



MATERIALS  
FOR CARING  
PROFESSIONALS



CATALOGUE  
DENTAL MATERIALS

 **omega**  
**dent**

Dear friend,

It is my great pleasure to address you now with this catalogue, which contains all the best materials that me and my team have developed over the last twenty seven years. It is a pleasure because the fact that you are reading this means that we have succeeded at our job – to provide the dentists all over the world with cost-effective quality dental materials.

I have founded Omega Dent in 1993, during a hard time for my country. The Soviet Union has fallen and people had nothing left, so when my brother dentist ran out of his supplies of devitalizing paste he had nowhere to get it. But then he turned to me, a chemist, and asked me to make it for him. Together we managed to produce Non Arsenic – first Omega Dent product.

Word has spread among dental community, and soon I had orders for more and more products. I turned to my friends and colleagues, brilliant chemists who lost their jobs after research centres were shut down all over the country. Together we came up with lots of different authentic solutions that allowed us not only to produce the necessary materials, but even to improve many of them, compared to their analogs.

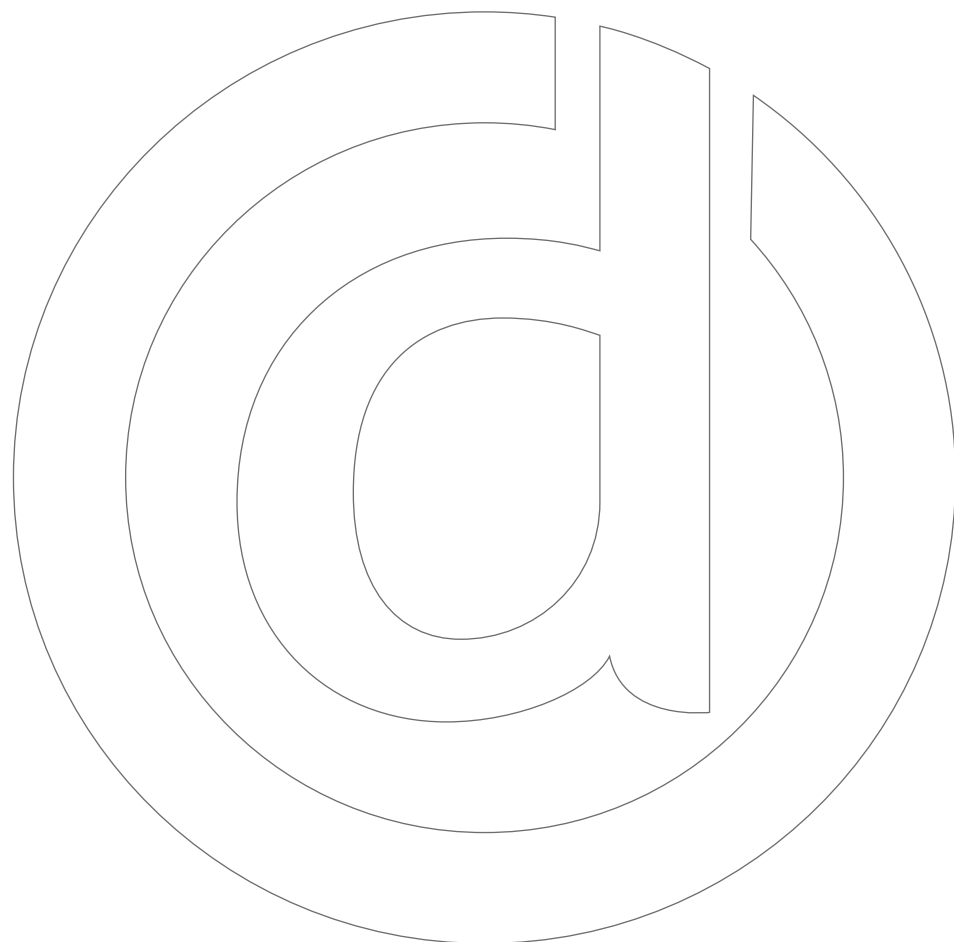
Eventually we became a private manufacturing company with strong belief in our principles: dental materials should be of high quality, they should be cost-effective, they should never bear any harm to patient and they should be comfortable to work with. This is how we work and live. Now you have a chance to overview our products and try them out.

My best regards to you,

**George Rostiashvili**

CEO

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# Endodontics



## Root canal sealing

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ZOE PASTE (non-formaldehyde)  
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## Root canal treatment

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ANTISEPTIN 300ml  
DEHYDROL  
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EDETAL GEL  
ANTISEPTIN 13ml  
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GUAIPHEN FORTE

## Root canal desobturation

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EUGENAT  
PHENOPLAST  
GUTTAPLAST



## CANAL MTA – root canal repair material



### Packaging:

3 microtubes x 0.5 g powder + 2.5ml distilled water



5 microtubes x 0.5 g powder + 2.5ml distilled water



10 microtubes x 0.5 g powder + 2.5ml distilled water



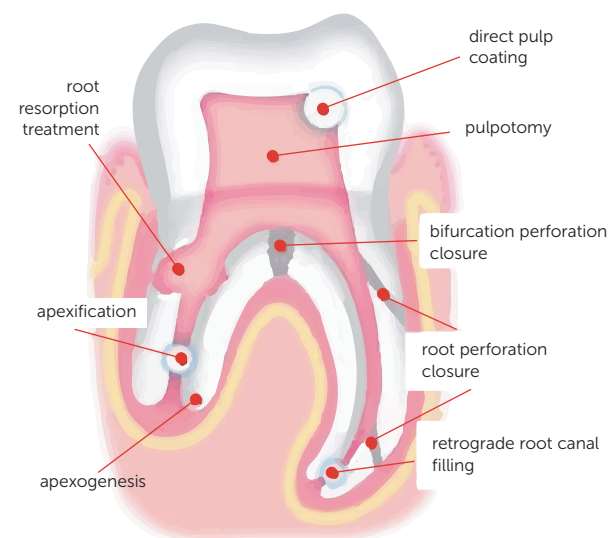
## Canal MTA

Root canal repair material Canal MTA is a powder consisting of small hydrophilic particles that cure when combined with water. When moistened, this powder turns into a gel, which then hardens creating an impenetrable barrier.

