



Nanotechnology In Orthodontics And Its Future Implications : A Review

Dr. Tanya Arora¹, Dr. Sakshi Tiwari²

1. Consultant Orthodontist, New Delhi

2. Assistant Professor, Department of Orthodontics and Dentofacial Orthopedics, G Pulla Reddy Dental College and Hospital, Kurnool, Andhra Pradesh

Submitted: 05-03-2022

Accepted: 16-03-2022

ABSTRACT:

Nanotechnology is interpretation of miniature matter at nanometer level. Nano medicine and Nano dentistry are terms used to describe if they associated with nanotechnology.

Nanotechnology helps in providing a promising grasp in advanced diagnosis, biosensors, target drug delivery. In dentistry it has been widely used in diagnosis of dental treatment, care, and prevention of oral diseases..This review brings forth various implications and benefits of nanotechnology in orthodontics.

Keywords: Nanotechnology, applications in orthodontics, Nanomedicine.

I. INTRODUCTION

The term 'Nano' is derived from Greek word meaning 'dwarf'. A nanometer is 10^{-9} in notation. ⁽¹⁻⁴⁾ Nanotechnology allows exploration of dentistry and medical science along with material fabrication, devices and systems at nanoscale level.

Recently various advanced techniques such as nano characterisation, nano fabrication have been used to improve upon the biomaterial type of a substance.

Nanotechnology in medical field has been applied in diagnosis, prevention, and treatment of diseases

Three approaches are used in nanoparticles fabrication – they include Bottom up approach, Top down approach and Functional approach.⁹ Nano pores, nanotubes, quantum dots, nanoshells, dendrimers, liposomes, nanorods, fullerenes, nanospheres, nanowires, nanobelts, nanorings, nanocapsules are few of nanoparticles widely accessible.¹⁰

Nanotechnology in dentistry

It is the field of achieving an almost perfect oral and dental health with an integrated use of nano particles like tissue engineering and nanorobotics. Newer treatment modalities involving nanotechnology in dental field includes

delivery of local anesthesia, permanent hypersensitivity cure, nano dentifrices, treatment of oral carcinogens.

Orthodontics and Nanotechnology

Nano-indentative and atomic force microscopic studies on brackets and its surface characteristics which include roughness and surface free energy (SFE) .These coating on arch wires helps to reduction of friction and plaque accumulation. Nano indenter coupled with atomic force microscope (AFM) helps to determine bi-materials at nano scale surface. Nanotechnology also affects few aspects such as hardness, elastic modulus, yield strength, fracture toughness, scratch hardness and wear properties by nano indentation studies.

surface roughness characteristics were compared by D'Antò et al¹⁷ of stainless steel (SS), β -titanium (β -Ti), and nickel-titanium (NiTi) wires using AFM. The results of the study showed advantages of AFM which improved topographical three dimensional images with a very high resolution of about 10 Å .

Arch wires with Nano coatings for reducing friction

Minimization of frictional forces between wire and brackets will cause an increase in desired tooth movement and decreases treatment duration. Recently nano particles are employed as component of dry lubricants. Friction reduction is done by solid phase dry lubricants between two surfaces sliding against each other. Inorganic fullerene-like nano particles of tungsten disulfide (IF-WS₂) are potent examples of dry lubricants and their utilization is done in self lubricating coatings for stainless steel wires used in orthodontics. Coated stainless steel wire with nickel-phosphorous electroless tungsten disulfide (IF-WS₂) are fabricated by an insertion of stainless steel (SS) wires into electroless solutions of nickel-



phosphorus (Ni-P) and IF-WS2 were done by Redlich et al¹⁹

Instron machine and SEM/EDS analysis are used for friction tests for simulating archwire functioning and properties of coated and uncoated wires. The studies depict that there was reduction of frictional forces measured on coated archwire by 54%.

Orthodontic adhesive containing nanoparticles

Nano fillers of size 0.005- 0.01 microns are contained in nano composites . Macrofills, hybrids and microhybrids are added to make filler particles mechanically strong.

They are dense, large particles like mined quartz, melt glasses, ceramics and comminute them to small particle size.²⁰ outstanding optical properties, easy handling characteristics and superior polishability are few of its advantages of adding nanoparticles .²³

Nanocomposite and a nanoionomer restoratives were tested by Uysal et al²⁸ for determining their shear bond strength and failure site locations in comparison with a conventional light-cure orthodontic bonding adhesive (Transbond XT). They found out that nano restored composite to be mechanically superior than conventional ones. Improved mechanical properties are obtained when composite and ionomer cements have been impregnated with nano particles.

