
**SEGUIMIENTO CLÍNICO A 12 MESES DE RESTAURACIONES DE VIDRIO
IONÓMERO MODIFICADO CON RESINA EN DIENTES TEMPORALES
DE NIÑOS (AS) DE 5 A 12 AÑOS DE EDAD**

**DANIELA M. DÍAZ ARRIAGADA
VANESSA E. GARRIDO GONZÁLEZ
CIRUJANO DENTISTA**

RESUMEN

INTRODUCTION: Dental caries is one of the most prevalent chronic diseases throughout the world, affecting the adult and child population, constituting a relevant problem in the field of public health. The dental profession, being aware of this reality, has developed new techniques and dental materials such as resin-modified glass ionomer cements (RMGIs), which are hybrid materials of great importance in the treatment of carious lesions. Considering that a temporary dentition restoration is different from a restoration in permanent dentition, given the limited useful life of the teeth and the lower bite forces of the children, these restorative materials could offer particular advantages due to their ability to release fluoride, adhere to dental tissues and relatively simple technique. The objective of this study is to evaluate the clinical behavior of RMGIs (Vitremer®) in simple, compound and complex restorations in temporary teeth at 6 months, 9 months and 12 months. **MATERIALS AND METHODS:** A prospective longitudinal study was conducted in 31 patients from 5 to 12 years of age who were treated by undergraduate students who were enrolled in the module of Integral Dentistry of Children II (5th year) in 2016 at the University of Talca's Dental Clinics. In them, 165 temporary teeth were restored with RMGIs (Vitremer®) that corresponds to the total sample under study and were evaluated using a Modified Ryge's criteria (marginal adaptation) categorized as acceptable and unacceptable, in addition the relationship between Simplified oral hygiene index by O'Leary *et al.* and clinical behavior of restorations over time were evaluated. **RESULTS:** The authors found that there is no statistically significant relationship between the clinical behavior of simple restorations and time (Q, p-value = 0.05), whereas in composite and complex restorations a statistically significant relationship was obtained (Q, p-value = 0.015 and 0.039 respectively) between the clinical behavior of these restorations and time. Regarding the relationship between the oral hygiene index and clinical behavior, it was found to be statistically significant (χ^2 , p-value = 0.000). **CONCLUSION:** RMGIs (Vitremer®) has the best performance in long-term small

class I and II cavities, while in restorations involving several faces it requires constant monitoring and management of other factors that determine the clinical success of restorations.

KEY WORDS: resin-modified glass ionomer, Vitremer®, carious lesions, clinical evaluation of restorations, temporary dentition, pediatric dentistry.