### Distinctive features of Canal MTA:

- + High sealing ability, which practically does not change with the ingress of blood.
- + High pH value = 12, as a result, has a pronounced bactericidal effect.
- + Its mechanical properties are similar to natural dentin and root cement. Does not contain monomers!
- + Stimulates osteogenesis and cementogenesis, has high strength and durability.
- + Consists of a mixture of hydrophilic particles: mainly tricalcium silicate, as well as calcium-containing compounds of iron and aluminum.
- + Cures in contact with water, increasing compressive strength over time.

## Indications:



## Contraindications:

None.

## Cautions:

1. Microtubes with Canal MTA must be kept tightly closed and in a dry place to avoid the ingress of moisture.
2. Canal MTA must be applied immediately after mixing with water to avoid dehydration during shrinkage

### Phased instructions for clinical use in the perforation of the bottom of the cavity:

1. Isolate the operative field of the tooth. Dissect the tooth cavity with diamond bur at high speed with constant irrigation with water.
2. In case of caries, it is preferable to use the Caries Indicator to remove it, dissect it at low speed, or remove it with hand tools.
3. Rinse the cavity and surrounding area with a 5% solution of sodium hypochlorite – Hypochloran-3 or Antiseptin, followed by washing with distilled water. Control capillary bleeding with a cotton swab dipped in hemostatic solution Hemostab AlCl3.
4. Prepare Canal MTA, according to the instructions.
5. Apply a small amount of MTA to the exposed area using a small / medium sized applicator with a ball.
6. Excessive moisture in the working area should be removed with a moistened cotton swab.
7. Isolate the location of the permissible barrier with a small spherical, moistened cotton swab, which should be left under a temporary seal for at least 4 hours or until the next session.
8. During the next session or 4-5 hours after creating a permissible barrier, isolate the operative field of the tooth, remove the temporary filling with a cotton ball, check the MTA. The material must be solid, otherwise the material should be washed with distilled water and the application should be repeated (starting with steps 3-4).
9. Apply a small amount of glass ionomer lining material Glassin Base to cover the MTA.
10. Etch the remaining cavity surfaces with Travex-37 orthophosphoric acid gel for 15 seconds. Rinse thoroughly.
9. Carefully dry the cavity, leaving the dentin slightly moist, but not wet. Apply adhesive. Polymerise in accordance with the instructions attached to the adhesive.
11. Complete the restoration by applying a composite material or glass ionomer such as Glassin Rest or Glassin Kids.
12. Polish the seal with "Polispaste-Z" or "Polishpaste-D Finish" followed by the application of "Fluorex" or "Trifluor" to fluorinate the tissues.

### Phased instructions for clinical use in restoration of perforation of the mouth / lateral root canals:

1. Isolate the operative field of the tooth. Clear the root canal of sawdust and decay products using the tools for root canal treatment and irrigating the canals with Hypochloran-3 or Hypochloran-5 sodium hypochlorite with subsequent washing with distilled water.
2. Dry the root canal system with paper pins moistened in Dehydrol degreasing agent. Isolate the perforation site.
3. Channels located apically from perforation should be obturated.
4. Prepare Canal MTA, according to the instructions.
5. Place the MTA in the area of the defect, using a probe for application. Using a small plunger and a cotton swab or paper pins, seal the MTA in the cavity. It is allowed to condense material using a large ultrasonic nozzle without irrigation with water at low / medium power.
6. It is recommended to make an x-ray to control the Canal MTA application. Wash the Canal MTA with distilled water from the zone of the defect and repeat the manipulations (starting from step 2.) if the permissible barrier has not been created.
7. Isolate the place of the permissible barrier with a small spherical moistened cotton swab and fill the canal with Calsept calcium hydroxide temporary material for at least 4 hours or until the next session.
8. During the next session or 4-5 hours after creating a permissible barrier, but no later than 7 days, isolate the operative field of the tooth, check the MTA. The material must be solid, otherwise it should be washed with distilled water and the application should be repeated starting with step 2.
9. Obturate the rest of the channels only after solidification of Canal MTA. Important (!): Canal MTA is a permanent part of the root canal filling after full solidification.
10. Control radiograph of the clinical situation.

### Phased instructions for clinical use in root apexification:

1. Isolate the operative field of the tooth. Clear the root canal of sawdust and decay products using the tools for root canal treatment and irrigating the canals with Hypochloran-3 or Hypochloran-5 sodium hypochlorite with subsequent washing with distilled water.
2. Dry the root canal system with paper pins moistened in Dehydrol degreasing agent. Place Calsept – temporary calcium hydroxide paste in the channel for 7 days.
5. After 7 days, isolate the operative field of the tooth, remove Calsept from the root canal system, using root canal treatment tools and irrigating canals with Hypochloran-3 or Hypochloran-5 sodium hypochlorite with subsequent washing with distilled water. Dry the canal with paper pins.
4. Prepare Canal MTA according to the instructions.
5. Place the MTA in the area of the defect, using a probe for application. Using a small plunger and a cotton swab or paper pins, seal the material in the cavity.
6. It is recommended to make an x-ray to control the application of the material. If the permissible barrier has not been created, wash the material with distilled water from the zone of the defect and repeat the manipulations starting from step 4.
7. Isolate the place of the permissible barrier with a small spherical moistened cotton swab and fill the canal with Calsept temporary calcium hydroxide paste for at least 4 hours or until the next session.
8. During the next session or 4-5 hours after creating a permissible barrier, but no later than 7 days, isolate the operative field of the tooth, check the Canal MTA. The material should be solid, otherwise it should be washed with distilled water and the application should be repeated starting from step 4.
9. Obturate the remaining part of the channels if Canal MTA is solidified and set. Important (!): The "Channel" material is a permanent part of the root canal filling after full solidification.
10. Control radiograph of the clinical situation.

