agents. It is essential that this process does not harm human tissues and that it preserves the properties of silicone. Key factors in choosing disinfectants include their antimicrobial effectiveness, compatibility with the material, and their ability to maintain the material's properties [14]. Various disinfectants, including neutral soap, sodium hypochlorite solution, 4% chlorhexidine, Efferdent tablets, plant extracts, and commercial disinfecting solutions, have been shown to cause some changes in the properties of maxillofacial silicone materials [6, 15-17].

The aging device is used to simulate environmental conditions such as heat, humidity, and radiation to observe how materials respond under natural conditions [7]. Photooxidation refers to the potential of heat and light to alter the chemical composition of materials. Researchers have recognized that changes in the properties of maxillofacial silicone materials are largely due to the effects of ultraviolet radiation on their mechanical and optical characteristics, which

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allows for the assessment of how these materials interact with their environment [18-21].

In this systematic review, the color stability of maxillofacial silicone materials was evaluated using an

ultraviolet-visible reflection spectrophotometer (**Table** 1).

Table 1. Characteristics of studies included

Reference	Material	Instrument	Disinfectant Solution	Duration	Aging	Significance
Goiato et al. [2]	MDX 4-4210 Silastic 732	Visible UV Reflectance E Spectrophotometer	Neutral soap Efferdent	Three days a week for sixty days	Nil	Significant Not significant
Goiato et al. [22]	MDX4-4210 MDX4-4210 with barium sulfate MDX4-4210 with titanium	Visible Ultraviolet Reflection Spectrophotometer	Efferdent effervescent tablet Neutral soap 4% chlorhexidine gluconate	Three times a week for two months for fifteen minutes	252, 504, and 1008 h of artificial aging	Significant Significant Significant
Haddad et al. [23]	dioxide MDX4-4210 silicone MDX4-4210 silicone pigmented with ceramic powder MDX4-4210 silicone pigmented with BaSO4 MDX4-4210 silicone pigmented with BaSO4 and	UV reflection Spectrophotometer	Neutral soap Efferdent evervescent Tablets 4% chlorhexidine	Three days a week for sixty days	252, 504, and 1008 h of artificial aging	Significant Significant Significant
Pesqueir <i>et</i> al. [6]	2. Silastic MDX 4-4210 (ceramic powder) 3. Silastic MDX 4-4210 (makeup	Visible ultraviolet Reflection Spectrometer	neutral soap effervescent tablets	Three days a week for sixty days	252, 504, and 1008 h of artificial aging	Significant Significant
Eleni <i>et al</i> . [16]	polydimethylsiloxane (PDMS) chlorinated polyethylene (CPE)	MiniScan XE Spectrophotometer	Microwave sodium hypochlorite, neutral soap Commercial disinfecting soap	Five minutes per day for one year (thirty hours)	Nil	Significant Not clinically acceptable Not clinically acceptable Not clinically acceptable
Guiotti et al. [21]	MDX4-4210 (polydimethylsiloxane) Functional Intrinsic II – silicone coloring system (medium-shade) Functional intrinsic II – silicone coloring system (dark shade) Dry opacifier (Zinc oxide – ZnO)	Ultraviolet-visible Reflection Spectrophotometer	Saline solution Neutral soap Chlorhexidine 4% Hydrastis canadensis (Hydrastis) Cymbopogon nardus (Cytronella	Daily for thirty days for ten minutes	1008 hours	Not clinically acceptable

The analysis of maxillofacial silicone materials' color stability, following the addition of pigments and opacifiers, was conducted after disinfection with both conventional and plant-based solutions over 30 days, combined with accelerated aging for 1008 hours. The showed that MDX 4-4210 demonstrated significant color changes, deemed clinically unacceptable, regardless of the disinfection method used [20]. In a separate experiment, the color stability of polydimethylsiloxane (PDMS) chlorinated polyethylene (CPE) materials was tested after disinfection and microwave exposure. The findings suggested that microwave disinfection was the preferred method for both materials when used with sodium hypochlorite solution [16]. For maxillofacial silicone MDX 4-4210, variations in pigmentation revealed that ceramic powder provided superior color stability compared to both makeup pigments and colorless versions, after disinfection and aging over 252, 504, and 1008 hours [6]. A different study on maxillofacial elastomer materials mixed with opacifiers or nanoparticles, subjected to artificial aging and disinfection, found that samples incorporating BaSO4 opacifiers and ceramic nanoparticles exhibited the best color stability [21]. Additionally, when testing the color stability of MDX 4-4210 after disinfection and accelerated aging, chlorhexidine caused more significant color changes than neutral soap or Efferdent tablets. The study also showed that accelerated aging had a notable effect on the color stability of all the silicone materials. Among these, barium sulfate opacifiers were more stable compared to titanium dioxide [23]. Lastly, when Silastic 732 RTV and MDX 4-4210 were disinfected with neutral soap and Efferdent tablets, the neutral soap exhibited a smaller effect on color stability than the Efferdent tablets [22].

Conclusion

The authors concluded that the color stability of maxillofacial silicone materials was influenced by both the disinfection solution and the aging process. Among the various disinfectants tested, chlorhexidine caused the most significant color changes in the silicone materials during different aging intervals.

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