Sealants' Effectiveness in Treating Permanent Molars

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Description

A dental procedure called dental sealants aims to stop tooth decay. On their biting surfaces, teeth have recesses; the teeth have fissures; and some of the front tooth has pits. Since food and bacteria tend to stick in these pits and cracks and are thus challenging to clean, these are the areas that are most susceptible to tooth decay. Dental sealants are substances that are applied to these cracks and pits to fill them up, resulting in a smooth, hygienic surface. Dental sealants are typically applied as soon as the adult molars teeth erupt and are mostly utilized in children who are more susceptible to tooth decay. The imbalance between the loss and uptake of nutrients from a tooth is disrupted by dental caries. The bacteria in our mouths that ferment food and produce acids cause the loss of minerals from our teeth, but saliva and fluoride, which is naturally present in our mouths, help to replenish those minerals. There is a continual loss and little gain of ions over a prolonged period of time when this equilibrium is thrown off by frequent ingestion of complex sugars, poor dental hygiene and a lack of fluorine consumption, which can ultimately result in tooth decay. The low intervention dentistry method of dental care includes a preventive procedure called dental sealants. These sealants, which are made of plastic, are applied to the rear teeth known as primary or permanent molars and premolars. Due to the architecture of the chewing surfaces of these molar teeth, which prevents protection from saliva and fluoride and instead favours plaque formation, these teeth are thought to be the most susceptible to dental caries. This strategy makes it easier to prevent dental caries from progressing to its final stage, often known as the "hollow" or cavity of a tooth and to take early action to halt it. The need for a dental restoration to restore a cavitated tooth highlights

how crucial prevention is to keeping teeth healthy for a lifespan of chewing. Dental sealants operate as a physical barrier that safeguards tooth structure surfaces and grooves, preventing the accumulation of germs and food particles trapped inside these fissures and grooves, hence limiting tooth decay from the pits and cracks of the teeth. Moreover, dental sealants offer a smooth surface that is simple for saliva, the body's natural defence, and toothbrush bristles to access when brushing teeth. As long as the dental sealant is affixed to the tooth, infections can be avoided. Dental sealants are recognized as an effective way of cavity prevention. Because of this, the effectiveness of sealants is now determined by how long they stay on the tooth rather than by the difference in decay between sealed and untreated teeth. Pit and fissure sealants' capacity to remain on the surface of the tooth is crucial to their capacity to stop dental caries. Salivary contaminant during sealing installation is the most frequent cause of sealant failure. Additional variables include the lack of client cooperation, the inexperience of the therapist and the use of less efficient sealants as a preventive measure that has been found to be more effective (than fluoride varnish alone), sealants may be used in addition to fluoride varnish. Use a brush or cotton fibre roll to make sure the teeth is clean of any debris. Using whatever the dentist deems appropriate cotton wool rolls, a dry guard, a saliva ejector isolate the tooth from any moisture. The site will be most effectively isolated if cotton wool rollers, dry guards, or a salvia extractor are used. Although they can be utilized, especially for smaller children, rubber dams are frequently not used to stop saliva from polluting the area that is supposed to be covered. Compared to glass ionomer sealants, resin-based sealants present more of a moisture control challenge

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