### INSTRUCTIONS FOR COMPOUNDING OF Canal MTA FOR TOOTH ROOT RESTORATION:

1. It is needed to shake well the microtube with Canal MTA before mixing
2. For more convenient usage Canal MTA powder should be carefully and evenly rubbed in a proportion of one spoon of powder with one drop of liquid (distilled water) till obtaining of homogeneous mass.
3. It is allowed to add one or two drops of liquid (distilled water) additionally during the process of mixing in order to mix material to a creamy paste consistency.
4. Obtained paste should be covered by wetted napkin in case if it will be not used immediately after mixing because its lifetime is limited by 5-7 minutes. Complete solidification period for Canal MTA is 4 hours.

### Canal MTA material is completed by:

- 3 microprobes with 0.5 grams of powder + 2.5 ml of liquid (distilled water)
- 5 microprobes with 0.5 grams of powder + 2.5 ml of liquid (distilled water)
- 10 microprobes with 0.5 grams of powder + 2.5 ml of liquid (distilled water)



**GUTTASEALER PLUS** is polymeric two-component radio-opaque material used for root canal sealing (using gutta-percha posts)

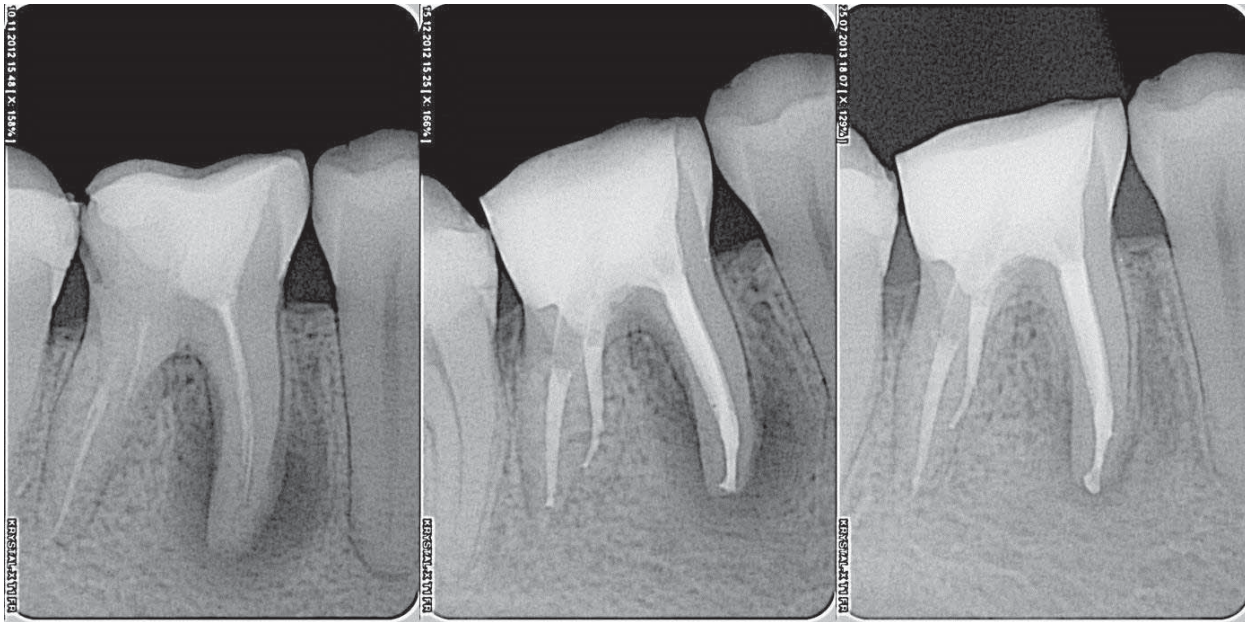


**Indications:**  
Sealing of canals for all groups of teeth using gutta-percha posts (method of lateral condensation). Guttasealer Plus is two-component (paste + paste), slow-hardening material based on modified epoxy and aminocomplex hardener. It has good adhesion to tooth substance, gutta-percha and metal pins, that contributes to maximal obturation of macro- and micro canals. Radio-opaque filler allows to use the material in heavy-going canals. Due to hardener of new generation presented in the composition, the material is more safe comparing with analogues of last generations)

**Composition:**  
– Paste A: Zirconium oxide; butanediol; calcium tungstate  
– Paste B: polymeric modified resin; barium sulphate

**Advantages:**  
+ high radio-opacity  
+ hermetic canal sealing  
+ minimal shrinkage  
+ does not change colour of enamel  
+ slow hardening  
+ absence of irritant effects to periapical tissue  
+ easily removable in retreatment cases

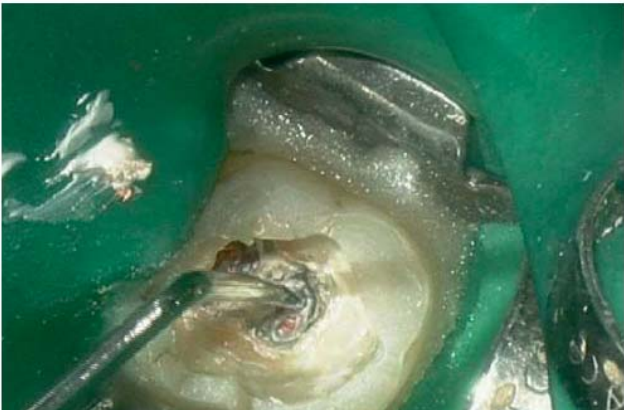
**Packaging:** the material is packaged in tubes of 8 g of Paste A and 8 g of Paste B



1. On this photo you can see installation process of gutta-percha posts in all canals using latest generation sealer Guttasealer Plus



2. After cutting of gutta-percha cones at the level of root canals



3. Condensation of gutta-percha cone at the root canal orifice level using plugger



4. Rinsing from the excessive sealer using ultrasonic tip and water (or moist cotton turunda)



## GUTTASEALER – zinc-eugenol radio-opaque paste for root canals sealing



### Indications:

Guttasealer is high-plastic radio-opaque material used for root canals sealing of all groups of teeth.

