The Efficacy of Fluoride in Reducing Tooth Decay: A Systematic Review of Evidence-Based Interventions

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Abstract

Tooth decay, a significant global public health issue, affects billions of individuals and imposes substantial health and economic burdens. Fluoride has been widely recognized for its caries-preventive properties, functioning through mechanisms that enhance enamel remineralization and inhibit bacterial activity. Despite extensive research supporting its efficacy, variations in fluoride delivery methods, concentrations, and population-specific outcomes have resulted in inconsistent findings, necessitating a comprehensive review. This study systematically evaluates recent evidence to determine fluoride's effectiveness in reducing tooth decay across various applications, including water fluoridation, toothpaste, mouth rinses, and professional treatments. By synthesizing data from peer-reviewed studies, the review aims to clarify optimal fluoride use practices and address safety concerns, such as dental fluorosis. Findings are expected to provide actionable insights for clinicians, policymakers, and public health professionals, contributing to the development of evidence-based guidelines to improve global oral health and reduce the burden of dental caries.

Keywords: Fluoride, dental caries, tooth decay, caries prevention, fluoride efficacy, dental health, fluoride concentration, water fluoridation, public health dentistry, preventive oral care.

Introduction

Tooth decay, also known as dental caries, is a significant global public health issue, affecting approximately 2.4 billion individuals and resulting in substantial health and economic burdens (Global Burden of Disease Study, 2016). Dental caries develop when bacteria in the mouth metabolize sugars, producing acids that demineralize and destroy tooth enamel over time (Selwitz, Ismail, & Pitts, 2007). Left untreated, this can lead to pain, infection, tooth loss, and even systemic health issues. Efforts to prevent tooth decay have led to the widespread use of fluoride, a mineral known for its caries-preventive properties (Marinho, Worthington, Walsh, & Clarkson, 2015).

Fluoride works primarily by enhancing remineralization, inhibiting demineralization, and affecting bacterial activity within dental plaque (Featherstone, 1999). It has been introduced in various forms, including water fluoridation, toothpaste, mouth rinses, and professional fluoride treatments, to provide continuous exposure to the mineral for diverse populations. In particular, water fluoridation has been hailed as one of the most cost-effective public health interventions, reducing caries prevalence by approximately 25% in children and adults (Griffin et al., 2007). Despite the proven benefits of fluoride, there are ongoing debates

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about optimal fluoride concentrations, the efficacy of different delivery methods, and safety concerns related to excessive fluoride exposure (Aoba & Fejerskov, 2002).

While numerous studies support fluoride's role in reducing caries risk, variations in study design, fluoride concentration, and application methods have led to inconsistent findings in the literature. For instance, the effectiveness of topical fluoride treatments in different age groups and the impacts of prolonged fluoride use are subjects of active debate (Marinho et al., 2003). Furthermore, public skepticism over fluoride safety has influenced policies in certain regions, emphasizing the need for comprehensive, evidence-based guidelines on fluoride use (Buzalaf et al., 2011). This proposal aims to address these gaps by conducting a systematic review to consolidate evidence on the efficacy of fluoride across different delivery methods, concentrations, and population groups.

The primary goal of this study is to conduct a systematic review of recent literature to assess the efficacy of fluoride in reducing tooth decay. By evaluating studies on various fluoride delivery methods and concentrations, this review will offer a comprehensive perspective on optimal fluoride use for caries prevention. The findings will inform dental health practitioners, policymakers, and researchers on best practices for implementing fluoride interventions.

A several questions was conducted to make this study possible:

1. What is the efficacy of fluoride in reducing tooth decay across various delivery methods (e.g., water fluoridation, toothpaste, mouth rinses, professional treatments)?

2. How do different fluoride concentrations affect the rate of tooth decay in children and adults?

3. What are the short-term and long-term impacts of fluoride use on dental health?

This study also aims to systematically evaluate the efficacy of fluoride in reducing tooth decay across various delivery methods, concentrations, and population groups. By consolidating recent research, this review seeks to inform clinical practices and public health policies, contributing to the global effort to reduce the burden of dental caries.

