# Save Time, Effort, and Money with Fast, New LED Curing Lights

Gordon and Paul's Clinical Bottom Line: The evolution of resin curing lights has been constant since their introduction in 1979. The most important recent changes have been the acceptance of fast resin curing by both clinicians and researchers, and the advent of more powerful LED lights which now rival the capabilities of plasma arc lights. It's time to re-evaluate the resin curing techniques you use, and it may be time to upgrade your lights. There has been a paradigm shift away from measuring the energy The continued trend toward higher

that comes out of a curing light to what actually reaches the material being polymerized. Traditional test methods used for halogen lights with glass-fiber light guides do not always work well for curing lasers and plasma arc lights introduced in the 1990s or LED lights introduced after 2000 with their unique output and lens systems. Clinically, the effectiveness of a light curing procedure depends on many factors, including:

 The light's output power, spectrum, and tip design Cure time

- The resin chemistry and its photo-initiators
- · Location and orientation of the restoration
- Tooth structure or materials that partially block the light
- The clinician's ability to aim and maintain the light on target
- **CR Choice Lights**

intensity lights, short cure times, and fast polymerizing resin chemistries is potentially helpful to ensure adequate cure and to expedite the procedure. However, clinicians must use good judgment to account for the variables listed previously to ensure that sufficient energy actually reaches the resin. The following report guides you by



fingers to align tip exactly perpendicular to the restoration for optimum energy delivery

characterizing 20 LED curing lights using performance tests and measurements from the new MARC

system and provides clinical tips for effective curing procedures.

# bluephase G2



Clinical Tips



Excellent performance, best intraoral access, and no battery

to dissipate heat.

Use adequate cure time to ensure complete polymerization. High-



Built-In

Cure Time

## Check output frequently with a light meter to verify consistency.

CLINICIANS REPORT

MicroDent-Apollo Dental

www.mddentalinfo.com MiniLED III SuperCharged

Acteon North America

Coltene Whaledent

www.parkell.com FLASHlite Magna

www.discusdental.com FlashMax2

www.cmsdental.com Silverlight

www.gcamerica.com Celalux 2

www.vocoamerica.com

VOCO America

www.sdi.com.au Translux Power Blue

Hereaus Kulzer

www.kerrdental.com

www.denmat.com

Den-Mat

www.hereaus-kulzer-us.com Optilux 501 (halogen control)

Sapphire (plasma arc control)

Radii Plus

SDI

Discus Dental

CMS Dental

GC America

Aurora S3

Parkell

www.us.acteongroup.com Coltolux LED

www.coltenewhaledent.com

- Keep light tip clean by covering with clear plastic (e.g. kitchen food wrap and a rubber band). Remove cured-on material with a
- scalpel blade and polish glass fiber guides with an extra-fine composite disk. · Disinfect light between patients (tip, handle, and controls) with a proven high-ethyl-alcohol disinfectant (e.g. Lysol I.C. Brand II). Glass
- light guides can be autoclaved. . To ensure accurate aim, the person performing the cure is advised to wear orange glasses and watch the process; others should avert eyes during exposure.
- Position the tip as close as possible and hold it perpendicular to the resin. Tilted alignment or movement significantly reduce the total energy delivered. Light tips with an 80°-90° angle that rotate 360° provide easiest
- intraoral access. Large tips (9-13 mm) generally provide best coverage. LED incompatibility with some materials still exists. Multiple LEDs, lower wavelengths, and higher output have reduced the problem, but
- clinicians should test cure materials prior to use in patients.

mm glass fiber

45°, rotates

mm glass fiber

45°, rotates

9 mm lens

60°, fixed

12 mm lens

80°, fixed

11 mm lens

55°, fixed

6 mm lens

90°, fixed

mm glass fiber

45°, rotates

mm glass fiber

50°, rotates

7 mm lens

70°, rotates

mm glass fiber

60°, rotates

mm glass fiber

50°, rotates

9 mm glass fiber

50°, rotates

Excellent

Good

Excellent-

Good

Good

Excellent-

Good

Excellent-

Good

Good-Fair

Excellent

Good

Good-Fair

Good

Yes

Yes

No

Yes

No

Yes

No

Yes

No

No

Yes

broad

spectrum

Yes

broad

spectrum

Save Time, Effort, and Money with Fast, New LED Curing Lights (Continued from page 1)