### Composition:

#### Powder:

- dexamethasone
- hydrocortisone
- iodine thymol
- calcium hydroxide
- barium sulphate
- magnesium stearate
- zinc oxide
- zirconium oxide

#### Liquid:

- eugenol
- mint oil

**Packaging:** the package of material includes 15 g of powder and 8 ml of liquid

## RESORCINOL FORMALDEHYDE PASTE – for root canal filling



### Indications:

Filling of canals with incomplete pulp extirpation both in permanent and temporary teeth. The paste emits certain amount of gaseous formaldehyde that enters tooth canals during polymerisation transforming albumins presented here into insoluble aseptic mixtures.

Therefore, the use of paste enables to perform 3 actions within single treatment:

- 1 – rapid antiseptic treatment of tooth canals;
- 2 – administering of long-active antiseptic substance;
- 3 – safe filling of canals with incomplete pulp extirpation.

### Composition:

- zinc oxide;
- barium sulfate;
- resorcinol.

#### Liquid:

- distilled water;
- formaldehyde.

#### Catalyst:

- distilled water;
- hydrochloric acid
- resorcinol.

**Packaging:** powder – 25g, liquid – 10ml, catalyst – 10ml

## ZOE PASTE – for root canal filling



### Indications:

Canals sealing of all groups of teeth. The material is a plastic hardening paste. Paste hardening in a canal lasts 48-72 hours, that allows to perform re-obturation if necessary. The base of powder is zinc oxide, barium sulphate is used as radio-opaque filler. The powder contains corticoids that allow to sufficiently reduce number and strength of painful periapical reactions. Antiseptic and corticoid substances dissolve in organic liquids gradually within the same time as paste hardens, as a result they possess therapeutic value during limited period of time. Antiseptic effect of paste caused by paraformaldehyde presence lasts for several hours after filling, that is necessary for sterilisation of organic debris that might remain in canals after pulp extraction. This property of a paste will weaken until stopped as soon as it solidifies

### Composition:

#### Powder:

- zinc oxide
- paraformaldehyde
- magnesium stearate
- barium sulfate

#### Liquid:

- eugenol

**Packaging:** the package of material includes 25 g of powder in a jar, 10 ml of liquid

## CAMPORPHEN – A – paste for root canal filling (ready-made form)



### Indications:

Filling of canals with incomplete pulp extirpation.

### Properties:

Camphorphen A is a plastic hardening paste. A full range of strong antiseptics like p-chlorophenol and camphor (that are presented in a composition of classic formula of camphor-phenol paste) have been added into a composition of the material.

### Composition:

- p-chlorophenol;
- zinc sulphate;
- barium sulphate;
- zinc oxide;
- camphor.

**Packaging:** jar containing 20 g of soft ready-to-use paste.

## ZOE PASTE – (WITHOUT FORMALDEHYDE) for root canals filling



### Indications:

Canals filling of all groups of teeth.

After powder is compounded with a liquid according to the instruction, an obtained paste could be used as a sealer with gutta-percha posts.

The material contains no formaldehyde due to its destructive impact on tissues and cytotoxicity of formaldehyde-containing materials are extremely high and reverse prolonged antiseptic impact caused by formaldehyde deposition. The material is a plastic hardening paste. Paste hardening in a canal lasts 48-72 hours, that allows to make re-obturation if necessary. The base of powder is zinc oxide, barium sulphate is used as radio-opaque filler.

### Composition:

#### Powder:

- zinc oxide
- magnesium stearate
- barium sulfate

#### Liquid:

- eugenol

**Packaging:** the package of material includes 25 g of powder in a jar, 10 ml of liquid

## CAMPORPHEN – B – paste for root canal filling (ready made form)



### Indications:

Filling of canals with incomplete pulp extirpation.

### Properties:

Camphorphen B refers to plastic hardening pastes. A full range of strong antiseptics like p-chlorophenol and camphor (that are presented in a composition of classic formula of camphor-phenol paste) have been added into a composition of the material.

### Composition:

- iodoform;
- p-chlorophenol
- zinc sulphate;
- barium sulphate;
- zinc oxide;
- camphor;
- thymol;
- menthol.

**Packaging:** jar containing 20 g of soft ready-to-use paste.

## Root canal treatment

### ANTISEPTIN – liquid for antiseptic treatment of root canals



**Packaging:** bottle with liquid 300ml

#### Indications:

Antiseptic treatment of root canals and carious cavities

#### Properties:

Composed of potent bactericidal and corticosteroid substances the liquid contains characteristics that are useful for treatment of canals and carious cavities. Almost not possessing irritant action preparation enables to reach pulp or apex with no risk of leading negative reaction. The liquid easily reaches difficult extra canals and disinfects them. Inflammations sufficiently weakened due to balanced composition of the material. Unlike most antiseptics used for root canals the liquid could be combined with antibiotics, thus enabling to perform simultaneous treatment by antiseptics and antibiotics.

#### Composition:

- chlorhexidine bigluconate – 2%;
- distilled water;

### DEHYDROL – liquid for root canal dehydrating and degreasing



**Packaging:** bottle with liquid 13 ml and 25 ml

#### Indications:

Ethanol or chloroform being used up to this moment for dental cavity dehydrating bring some inconveniences because they:

- do not remove fat deposits;
- have contraindications for some kinds of filling materials.

Offered material is intended for fast dehydrating and degreasing of root canals and carious cavities before filling as well as for treatment of teeth prepared for core coping prior to fixation of dentures.

The liquid may be used during sealing regardless to a kind of material used for sealing. It is economical in use and helpful in solving of many problems. The preparation is not intended for fat removal from gingivas.