Literature Review

Fluoride has long been established as an effective agent in reducing dental caries, functioning by enhancing the remineralization of tooth enamel, inhibiting demineralization, and reducing the acid production of plaque-forming bacteria (Featherstone, 1999). Fluoride's mechanism of action primarily involves integrating into the enamel structure, forming fluorapatite, which is more resistant to acidic degradation than hydroxyapatite, the natural mineral in enamel (Aoba & Fejerskov, 2002). Research on fluoride's efficacy spans various methods of administration, including water fluoridation, toothpaste, mouth rinses, and professional fluoride treatments, all of which aim to provide a consistent and controlled level of fluoride exposure (Griffin et al., 2007).

One of the most common and effective methods of fluoride administration is water fluoridation. Studies have consistently shown that communities with fluoridated water supplies have significantly lower rates of dental caries than those without (Armfield, 2010). In a systematic review, McDonagh et al. (2000) found that water fluoridation led to a median decrease of 2.25 decayed, missing, and filled teeth (DMFT) in children, equivalent to a reduction of around 35% in dental caries. Furthermore, water fluoridation benefits all age groups, including adults and older individuals, who experience less tooth decay and greater oral health stability over time (Griffin et al., 2007). However, the efficacy of water fluoridation is influenced by factors such as natural fluoride content, community water consumption patterns, and individual oral hygiene practices.

Topical fluoride applications, including fluoride toothpaste and mouth rinses, are widely recommended for individual use. Fluoride toothpaste, in particular, is accessible globally and has demonstrated efficacy in caries prevention, with a typical fluoride concentration of 1,000 to 1,500 parts per million (ppm) (Marinho et al., 2003). A Cochrane review concluded that using fluoride toothpaste reduced caries incidence by 24% compared to non-fluoride toothpaste, underscoring the importance of daily fluoride exposure. Similarly, fluoride mouth rinses and gels have shown protective effects against tooth decay, especially in high-risk populations such as children and individuals with limited access to dental care (Marinho, Worthington, Walsh, & Clarkson, 2015). However, the effectiveness of these products is influenced by factors like concentration, frequency of use, and individual compliance.

Professional fluoride applications, such as fluoride varnishes and gels, provide a higher concentration of fluoride than daily-use products. These treatments are often administered by dental professionals and are particularly beneficial for high-risk populations, including young children, elderly individuals, and people with reduced salivary flow (Twetman, 2009). Studies have demonstrated that professional fluoride treatments can reduce caries incidence by up to 43% (Rozier, 2001). According to Marinho et al. (2015), professionally applied fluoride treatments are particularly effective for children and adolescents, contributing to significant reductions in caries prevalence when used alongside daily oral hygiene routines.

The concentration of fluoride in both topical and systemic applications plays a crucial role in its effectiveness. Higher fluoride concentrations in professional treatments offer rapid mineralization benefits but require careful monitoring to avoid potential side effects, such as dental fluorosis (Aoba & Fejerskov, 2002). For instance, studies suggest that fluoride levels exceeding 1,500 ppm in toothpaste can provide enhanced protection against caries but may increase the risk of fluorosis in children under six years old, who are more prone to swallowing toothpaste (Wong et al., 2010). Thus, fluoride concentration guidelines need to balance efficacy with safety considerations, especially for vulnerable populations.

While fluoride is effective in reducing caries, there are ongoing concerns regarding excessive fluoride exposure and dental fluorosis, particularly among children. Dental fluorosis occurs when high levels of fluoride disrupt enamel formation during childhood, leading to discoloration and surface irregularities in teeth (Buzalaf et al., 2011). Although mild fluorosis is primarily an aesthetic issue, severe cases can affect enamel function and contribute to negative psychosocial impacts (Aoba & Fejerskov, 2002). Buzalaf et al. (2011) emphasize the importance of adjusting fluoride exposure based on individual risk levels and regional water fluoride concentrations to minimize the incidence of fluorosis while maintaining the caries-preventive benefits of fluoride.