cordless

cordless

cordless

cordless

(or cord)

cordless

cordless

cordless

cordless

cordless

cordless

cord

cord

CR Evaluation of Latest LED Lights

step, soft, pulse, etc.) are promoted for minimizing stress due to shrinkage; however, CR research shows that resin formulation has a greater effect on stress than light intensity. Heating of pulp tissue in deep preps or small teeth can occur with high intensity LED lights. To minimize risk, direct air over tooth while curing and/or segment the overall cure time pausing up to 3 seconds in between

intensity, fast cures are generally accepted. Other curing modes (ramp,

· Significantly longer cure times may be required when curing through ceramic veneers and crowns; darker and more opaque shades; and some flowable and microfill resins. Don't cure increments thicker than 2 mm unless recommended by manufacturer and proven by testing (see Clinicians Report March 2010 - New Resin Based Composites: A Shrinking Problem?).

· Lithium batteries used in most cordless LED lights can be kept on

- the charger at full capacity without damage. Eventually, however, the batteries will fail and must be replaced. Select lights with simple, intuitive controls. Lights that clearly indicate the mode and time settings are easiest to use.
- This official reprint may not be duplicated. This reprint is prepared by CR for the purpose of providing dental clinicians with objective information about dental products.

Intensity

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Evaluator

PAGE 2 The following chart shows key features of 20 LED and two control lights. Lights are listed in order of overall rating which was based on clinical ratings, ease of use, intraoral access, cure speed, compatibility with all materials, convenience features, and cost.

**Highest Intensity** Light Guide **Brand Name** Cord or Simple Cures All Clinical Mode & from MARC (2 mm layers Light Overall Rating Timer Settings of A2 shades) (mW/cm²) Cordless Size and Angle Controls Materials Meter Rating Company High: 5, 10, 15, bluephase G2 Yes Excellent cordless 9 mm glass fiber Excellent-Excellent-1,540 3-4 sec Ivoclar Vivadent broad 20, 30 sec No (or cord) 70°, rotates Good Good CHOICE www.ivoclarvivadent.com spectrum also Low and Soft modes Fast: 5, 10, 15, 20 sec ART-L5 cordless Excellent mm glass fiber Bonart Medical Technology Excellent also Pulse and No Yes Good 1,620 3-5 sec (or cord) 45°, rotates (R. CHOIGE www.bonartmed.com Ramp modes Plasma: 3 sec VALO Yes Excellent Excellent-10 mm lens Good-Fair also High and No broad 4,190 1-3 sec Ultradent cord C CHOICE 85°, fixed Good spectrum Standard modes www.ultradent.com SmartLite Max Yes Boost: 5 sec Excellent cordless 11x6 mm lens Excellentalso Standard, Ramp, Dentsply Caulk broad Good 1,330 4-8 sec Yes 90°, rotates Good (or cord) R. CHOICE www.dentsply.com spectrum and Pulse modes Standard: 5, 10, 15, Elipar S10 9 mm glass fiber Excellentcordless Excellent 3M ESPE Yes Good 20 sec, continuous 2,060 Yes 3 sec Good 60°, rotates also Tack-cure mode www.3mespe.com High: 2, 4, 6, 8, 10, The Cure II Excellent-Excellent-8 mm lens Spring Health Products 12, 16, 20 sec cordless Good-Fair Yes 1,610 3-5 sec No 75°, fixed Good Good www.springhealthproducts.com also Low mode Turbo: 3, 4, 5 sec bluephase 20i Yes Excellent-Excellentmm glass fiber Excellentcordless broad also High, Low, and Ivoclar Vivadent 3,120 2-3 sec 60°, rotates Good Good Good (or cord) www.ivoclarvivadent.com Soft modes spectrum Blast-Lite mm glass fiber Excellent-High: 5 sec Excellent-Good-Fair 1-4 sec No First Medica cordless Yes 4,280 also Standard mode 50°, rotates Good Good www.firstmedica.com Demi Plus Excellent-Excellentmm glass fiber cordless Excellent Standard: 5, 10, 20 sec Yes 2-4 sec 60°, rotates Good Good www.kerrdental.com Constant: 5, 10, 20 sec Fusion cordless 10 mm lens Excellent-Excellent 2,910 2-6 sec Good-Fair No also Sequential and No DentLight 70°, rotates (or cord) Good Half-Power modes www.dentlight.com Apollo LED 2000+