It is necessary to wait until full desiccation of a cavity when filling by self-hardening paste or sealing permanently by acrylic resin.

#### Composition:

- ethylacetate;
- acetone;
- medical antiseptic solution 95%.

### EDETAL SOLUTION – liquid for chemical reaming of root canals



**Packaging:** bottle with liquid 13 ml

#### Indications:

chemical reaming of root canals. Recognition of canal orifices

#### Properties:

Chemical method is used for more effective reaming of root canals and based on decalcification of canal cementum. Offered material is a neutral solution that forms loose and low-resistant to mechanical action structure after compounding with mineral components of a tooth.

The material is non-toxic, absolutely harmless for periapical tissues, easy-to-use, enabling to proceed with devitalized pulp and dentine removal in a way when mechanical expansion using endodontic instruments is implemented easily even in very tight canals

#### Composition:

- EDTA salt;
- stabilizer;
- aromatizer;
- filler

### EDETAL GEL – for chemical reaming of root canals



**Packaging:** syringe with gel 5 ml

#### Indications:

Facilitation of mechanic treatment of tooth canals during preparation for sealing of canals with difficult access. Recognition of canal orifices.

#### Properties:

Edetal Gel is a neutral gel that lubricates an instrument, facilitates its penetration and allows more efficient canal forming. This gel forms loose and low-resistant to mechanical action structure after compounding with mineral components of a tooth. Complex use of the gel and sodium hypochlorite ensures better treatment of a canal.

EDTA dissolves inorganic deposits in a canal while NaOCl makes it with organic ones. Foaming facilitates cleaning of canals

#### Composition:

- EDTA salt;
- lubricating components;
- foaming agents;
- gelling agents

### ANTISEPTIN – liquid for antiseptic treatment of root canals



**Packaging:** bottle with liquid 13 ml

#### Indications:

Antiseptic treatment of root canals and carious cavities

#### Properties:

liquid consists of potent microbicides and corticosteroids and possesses combination of properties useful for antiseptic treatment of canals and carious cavities

#### Composition:

- antiseptic solution;
- chlorhexidine;
- eugenol;
- distilled water.

### CAMPORPHEN SOLUTION – dental material for antiseptic treatment of root canals.



**Packaging:** bottle with liquid 13 ml

#### Indications:

Antiseptic treatment of root canals and carious cavities

#### Properties:

Camphorphen Solution (camphor parachlorophenic acid) is a liquid consisting of potent microbicides and corticosteroids that possesses combination of properties useful for antiseptic treatment of canals and carious cavities and widely used in endodontic treatments at present.

Camphorphen is oleaginous fluid resulting from the mixing of active components. Chlorophenol is very active topical antiseptic with inherent bactericidal and fungicidal effect. DL-camphor has antiseptic and sedative effect. The preparation does not irritate periapical tissues, enabling to reach pulp or apex with no risk of causing negative reaction

#### Composition:

- Chlorophenol;
- Camphor;
- Dexamehasone



## GUAIAPHEN – dental material for antiseptic treatment of root canals.



**Packaging:** bottle with liquid 13 ml

### Indications:

Antiseptic treatment of root canals after canal exenteration in cases of fourth-degree caries; mummification of nerve fibers after devitalization by Arsenic paste; disinfection of root canals after formation of cyst, abscess, fistula; as a based on zinc oxide liquid for hardening paste; for filling of root canals.

### Properties:

Guaiaphen is a liquid consisting of potent microbicides and corticosteroids that has combination of properties useful for antiseptic treatment of canals and carious cavities and widely used in endodontic treatments.

Guaiacol is one of the main components of creosote and very active topical antiseptic with inherent bactericidal and fungicidal effect, it has topical analgesic effect. Phenol has antiseptic and mummifying effect.

### Composition:

- guaiacol;
- phenol;
- formaldehyde;
- dexamethasone
- glycerine.

## HYPOCHLORAN-3, HYPOCHLORAN-5 – sodium hypochlorite solution for antiseptic treatment of root canals



### Packaging:

Hypochloran-5 is packaged into 25ml and 150 ml glass bottles; Hypochloran-3 is packaged into 300 ml plastic bottle

### Indications:

antiseptic treatment of root canals during the preparation for sealing

### Mechanism of action and properties:

Nitrogen, formaldehyde and acetaldehyde are formed shortly after sodium hypochlorite contacts with tissue proteins. Peptide bonds break, proteins become solidified. Thus, as a result of action of sodium hypochlorite, necrotic tissues and pus become solidified enabling antimicrobial agent to disinfect a canal more efficiently

## GUAIAPHEN FORTE – dental material for antiseptic treatment of carious cavities.



**Packaging:** bottle with liquid 13 ml

### Indications:

Antiseptic treatment of second-degree carious cavities prior to sealing; starting treatment of third degree carious cavities prior to devitalization; antiseptic treatment of root canals after pulp amputation and extirpation; as a based on zinc oxide liquid for hardening paste for filling of root canals.

### Properties:

a liquid consisting of potent microbicides and corticosteroids that have combination of properties useful for antiseptic treatment of canals and carious cavities. Guaiacol is a topical antiseptic with inherent bactericidal and fungicidal effect, it has topical analgesic effect. Phenol has antiseptic and mummifying effect. Dexamethasone is a corticosteroid that reduces risk of inflammatory and allergic reaction

### Composition:

- guaiacol;
- phenol;
- formaldehyde;
- dexamethasone
- glycerine.

## Root canal desobturation

## EUGENAT – liquid for root cana desobturation



**Packaging:** bottle with liquid 13 ml

### Indications and properties:

It might be necessary to clean the root canal from previously used sealing material in cases of repeated sealing of a root canal. Special liquids facilitating such manipulations are used in this case

Eugenat is a liquid for unsealing of root canals of teeth that is used for softening of pastes based on zinc oxide and eugenol.