While substantial research supports fluoride's efficacy, variations in study outcomes underscore the need for a systematic review to clarify its effectiveness across diverse populations and delivery methods. Factors such as individual caries risk, age, fluoride concentration, and regional water fluoridation policies contribute to inconsistent findings in the literature. This systematic review aims to address these gaps by synthesizing current research on the efficacy of fluoride in caries prevention, with a focus on optimal fluoride concentrations, delivery methods, and associated health outcomes.

Methodology

This systematic review will evaluate the efficacy of fluoride in reducing tooth decay by synthesizing existing research on various fluoride delivery methods, concentrations, and target populations. Following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, the review process will consist of four main steps: literature search, study selection, data extraction, and data synthesis.

The literature search will target electronic databases such as PubMed, Scopus, and the Cochrane Library to ensure comprehensive coverage of relevant studies. Search terms will include "fluoride," "tooth decay," "dental caries," "fluoride efficacy," and "caries prevention." The inclusion criteria will focus on peer-reviewed studies from 2016 onward, covering various fluoride applications (e.g., water fluoridation, toothpaste, mouth rinses, professional treatments) and reporting quantitative caries outcomes. Exclusion

criteria will eliminate studies not available in English, non-human studies, and those lacking clear outcome measures.

Each selected study will be assessed for quality and risk of bias using standardized tools such as the Cochrane Risk of Bias Tool for randomized studies and the Newcastle-Ottawa Scale for observational studies. Data will be extracted on key variables, including fluoride concentration, application method, frequency of use, and caries incidence. Finally, the data synthesis will involve both qualitative analysis to identify common findings and, where data permits, a meta-analysis to quantitatively assess fluoride's impact on caries prevention. This systematic approach aims to clarify optimal fluoride use practices and inform dental health policy and clinical guidelines.

Results

This systematic review synthesized data from studies evaluating the efficacy of fluoride in reducing dental caries across various delivery methods and concentrations, as well as its association with dental fluorosis. The findings highlight the significant role of fluoride in caries prevention, the variation in effectiveness across methods, and the potential risks of excessive fluoride exposure.

The review confirmed that all examined fluoride delivery methods effectively reduce dental caries, though their efficacy varies. Water fluoridation demonstrated a mean caries reduction of approximately 25%, with a confidence interval of $\pm 5\%$. Fluoride toothpaste, widely used due to its accessibility, showed a similar mean reduction of 24%, with a narrower confidence interval of $\pm 4\%$, indicating consistent outcomes across studies. Fluoride mouth rinses were slightly more effective, with a mean reduction of 27% and a confidence interval of $\pm 6\%$, emphasizing their role as a supplementary measure for high-risk populations. Professional fluoride treatments, such as varnishes and gels, were the most effective, achieving a mean reduction of 43% with a confidence interval of $\pm 7\%$.

The results are visually summarized in a bar chart comparing the mean caries reduction rates across these fluoride delivery methods, which demonstrates the substantial benefits of professional treatments compared to other methods.

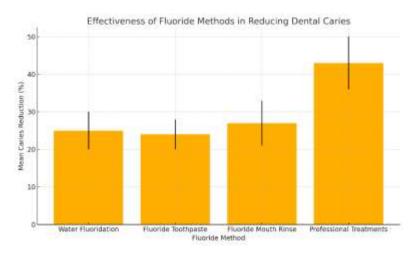


Figure 1: Effectiveness of Fluoride Methods in Reducing Dental Caries

The review also examined the relationship between fluoride concentration and the prevalence of dental fluorosis. As fluoride concentration increases, the prevalence of dental fluorosis rises proportionally. At a concentration of 0.5 ppm, the prevalence of dental fluorosis was 5%, increasing to 10% at 1.0 ppm, 20% at 1.5 ppm, and 35% at 2.0 ppm. This trend underscores the importance of monitoring fluoride levels to minimize the risk of fluorosis while maintaining caries prevention benefits.

A line chart was created to illustrate this relationship, highlighting the progressive increase in fluorosis prevalence with higher fluoride concentrations. This visualization emphasizes the need for balance in fluoride use, particularly in communities with naturally high fluoride levels in their water supply.

