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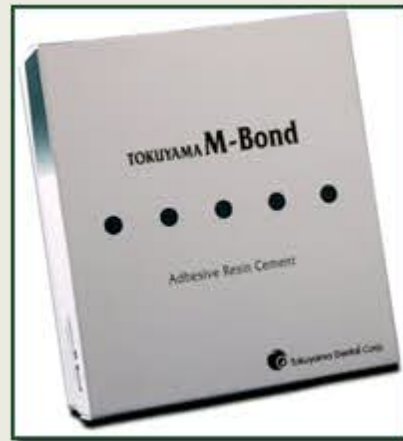
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"What, Another Adhesive Resin Cement?"

By Jeffrey C. Hoos, DMD, FAGD

As appeared in *J. Morita's News & Views*



When I want a strong and elastic adhesive system, M-Bond is the solution.

Over fifty years ago, dental adhesion was invented by Hagger (Swiss patent 278), with the motivation of trying to seal margins so there would not be leakage around restorations. The product did not work very well but this seed of the thought was planted and now we have a whole garden of different resin cements. Dental adhesives have matured over the years and have become the "standard" in modern dental practice. With the use of resin based restorative materials (direct and indirect), ceramics and adhesive resin cements, great aesthetic results can be achieved which brings great satisfaction to the patient and the dentist.

The use of adhesive cements allows the dentist to:

1. Gain excellent aesthetics because there is no metal
2. Periodontal health can be maintained of a polished finish and because the resin is insoluble there can be no marginal defects
3. There can be minimal tooth reduction, therefore less pulpal response and more tooth structure in the "tooth bank" (Dr. Bertolotti) for future use
4. Treat less than ideal situations of shortened worn teeth because ideal resistance and retention form is not needed

(Modification F.J. Trevor Burke's reasons for adhesive technology)

The entire dental world understands why adhesive technology was the desire of the dental community and that we have achieved great success with technology that we presently have. So why has J. Morita USA introduced another resin cement called M-Bond? After using this product for the last year, I have arrived at the answer.

The superior bond strength with the convenience and proven results of "self-etching" primers is a great combination. The adhesive strength allows the dentist to solve many clinical problems that arise in daily dental practice that frustrate the dentist and patient. The crown that will not stay because there is very little clinical crown. The post that is too short because of the fear of clinical perforation. The Maryland

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bridge that will not keep from getting dislodged because of the lack of retention. Splinting teeth together because of mobility and require an inexpensive, aesthetic result.

The kit that J. Morita has provided for M-Bond is very easy to use. The material is self-etching and does not require a cool dish to give dentist an extended working time. It has a shorter setting time than 4-Meta adhesives so there is a faster turn around time between patients. M-Bond has three easy steps and excellent handling properties and because of its versatile application it can be used on a daily basis.

I always talk about Bistite II DC and what a wonderful resin cement it is, so we should talk about the comparisons of these two products: 1) M-Bond is a polymer resin cement and Bistite II DC is an organic and inorganic resin adhesive cement. 2) Bistite II DC does allow for a longer working time as compared to M-Bond (4 minutes vs. 90 seconds) 3) The Bistite II DC is excellent for anterior esthetic restorations where it is necessary to add some "color" to the restorations but if a clear cement is needed than M-Bond could be used. 4) M-Bond is terrific for long span bridges that require elasticity and great adhesion for retention on the abutments. 5) M-Bond is a powder liquid so it can be used with a *salt and pepper* or dip method of placement for periodontal splinting and orthodontic brackets.

Private practice is a daily challenge and when fighting the dental battle; M-Bond offers another arrow in your quiver to solve dental problems for you and your patients.

More information on M-Bond Adhesive Resin Cement available from [J. Morita USA, Inc.](#)

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