### Composition:

- thymol;
- isoamyl acetate;
- ethylene tetrachloride

## PHENOPLAST – liquid for root canal desobturation



**Packaging:** veal with liquid 13 ml

### Indications and properties:

Used for softening of pastes based on resorcinol-formaldehyde resins

It might be necessary to clean the root canal from previously used sealing material in cases of repeated sealing of a root canal. Special liquids facilitating such manipulations are used in this case.

### Composition:

- phenyl ethylene;
- formamide

## GUTTAPLAST – liquid for root canal desobturation



**Packaging:** bottle with liquid 13 ml

### Indications and properties:

re-treatment of root canals previously sealed using gutta-percha.

Special liquid facilitating manipulations is used for unsealing of a canal previously sealed using gutta-percha in cases of repeated sealing of root canals.

### Composition:

- eucalyptol
- cytral

# Therapeutical materials



## Pulp devitalization

NON ARSENIC

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## Treatment of pulpitis and periodontitis

PULPOSEPTINE  
METROZOL  
IODEX

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## Calcium hydroxide materials

CALCIPULPINE  
CALCIPULPINE-F  
CALCIPULPINE PLUS  
CALSEPT  
CALSEPT IODO

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## Hemostatic materials

ALVOSTASE sponge  
ALVOSTASE sponge №2  
ALVOSTASE sponge №3  
ALVOSTASE filaments  
ALGISTAB  
RETRAGEL  
HEMOSTAB FESO4  
HEMOSTAB ALCL3

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## Pulp devitalization

### NON ARSENIC – material for pulp devitalization



**Packaging:** jar containing 6.5 g of paste

#### Indications:

Pulp devitalization without arsenic. Optional medical product for pulp devitalization without arsenic when a retreatment is necessary.

#### Properties:

Non Arsenic contains trioxymethylene as a powerful antiseptic, which leads to tissue necrosis in high concentrations. It is used in devitalization paste composition for tooth pulp necrotization and has durable action. Pulp devitalization completes within 5 – 7 days. Does not cause toxic impact on periodontic tissues

#### Composition:

- paraformaldehyde
- camphor;
- parachlorophenol;
- lidocaine;
- dimethylsulphoxide
- distilled glycerin;
- fibrous filler.

## Treatment of pulpitis and periodontitis

### PULPOSEPTINE – paste for treatment of gangrenous pulpitis and periodontitis



**Packaging:** – tube containing 10 g of paste

#### Indications:

Used as medicamental dressing of root canals during treatment of gangrenous pulp, periapical periodontitis and inflammations as well as for treatment of granuloma, fistula and cyst

#### Composition:

- chloramphenicol;
- neomycin sulphate;
- dexamethasone;
- excipient

#### Properties:

Chosen antibiotics have wide range of bacteriostatic effect.

Chloroamphenicol is antimicrobial, component, it is active against many species of microbes. Acts on bacteria strains that are resistant to penicillin, streptomycin, sulphanilamide.

Neomycin sulphate acts on most of bacteria resistant to chloroamphenicol and has wide range of antimicrobial effect.

Active against most of cocci and gram-negative bacteria

Dexamethasone blocks acute inflammations, allergic and painful processes in periapical tissue.

### METROZOL – paste for treatment of gangrenous pulpitis and periodontitis



**Packaging:** – tube containing 8 g of paste

#### Indications:

Used as medicamental dressing of root canals during treatment of gangrenous pulp, periapical periodontitis and inflammations as well as for treatment of granuloma, fistula and cyst

#### Composition:

- metronidazole;
- chlorohexidine;
- dexamethasone;
- polymer base.

#### Properties:

Balanced combination of metronidazole and chlorohexidine with the most effective antimicrobial action that inhibits pulp infection due to wide range of its bacteriostatic properties.

Metronidazole is a derivative of nitroimidazole with antiprotozoal and antibacterial effect. Chlorohexidine is antiseptic with antimicrobial effect. Mechanism of its action is that cytoplasmatic content of bacterium precipitates in high concentrations of chlorhexidine causing death of bacteria

### IODEX – paste for treatment of pulpitis and periodontitis



**Packaging:** jar containing 15 g of soft paste

#### Indications and properties:

Iodex is used as therapeutic and prophylactic drug in acute and chronic periodontitis; for treatment of pulpitis; repeated infections after sealing, treatment of infected canals; 3rd and 4th degree caries. Iodex paste has disinfection and bactericidal effect, deodorizes, develops protective properties of periapical tissue, does not prevent formation of subadjacent tooth germ. The preparation allows to exactly determine the length of sealed tooth canal on X-ray image. A treatment could be continued during the next visit due to the paste is non-hardening. Its use minimizes a risk of making canal impervious after its filling

#### Composition:

- Zinc oxide;
- Barium sulfate
- Iodoform
- Camphor
- olive oil

## Calcium hydroxide materials

### CALCIPULPINE, CALCIPULPINE-F – Protective calcium hydroxide liner



**Packaging:** 2 plastic syringes x 2,5ml, 4 metal tips and plastic container filled with calcium hydroxide with special additives preventing material hardening in a tip.

#### Indications and properties:

Calcipulpine, Calcipulpine-F are used as a cavity liner to protect dentine in cases of deep caries, accidental pulp exposure and after pulpotomy. Liner is used for hyperesthesia treatment of tooth prepared for dental crown.

It protects pulp from harmful effects, particularly from bacteria toxins and promotes formation of secondary dentine. Pulp capping with a paste after accidental exposure is obligatory. Such technique is utilized in case of pulpitis treatment using biologic method (pulp hyperemia, pulpitis of permanent teeth at initial stage in pediatric dentistry). Material contains calcium hydroxide which has high pH level and material chemically neutralizes acids penetrating from oral cavity or from cements and, thus, protects the pulp from impact of acids being applied at the bottom of cavity.