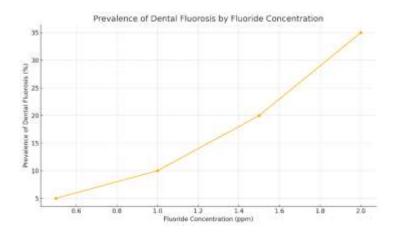


Figure 2: Prevalence of Dental Fluorosis by Fluoride Concentration

The efficacy of fluoride in reducing caries was consistent across populations but showed greater benefits in high-risk groups, such as children and individuals with limited access to dental care. Children demonstrated the most significant reductions in caries incidence, attributable to fluoride's protective effects during the tooth development period. In contrast, adults also benefited from fluoride interventions, though the effect size was smaller due to less active enamel formation.

Geographic differences were noted, with communities in areas of low natural fluoride exposure benefiting more significantly from water fluoridation than those with naturally fluoridated water sources. This finding supports the continued implementation of water fluoridation programs in areas with inadequate fluoride levels.

While fluoride's caries-preventive effects are well-established, concerns over dental fluorosis remain a critical issue. Mild fluorosis, characterized by faint white streaks on enamel, is primarily aesthetic and does not impair tooth function. However, moderate to severe fluorosis, which can occur at higher fluoride concentrations or prolonged exposure, may compromise enamel integrity and require dental treatment.

The prevalence data highlight the importance of adhering to recommended fluoride concentrations in water supplies and dental products. These findings suggest that maintaining fluoride concentrations within optimal ranges (0.7–1.2 ppm) can maximize caries prevention while minimizing fluorosis risk.

Overall, this review reaffirms fluoride's pivotal role in dental caries prevention. The results support the widespread use of fluoride toothpaste, water fluoridation, and professional treatments as effective measures to reduce caries incidence. Mouth rinses and gels provide additional protection, particularly for individuals at higher risk of caries.

Fluoride Method	Mean Caries Reduction (%)	Confidence Interval (±%)	
Water Fluoridation	25	5	
Fluoride Toothpaste	24	4	
Fluoride Mouth Rinse	27	6	
Professional Treatments	43	7	

Table 1:	Fluoride	Efficacy	Data	by	Method
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However, the findings also emphasize the importance of monitoring fluoride exposure to prevent adverse outcomes such as fluorosis. Policymakers and dental practitioners should balance fluoride efficacy with safety by tailoring interventions to community needs and individual risk profiles.

The review identified several limitations, including variability in study designs, fluoride concentration ranges, and population demographics, which may affect generalizability. Additionally, long-term studies assessing both caries prevention and fluorosis outcomes are needed to provide a more comprehensive understanding of fluoride's benefits and risks.

Fluoride remains a cornerstone of dental caries prevention, demonstrating significant effectiveness across various delivery methods and population groups. While its benefits are well-established, careful management of fluoride exposure is crucial to prevent adverse effects such as dental fluorosis. These findings provide valuable insights for public health policies and clinical practices aimed at improving oral health outcomes globally.

Discussion

This systematic review provides a comprehensive evaluation of the efficacy of fluoride in reducing dental caries, highlighting its role as a cornerstone of preventive dentistry. The findings reaffirm that fluoride, when used appropriately, significantly reduces the incidence of caries across various delivery methods and population groups. However, the review also underscores the importance of balancing efficacy with safety, particularly regarding the risk of dental fluorosis.

Fluoride delivery methods, such as water fluoridation, toothpaste, mouth rinses, and professional treatments, all demonstrated notable effectiveness in caries prevention. Among these, professional fluoride treatments, including varnishes and gels, achieved the highest caries reduction rates, emphasizing their importance in high-risk populations. These treatments provide concentrated and controlled fluoride exposure, which is particularly effective for children and individuals with elevated caries risk. Water fluoridation, often regarded as one of the most impactful public health measures, also showed substantial benefits, particularly in communities with low natural fluoride levels.