Good-Fair

Good

Good-Fair

Good-Fair

Good

Excellent-

Good

Good-Fair

Good-Fair

Good-Fair

Good-Fair

Good-Fair

Good

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Standard: 3, 6, 9 sec

Fast: 3, 4, 5, 10 sec

also Pulse and

Step modes

Standard: 10, 20 sec

Turbo: 10 sec

also Standard and

Gel modes

Standard: 5, 10, 15,

20 sec

Standard: 1, 3 sec

Fast: 10 sec

also Slow Rise mode

Fast: 10, 20 sec

also Soft Start mode

Standard: 10, 20, 30,

40, 50, 60 sec

also Ramp mode

Fast: 10, 20 sec

also Slow Rise mode

Boost: 5, 10 sec

also Standard and

Ramp modes

Standard: 3, 5, 7, 9 sec

resin shades tested.

14

3,860

3,170

1,210

1,730

1,640

5,840

1,510

1,360

1,340

1.010

2,120

2,500

1-3 sec

1-3 sec

4-6 sec

3-5 sec

3-5 sec

2-3 sec

4-6 sec

5-7 sec

5-8 sec

5-7 sec

3-6 sec

2-4 sec

The following graph shows the energy delivered by each light in its highest

intensity mode using its shortest timer setting required to cure all of the A2

Cure Time of A2 Resins and Corresponding Energy Delivered

spectrum, optimum intensity, and energy density. · Speed of cure was found for A2 shade Filtek Supreme Ultra, Herculite Ultra, and Venus Diamond, as well as other shades and types of light-

10 second

Excellent-

Good

Excellent-

Good

Excellent-

Good

Excellent-

Good

Excellent-

Excellent-

Good

Excellent-

Good

Excellent-

Good

Good

Good

Excellent-

Good

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No

Yes

No

Yes

No

Yes

Yes

Yes

Yes

Yes

#### Lab tests included beam collimation, width of cure, simulated heating (j/cm²) 12 of pulp, and battery life. Resin Size, weight, light guide design, controls, and features were measured

 Clinical Evaluators rated intraoral access, aiming, ergonomics, controls, and ease of use.

• The MARC System (see box below) was used to measure curing light

The MARC System: A New Way for Researchers

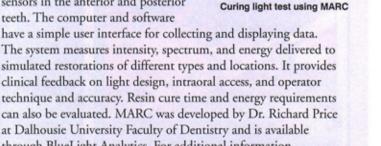
### teeth. The computer and software have a simple user interface for collecting and displaying data. The system measures intensity, spectrum, and energy delivered to simulated restorations of different types and locations. It provides clinical feedback on light design, intraoral access, and operator

to Measure Energy Delivery MARC (Managing Accurate Resin Curing) consists of a spectroradiometer mounted in a dental mannequin with sensors in the anterior and posterior

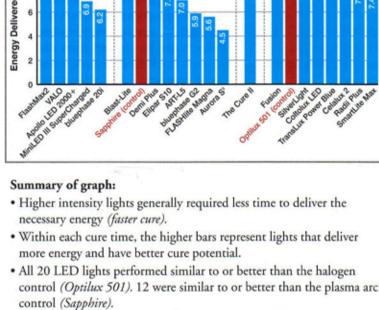
visit www.curingresin.com. CR Conclusions: LED curing lights continue to increase in power. For direct resin curing, all lights were similar to or better than the halogen control and many were better than plasma arc. All lights were clinically useful and had an overall rating of good or better. Testing with the MARC system revealed the importance of good clinical technique (aim and steadiness). Lights with the overall best combinations of performance, features, and cost were: bluephase G2, ART-L5, VALO, and SmartLite Max.

at Dalhousie University Faculty of Dentistry and is available

through BlueLight Analytics. For additional information,



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The actual energy delivered varies depending on resin brand and

curing light characteristics, including timer setting.