#### Composition:

- sodium fluoride (in Calcipulpine-F only);
- high quality calcium hydroxide;
- zirconium oxide;
- filler;
- plasticizer;
- paste-forming agent

### CALCIPULPINE PLUS – two-component protective calcium hydroxide liner



**Packaging:** a tube with 11g of paste "A" + tube with 13g of paste "B";  
Attention! Each tube with paste should be covered with its original cap. Do not use cap of another tube!

#### Indications and properties:

Calcipulpine Plus is used as a self-hardening protective cavity liner based on calcium hydroxide and hydroxyapatites for direct and indirect pulp capping and for isolation of tooth from filling materials. Protects pulp from harmful effects, particularly from bacteria toxins.

Calcipulpine Plus contains calcium hydroxide which has high pH level. It chemically neutralizes acids penetrating from oral cavity or from cements being applied at the bottom of cavity and thus protects the pulp from penetration of acids. Being in contact with a pulp, the paste promotes formation of secondary dentine. Calcipulpine Plus is a two-component system (paste+paste). A homogenous paste is formed after mixing of 2 initial components and it could be easily applied into a cavity.

#### Composition:

##### Paste-A:

- calcium hydroxide;
- filler;
- plasticizer

##### Paste-B:

- calcium tungstate;
- calcium phosphate;
- salicylic polymer;
- filler



CALSEPT – calcium hydroxide for root canal filling



Packaging: 2 x 2,5ml syringes + 20 application tips in plastic package.

**Indications:**  
Endodontic treatment of infected root canals; temporary root canal filling in cases of granulating periodontitis and granulomatous periodontitis. Used for disinfection of canals and PH maintenance 11–12. Calsept is used as a healing liner to promote formation of secondary dentine in deep carious cavities.

**Properties:**  
Infection penetrates through dentine tubules into root dentine as a result of suppurative inflammation localized in pulp and periodontium. Therefore conventional technique of root canal antiseptic treatment does not guarantee full protection against secondary infection. Thus, besides conventional method of root canal treatment, it is necessary to perform temporary root canal obturation using Calsept to provide long-lasting antiseptic action in root canals.

- Composition:**
- calcium hydroxide;
  - barium sulphate;
  - sodium chloride;
  - calcium chloride;
  - sodium bicarbonate;
  - distilled water

CALSEPT IODO – calcium hydroxide for root canal filling



Packaging: 2 x 2,5ml syringes + 20 application tips in plastic package.

**Indications:**  
Endodontic treatment of infected root canals; temporary root canal filling in cases of granulating periodontitis and granulomatous periodontitis. Used for disinfection of canals and PH maintenance at the level of 11–12 high. Calsept is used as a healing liner to promote formation of secondary dentine in deep carious cavities. Contains iodoform increasing bactericidal effect.

**Properties:**  
Infection penetrates through dentine tubules into root dentine as a result of suppurative inflammation localized in pulp and periodontium. Therefore conventional technique of root canal antiseptic treatment does not guarantee full protection against secondary infection. Thus, besides conventional method of root canal treatment, it is necessary to perform temporary root canal obturation using Calsept Iodo to provide long-lasting antiseptic action in root canals.

- Composition:**
- calcium hydroxide;
  - barium sulphate;
  - iodoform;
  - sodium chloride;
  - calcium chloride;
  - sodium bicarbonate;
  - distilled water

Hemostatic materials

ALVOSTASE SPONGE – hemostatic and antiseptic alveolar dressing



Packaging: jar containing 30 sponges (1 x 1 x 1 cm)

**Indications**  
Material is used as a post-extraction alveolar dressing. Alvostase (sponge) are hemostatic collagen cubes (1 x 1 x 1 cm), impregnated with active solution.

Alvostase is a special remedy for treatment and prophylaxis of alveolitis. Alvostase rapidly alleviates the pain and eliminates inflammatory process after tooth extraction after introducing into a tooth socket. The material has therapeutic effect for few hours and gradually resorbes in the tooth socket after that. Active ingredients do not provoke an inflammation of oral mucosa. Alvostase works towards rapid and painless healing of tooth socket when used as a prophylactic instrument after tooth extraction,

- Composition**
- tricalcium phosphate;
  - eugenol;
  - olive oil;
  - iodoform;
  - hemostatic sponge

ALVOSTASE SPONGE №2 – hemostatic and antiseptic alveolar dressing with metronidazole and chlorhexidine



Packaging: jar containing 30 sponges (1 x 1 x 1 cm)

**Indications:**  
Used for prophylaxis of inflammatory complications after surgical treatment in oral cavity; as post-extraction alveolar dressing. Treatment of alveolitis and periodontal abscess; filling of periodontal pockets after performing local anti-inflammatory therapy or after curettage for antiseptic treatment.

**Properties:**  
Alvostase (sponge №2) with metronidazole and chlorhexidine is a special remedy for use in surgical dentistry and periodontology. Alvostase contains a combination of active ingredients that have bactericidal effect and which are sufficiently active against a number of pathogenic microbes. Dexamethasone is a corticosteroid that significantly reduces the quantity and severity of possible pain reactions. Alvostase (sponge №2) is non-toxic locally and therefore it does not provoke ulceration on the oral mucosa.

- Composition:**
- metronidazole;
  - chlorhexidine;
  - dexamethasone;
  - conductor;
  - flavoring agent;
  - collagenous sponges

ALVOSTASE SPONGE №3 – Hemostatic and antiseptic alveolar dressing with chloramphenicol and neomycin



Packaging: jar containing 30 sponges (1 x 1 x 1 cm)

**Indications:**  
Used for prophylaxis of inflammatory complications after surgical treatment in oral cavity; as post-extraction alveolar dressing; for treatment of alveolitis and periodontal abscess; for filling of periodontal pockets after local anti-inflammatory therapy or after curettage for antiseptic treatment.

**Properties:**  
Alvostase (sponge №3) with chloramphenicol and neomycin is a special remedy for use in surgical dentistry and periodontology. Alvostase contains a combination of active ingredients with bactericidal effect and that are sufficiently active against most of pathogenic microbes and causative agents of purulent infection. Alvostase (sponge №3) is active against bacteria strains, which are resistant to treatment with antibiotics such as penicillin, tetracyclines and sulfanilamides.

