

Indications

• Permanent cementation of Ceramic and Zirconia restorations.

Properties

- Dual-cured, radiopaque, permanent resin cement in a convenient Automix syringe
- Self-etch, self-adhering resin cement does not require etching, priming or bonding of tooth surface, prior to cementation
- No pre-treatment of the intaglio surface of the restoration is necessary when using this self-adhering resin cement
- Superior retention and total margin integrity
- Forms an excellent bond with Zirconium, porcelain, metal alloys and tooth structure
- Does not affect the shade of translucent crowns
- Self-cured cement which you can light-cure for an immediate set and extra strength at the margins
- Radiopaque-Easily seen in radiograph
- 2 Shades: Dentin & Translucent
- Virtually neither taste nor odor Increased patient comfort

Scientific Papers

- Testing of crowns retention to various abutments utilizing different cements, K. Lizenboim, B. Zalsman, I. Suvorov and A. Suvorov, Program Number 79, PEF-IADR Congress, London, UK, 2008.
- 2. The effect of preparation order on the crystal structure of yttria-stabilized tetragonal zirconia polycrystal and the shear bond strength of dental resin cements, J. Moon, A. Kim, J. Lee, S. Ha, Y. Choi, Dental Materials, p. 651-663, Volume 27, 2011.
- Comparing of Color Stability of Adhesive Resin Cements, A. Suvorov, B. Zalsman, K. Kizenboim, A. Valdman and I. Suvorov, Program Number 0120, PER-IADR Congress, Jerusalem, Israel. 2016.
- 4. Clinical evaluation by the Dental Advisor, October 2016.
- 5. The effect of monolithic zirconia thickness on the degree of conversion of dental resin cements: ATR-FTIR spectroscopic analysis, Banu Çukurluöz Bayındıra, Secil Karakoca Nemlia, Sevgi Haman Bayarıb, Bilge Turhan Bala, Vibrational Spectroscopy, Volume 86, September 2016, Pages 212-217.

Technical Data

Compressive strength	> 150 MPa
Flexural strength	> 100 MPa
Shear Bond Strength to UnEtched Dentin	> 10 MPa
Shear Bond Strength to Zirconia	> 15 MPa
Shear Bond Strength to Lithium diSilicate	> 20 MPa
Hardness by Barcol	80
Water sorption	8 µg/mm³
Solubility	1 µg/mm³
Film thickness	10 µm
Radiopacity, % Aluminium	250
рН	~ 7
Dimensional Change on Polymerization	3 - 4 %
Working Time (in ambient light & temperature)	1.5-3.5 min
Setting Time (in oral temperature)	2.5-4.5 min
Compatible with halogen light	Yes
Compatible with Plasma ark light lamp	Yes
Compatible with LED	Yes
Shelf Life	2 Years

Packaging & Order Information

Item # 400050

1 Automix Syringe 5 ml of Zirconite Dentin

1 Mixing Pad

10 Automix Syringe Mix Tips

10 Intra-Oral Angular Tips, Size Fine

10 Intra-Oral Angular Tips, Size Long XX-Fine

Item # 400050TR

1 Automix Syringe 5 ml of Zirconite Translucent

1 Mixing Pad

10 Automix Syringe Mix Tips

10 Intra-Oral Angular Tips, Size Fine

10 Intra-Oral Angular Tips, Size Long XX-Fine



Zirconite

Improving Patient Care Through Research & Education

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RATING SYSTEM: Excellent + + + + + Very Good + + + + Good + + +



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Description

Zirconite is a dual-cured, radiopaque self-adhesive resin cement formulated for the cementation of zirconia restorations. It offers a working time of up to 2 minutes, and a setting time of 3 minutes at intraoral temperature. A gel state can be achieved with a 2-second light cure or 1.5 to 2 minutes self-cure, at which time excess cement is easy to remove with a scaler or explorer before light-curing all surfaces for 20 seconds. *Zirconite* includes a 5 mL syringe of the adhesive resin cement, 10 auto-mix tips, 10 large and 10 small intra-oral tips and a mixing pad. For maximum shelf life, Zirconite should be refrigerated.

Indications

Adhesion of zirconia restorations

Unique Features

Zirconite is specially formulated for zirconia restorations to offer superior retention and marginal integrity. No pre-treatment of the intaglio surface of the restoration is necessary when using this sef-adhesive resin cement.

Consultants' Comments

- "A perfect cement."
- "Does not affect the shade of translucent crowns."
- "BJM lab has developed some very specific products that are perfect for their individual uses.
- "The gel state clean-up prior to light curing was easier than a total self-cure, but the overall time spent due to the extra light-cure step
- "A quicker setting/self-curing time would be helpful, and an initiator so that light-curing is not needed."
- "I prefer letting it set undisturbed for 1.5 minutes rather a quick cure prior to excess removal."

Clinical Tips

- Clean-up is much easier if you don't let it get too hard.
- Floss through contact points before the gel phase.
- Floss interproximally and leave the floss in place until the cement is fully cured.
- Use the intraoral tip for accurate placement of the material into the intaglio of the crowns.
- If you are using it for the first time, check the setting every 15 seconds as the material becomes very hard if left beyond the ideal time for clean-up.
- The mixing tip is small. We extruded the product onto a mixing pad and then mixed, reducing the amount of wasted product.

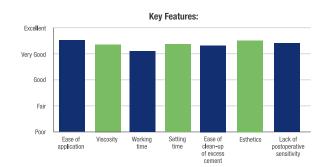




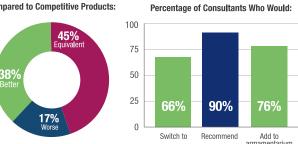
Evaluation Highlights

Zirconite was evaluated by 29 consultants.

- Easy to use and fast, easy clean-up.
- Good viscosity and handling properties.
- No need to pre-treat the inner surface of the restoration or the tooth preparation before bonding.
- Very straightforward to use no learning curve.
- Mixing and application tips are high quality.
- Patients had no post-operative sensitivity.



Compared to Competitive Products:



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