Elastomeric ligatures releasing nanoparticles

In fixed orthodontic therapy, teeth are often at risk of enamel decalcifications due to prolonged treatment time. Elastomeric modules used to hold arch wire in brackets tend to release fluoride which has anti cariogenicity, anti inflammatory and antibiotic drug molecules like few applicative modes. They have beneficial effects of elastomeric modules liberating nano particles. Studies indicate that anti cariogenic effect can also be achieved by fluoride releasing elastomeric modules.

Inhibited biofilms of oral cavity during tooth movement

The study conducted by S J Ahn⁴² et al compared an experimental composite adhesive containing silica nanofillers and silver nanoparticles with two conventional composite adhesives and resin modified glass ionomer [RMGI] for studying characteristics of its surface , its physical properties and antibacterial activities inhibiting cariogenic streptococcal growths. The results suggested that ECAs had rougher surfaces than conventional adhesives due to the addition of

silver nano particles.

Bio MEMS/NEMS for orthodontic tooth movement and maxillary expansion

They include micro machined elements fabricated from substrates of silicon which are manufactured by techniques which are used to fabricate integrated circuits. Implantable bioMEMS have been used as biosensors for in vivo diagnosis of diseases and drug delivery microchips^[43-45]. They have a physical or analytical function which the device performs along with electrical functions. Nano electromechanical systems (NEMS) have ability to combine electrical and mechanical functionality at nano scale level. It has been formulated that micro fabricated bio catalytic fuel cells which are also called as enzyme batteries has ability to increase orthodontic tooth movement by electric stimulations. MEMS/NEMS are at their initial stage of progression where areas concerning soft tissue biocompatibility, food effects at varying temperature and pH range needs to be addressed.

Nano LIPUS devices

LIPUS is Low-intensity pulsed Ultra sound radiations. The studies have depicted that there has been an efficiency in liberation of preformed fibroblast growth factors from a macrophage-like cell line and it also enhances angiogenesis during wound healing.⁵³ LIPUS has been reported to enhance bone growth into titanium porous-coated implants⁵⁴ and bone healing after fracture⁽⁵⁵⁻⁵⁶⁾ . The specific mechanisms by which ultrasonic stimulation works on bone cell activities are unknown and require more research in near future.

Smart brackets with nano mechanical sensors

Orthodontic brackets fitted with nano mechanical sensors at their base provides real-time feedback about applied orthodontic forces. This real-time feedback microsystem chip encapsulates into small low profile contemporary bracket systems with reduced dimensions. Orthodontist are allowed to adjust force applied which should be within a biological range to induce orthodontic tooth movement having no side effects.

II. CONCLUSION

Nanotechnology has been a boon to mankind which allowed miniaturized, nano-leveled formulations of biomaterials that has benefitted both dental and medical science. Nanotechnology though in orthodontics lies at its initial level. There is a scope of research in this sector. In today's world of nanotechnology there are possibilities and



advances which have potential to convert these technologies into clinical application and practice.

REFERENCES:

- [1]. NTaniguchi. On the Basic Concept of Nano Technology , Proc ICPE Tokyo 1974; 21:8-23.
- [2]. Schleyer TL. Nanodentistry. Fact or Fiction? J Am Dent Assoc 2000; 131:1567-1568.
- [3]. Whitesides GM, Love JC. The art of building small Scientific American 2001; 285:33-41.
- [4]. Kaehler T. Nanotechnology: Basic concepts and definitions. Clin Chem 1994; 40:1797-1799.
- [5]. Park B. Current and Future Applications of Nanotechnology . The royal society of chemistry.UK 2007
- [6]. Feynman RP. There's Plenty of Room at the Bottom. Eng Sci. 1960, 1961; 23:22-36.
- [7]. Drexler KE. Engines of creation, the coming era of nanotechnology. Anchor press, New York, 1980
- [8]. Drexler KE. Molecular Engineering: An Approach to the Development of General Capabilities for Molecular Manipulation.
- [9]. Rodgers P. Nanoelectronics. Nature Nanotech, 2006.
- [10]. Freitas RA Jr: Nanomedicine, Basic Capabilities Georgetown, TX: Landes Bioscience, 1999; I:345-350.
- [11]. Binning G, Quate C, Gerber C. Atomic force microscope Phys Rev. Lett 1986; 12:930.
- [12]. Kusy RP, Whitley JQ. Effects of surface roughness on the coefficients of friction in model orthodontic systems. J Biomech. 1990; 23(9)913-925.
- [13]. Bourauel C, Fries T, Drescher D, Plietsch R. Surface roughness of orthodontic wires via atomic force microscopy, laser specular reflectance, and profilometry. Eur J Orthod. 1998; 20:79-92.
- [14]. Silikas N, Lennie AR, England KER, Watts DC. AFM as a tool in dental research. Microsc Analysis 2001; 82:19-21
- [15]. Lee GJ, Park KH, Park YG, Park HK. A quantitative AFM analysis of nano-scale surface roughness in various orthodontic brackets. Micron 2010; 41:775-782.
- [16]. Kakaboura A, Fragouli M, Rahiotis C, Silikas N. Evaluation of surface characteristics of dental composites using profilometry, scanning electron, atomic force microscopy and gloss-meter. J Mater Sci Mater Med 2007; 18:155-163.
- [17]. Antò VD, Rongo R, Ametrano G, Spagnuolo G, Manzo P, Martina R et al Evaluation of surface roughness of orthodontic wires by means of atomic force microscopy. Angle Orthod 2012; 82(5):922-928.
- [18]. Braga PC, Ricci D. Atomic Force Microscopy. Biomedical Methods and Applications. Humana Press. Totowa, NJ, 2004.
- [19]. Redlich M, Katz A, Rapoport L, Wagnerb HD, Feldmanb Y. Improved orthodontic stainless steel wires coated with inorganic fullerene-like nanoparticles of WS₂. impregnated in electroless nickel-phosphorous film. Dent Mater 2008; 24:1640-1646.
- [20]. Mitra SB, Dong WU, Holmes BN. An application of nanotechnology in advanced dental materials. J Am Dent Assoc. 2003; 134:1382-90.
- [21]. Moszner N, Salz U. New developments of polymeric dental composites. Program Polymer Science 2001; 26:535-576.
- [22]. Geraldeli S, Perdigao J. Microleakage of a new restorative system in posterior teeth. Journal of Dental Research (special issue A): 126 (Abstract), 2003.
- [23]. Lee YK, Lim BS, Rhee SH, Yang HC, Powers JM. Changes of optical properties of dental nano-filled resin composites after curing and thermocycling. J Biomed Mater Res 2004; 71B:16-21
- [24]. Quirynen M, Bollen CM. The influence of surface roughness and surface free-energy on supra- and subgingival plaque formation in man. J Clin Periodontol 1995; 22:1-14.
- [25]. Quirynen M, Marechal M, Busscher HJ, Weerkamp AH, Darius PL, van Steenberghe D. The influence of surface free energy and surface roughness on early plaque formation, an in vivo study in man. J Clin Periodontol. 1990; 17:138-44.
- [26]. Killian CM, Croll TP. Nano-ionomer tooth repair in pediatric dentistry, Pediatr. Dent 2010; 32(7):330-535.
- [27]. Kotmaj V. Influence of different conditioning methods on shear bond strength of novel light curing nano-ionomer; restorative to enamel and dentin. Lawers Med. Sci 2010 25:861-866.
- [28]. Uysal T, Yagci A, Uysal B, Akdogan G. Are the nano- composites and nano- ionomers suitable for orthodontic bracket bonding? Eur J Orthod. 2010; 32:78-82
- [29]. Bishara SE, Ajlouni R, Soliman MM, Oonsombat C, Laffoon JF, Warren J.