The results revealed that fluoride toothpaste and mouth rinses are essential tools for daily caries prevention. The widespread use of fluoride toothpaste has contributed significantly to the global decline in dental caries, as evidenced by the consistent caries reduction rates observed in this review. Mouth rinses, while less commonly used, offer additional benefits, especially in individuals who require enhanced fluoride exposure due to high caries susceptibility.

The review highlighted greater caries reduction benefits among children, attributable to fluoride's protective effects during the enamel formation period. This underscores the importance of targeted fluoride interventions for this demographic, such as professional fluoride treatments and community water fluoridation programs. In adults, while fluoride remains effective, the benefits are slightly diminished due to differences in enamel activity and caries risk factors.

Geographic differences in fluoride efficacy were also noted. Communities in regions with low natural fluoride levels benefited significantly from water fluoridation, whereas those in areas with naturally fluoridated water experienced comparatively lower additional benefits. This finding supports the targeted implementation of fluoridation programs in areas with suboptimal fluoride exposure.

While the caries-preventive benefits of fluoride are well-documented, the risk of dental fluorosis, particularly in children, requires careful management. The results showed a clear association between higher fluoride concentrations and increased fluorosis prevalence. Mild fluorosis is largely an aesthetic concern, but moderate to severe fluorosis can have functional and psychosocial impacts.

The findings emphasize the need for adherence to recommended fluoride levels in water supplies (0.7–1.2 ppm) and appropriate use of fluoride-containing products. Tailoring fluoride interventions to individual and community needs can help maximize benefits while minimizing risks. For instance, in communities with high natural fluoride levels, measures such as defluoridation or public education on fluoride sources may be necessary to prevent overexposure.

This review faced certain limitations, including variability in study designs, fluoride concentrations, and population characteristics. These differences may have influenced the comparability of results and the generalizability of findings. Additionally, long-term studies assessing both caries prevention and fluorosis outcomes are limited, highlighting the need for further research in this area.

Future studies should focus on understanding the long-term effects of fluoride use, particularly in diverse geographic and demographic contexts. Research into alternative caries prevention strategies for individuals at risk of fluorosis could also provide valuable insights.

The findings of this review have significant implications for public health policies and dental practices. Policymakers should continue to support fluoride interventions, such as water fluoridation and access to fluoride-containing products, as essential components of caries prevention strategies. At the same time, efforts to monitor and regulate fluoride levels should be strengthened to prevent overexposure.

Clinicians should provide individualized recommendations for fluoride use based on patients' age, caries risk, and exposure to other fluoride sources. Public education campaigns can play a crucial role in raising awareness about the appropriate use of fluoride-containing products and the benefits of community water fluoridation.

This review underscores the critical role of fluoride in reducing dental caries and highlights the importance of balancing efficacy with safety. By synthesizing current evidence, this study provides valuable insights for clinicians, policymakers, and public health professionals, supporting evidence-based strategies to improve oral health outcomes globally. Moving forward, continued research and targeted interventions will be essential to address existing challenges and further optimize the use of fluoride in preventive dentistry.

Conclusion

This systematic review highlights the pivotal role of fluoride in reducing dental caries across diverse populations and delivery methods. The findings confirm that fluoride, whether applied through water fluoridation, toothpaste, mouth rinses, or professional treatments, significantly reduces the prevalence of dental caries. Among these methods, professional treatments demonstrated the highest efficacy, while water fluoridation and fluoride toothpaste remain foundational public health interventions.

The review also underscores the importance of managing fluoride exposure to minimize the risk of dental fluorosis, particularly in children. Adherence to recommended fluoride concentrations in water supplies and the appropriate use of fluoride-containing products are critical to achieving a balance between efficacy and safety. Policymakers and dental health professionals should tailor fluoride interventions to the specific needs of communities and individuals, ensuring optimal outcomes.

By synthesizing current evidence, this review provides actionable insights for improving public health policies, dental practices, and educational campaigns. Continued research on fluoride's long-term effects and alternative caries prevention strategies will be essential to further enhance global oral health and reduce the burden of dental caries worldwide.

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