- Evaluation of a new nano- filled restorative material for bonding orthodontic brackets *World J Orthod* 2007; 8:8-12.
- [30]. Wiltshire WA. determination of fluoride from fluoride releasing elastomeric ligature ties. *Am. J Orthod Dentofacial thop.* 1996; 110(4):383-387
- [31]. Wiltshire WA. In vitro and in vivo fluoride release from orthodontic elastomeric ligature ties. *Am. J Orthod Dentofac Orthop.* 1999; 115(3):288-292
- [32]. Miura KK. Anticariogenic effect of fluoride-releasing elastomers in orthodontic patients. *Braz. Oral. Res* 2007; 21-(3)228-233.
- [33]. Gunes S, Jana C. Shape memory polymers and their nanocomposites: a review of science and technology of new multifunctional materials. *J Nanosci Nanotechnol*; 2008; 8(4):1616-1637.
- [34]. Stuart MA, Huck WT, Genzer J, Muller M, Ober C, Stamm M. Emerging applications of stimuli-responsive polymer materials. *Nat. Mater.* 2010; 9:110-113.
- [35]. Meng Q, Hu J. A review of shape memory polymer composites and blends. *Compos A Appl. Sci. Manuf.* 2009; 40(11):1661-1672.
- [36]. Leng J, Lan X, Liu Y, Du S. Shape-memory polymers and their composites: stimulus methods and applications *Prog. Mater. Sci.* 2011; 56(7):1077-1135
- [37]. Allaker RP. The use of nanoparticles to control oral biofilm formation. *J Dent Res* 2010; 89:1175-86.
- [38]. Hill WR, Pillsbury DM. *The pharmacology of silver* Baltimore: The Williams & Wilkins Co, 1939
- [39]. Hannig M, Kriener L, Hoth-Hannig W, Becker-Willinger C, Schmidt H. Influence of nanocomposite surface coating on biofilm formation in situ. *J Nanosci Nanotechnol* 2007; 7:4642-8.
- [40]. Monteiro DR, Gorup LF, Takamiya AS, Ruvollo-Filho AC, De Camargo ER, Barbosa DB. The growing importance of materials that prevent microbial adhesion: antimicrobial effect of medical devices containing silver. *Int J Antimicrob Agents.* 2009; 34:103-10.
- [41]. Yamamoto K, Ohashi S, Aono M, Kokubo T, Yamada I, Yamauchi J. Antibacterial activity of silver ions implanted in SiO₂ filler on oral streptococci. *Dent Mater* 1996; 12:227-9.
- [42]. Ahn SJ, Lee SJ, Kook JK, Lim BS. Experimental antimicrobial orthodontic adhesives using nanofillers and silver nanoparticles. *Dent Mater* 2009; 25(2):206-13.
- [43]. Nuxo II EE, Siegel RA. Bio MEMS devices for delivery *IEEE Eng. Med. Biol. Mag* 2009; 28(1):31-39.
- [44]. Xu B. Bio MEMS enabled drug delivery, *Nanomedicine* 2005; 1(2):176-177.
- [45]. Gourley PL. Brief overview of BioMicroNano technologies. *Biotechnol. Prog.* 2005; 21(1):2-10.
- [46]. Davidovitch Z, Finkelson MD, Steigman S, Shanfrid JL, Montgomery PC, Korostoff E et al. Electric currents, bone remodeling and orthodontic tooth movement. II. Increase in rate of tooth movement and periodontal cyclic nucleotide level by combined force and electric current. *Am J Orthod.* 1980; 77:33-47.
- [47]. Davidovitch Z, Finkelson MD, Steigman S, Shanfrid JL, Montgomery PC, Korostoff E et al. Electric currents, bone remodeling, and orthodontic tooth movement I. The effect of electric currents on periodontal cyclic nucleotides. *Am J Orthod.* 1980; 77:14-32.
- [48]. Kolahi J, Abrishami M, Davidovitch Z. Microfabricated biocatalytic fuel cells: A new approach to accelerating the orthodontic tooth movement. *Med Hypotheses* 2009; 73:340-341.
- [49]. Miyawaki S, Koyama I, Inoue M, Mishim K, Sugahara T, Takano-Yamamoto T et al. Factors associated with the stability of titanium screws placed in the posterior region for orthodontic anchorage. *Am J Orthod. Dentofacial Orthop.* 2003; 124(4):373-378.
- [50]. Kuroda S, Sugawara Y, Deguchi T, Kyung HM, Takano-Yamamoto T. Clinical use of miniscrew implants as orthodontic anchorage: success rates and postoperative discomfort. *Am J Orthod. Dentofac Orthop.* 2007; 131(1):9-15.
- [51]. Maylia E, Nokes LD. The use of ultrasonics in orthopaedics-a review. *Technol Health Care* 1999; 7:1-28.
- [52]. Ziskin MC. Applications of ultrasound in medicine comparison with other modalities. In: Rapacholi MH, Grandolfo M, Rindi A, eds. *Ultrasound: Medical Applications, Biological Effects, and Hazard Potential.* New York, NY: Plenum Press; 1987, 49-59.
- [53]. Young SR, Dyson M. The effect of therapeutic ultrasound on angiogenesis. *Ultrasound Med Biol.* 1990; 16:261-269.



- [54]. Tanzer ME, Harvey A, Kay P, Morton, Bobyn JD. Effect of noninvasive low intensity ultrasound on bone growth into porouscoated implants. *J Bone Joint Surg.* 1996; 14:901-906.
- [55]. Abramovich A. Effect of ultrasound on the tibia of the young rat. *J Dent Res.* 1970; 49:1182.