- Composition:**
- chloramphenicol;
  - neomycin sulphate;
  - chlorhexidine;
  - dexamethasone;
  - conductor;
  - flavoring agent;
  - collagenous sponges



ALVOSTAGE FILAMENT – hemostatic and antiseptic alveolar dressing



Packaging: a jar containing tampon-filament (1cm x 1m).

**Indications:**  
The material is used as a post-extraction alveolar dressing. Alvostase (filament) is a rayon filament made of nonwoven fabric (1 cm x 1 m) impregnated with active solution.

**Properties:**  
Alvostase is a special remedy for treatment of alveolitis. Alvostase rapidly alleviates a pain after tooth extraction being introduced into a tooth socket. Material has therapeutic effect for few hours and after that it gradually eliminates from the socket. Alvostase has low local toxicity, it does not provoke ulceration on the oral mucosa. Alvostase works towards rapid and painless healing of tooth socket being used as a prophylactic instrument after tooth extraction.

**Composition:**  
– tricalcium phosphate;  
– eugenol;  
– olive oil;  
– iodoform;  
– rayon filament

ALGISTAB – hemostatic powder



Packaging: plastic jar with 10g of powder + applicant

**Indications:**  
Algistab is used as a hemostatic agent after tooth extraction, calculus scaling, after direct impression taking, in cases of periodontal care, alignment of comb-shaped dental arch, gingivectomy and for tooth sockets treatment.

**Properties:**  
Algistab stops any types of capillary hemorrhage. The main active ingredients of powder are alginic acid in combination with high-viscosity sodium alginate, that form high-viscosity gel when in close contact with blood, which exerts pressure on capillaries and, thus, keeps blood clots in the tooth socket. Iodoform and methyl parahydroxybenzoate provide antiseptic properties of powder and increase material shelf life. Algistab is non-toxic material and it might be combined with antibiotic or antiseptic treatment.

**Composition:**  
alginic acid  
high-viscosity sodium alginate  
methyl parahydroxybenzoate  
iodoform

RETRAGEL – gel for gingival retraction



Packaging: 2 x 2,5ml syringes + 25 disposable metal application tips.

**Indications**  
Gingival retraction before impression taken with or without removal of gingival tissues adjacent to a tooth; for stopping of poor bleeding in cervical area. Gel is used prior to permanent cementation of prosthetic restorations and for stopping poor capillary hemorrhage.

**Properties:**  
Retragel is an aluminium chloride polymeric gel which does not run or drip after its application and has a good adherence to tissues of operating zone. The abovementioned properties are distinctive features of Retragel. Due to the gel has polymeric base, it does not dry providing defined advantages and ease of handling. Retragel contains aluminium chloride, vasoconstrictors and antiseptic agents to ensure beneficial effect on an operating zone. Due to such content, gel has astringent, hemostatic and disinfecting properties.

**Composition:**  
– aluminium chloride;  
– oxyquinoline sulphate;  
– stabilizer;  
– gelling agent;  
– filler

HEMOSTAB (FESO4) – Solution for capillary hemostasis



Packaging: bottle containing 13ml of liquid

**Indications:**  
Any types of capillary hemostasis; in gingival bleeding in cervical zone of a tooth.

**Properties:**  
Hemostab is a water-based solution of ferric sulphate. Ferric sulphate stops any types of capillary hemorrhage. It is necessary to isolate operating zone using cotton pellets and treat the gingival tissues in the bleeding zone with hemostatic solution in order to stop gingival bleeding. Moreover, it is necessary to administer around the bleeding area to avoid blood oozing. Bleeding from root canal often occurs after pulp extraction or its necrosis. Hematoma in close proximity to tooth apex provokes inflammatory process with subsequent granuloma formation. To prevent these effects it is necessary to treat root canal with a cotton pellet, wetted with hemostatic solution.

**Composition:**  
– ferric sulphate;  
– oxyquinoline sulphate;  
– filler

HEMOSTAB (ALCL3) – solution for capillary hemostasis



Packaging: bottle containing 13ml or 25ml of liquid

**Indications:**  
Gingival bleeding in cervical zone of the tooth. Apical bleeding.

**Properties:**  
Aluminum chloride stops capillary hemorrhage. It is necessary to isolate operating zone using cotton pellets and treat the gingival tissues in the bleeding zone with hemostatic solution in order to stop gingival bleeding. Moreover, it is necessary to administer the bleeding area to avoid blood oozing. Bleeding from root canal often occurs after pulp extraction or its necrosis. Hematoma in close proximity to tooth apex provokes inflammatory process with subsequent granuloma formation. To prevent these effects it is necessary to treat root canal with a cotton pellet, wetted with hemostatic solution.

**Composition:**  
– aluminium chloride;  
– oxyquinoline sulphate;  
– filler

# Glass ionomers



## Glass ionomers

GLASSIN BASE  
GLASSIN REST  
GLASSIN FIX  
GLASSIN FISS  
GLASSIN KIDS

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GLASSIN BASE – self-curing glass ionomer lining cement



**Indications:**  
GlassIn Base is a self-curing glass ionomer lining cement used as a liner under composites or amalgam restorations. Cement is used in combination with calcium hydroxide materials for deep carious cavities treatment.

**Properties:**  
GLASSIN Base powder is a mixture of fine particles of aluminium-calcium-lanthanum-fluorosilicic glass with radiopaque additives. GlassIn Base liquid is an aqueous solution of a polyacrylic acid (with specific molecular weight) with organic additives improving its properties.

The distinctive feature of "powder+liquid" system is that all particles are bound after cement structure formation. Consequently due to this feature bound particles are not leached from cement. GlassIn Base is highly biocompatible and has good chemical adhesion to dentin and enamel. Anticariogenic activity is ensured by prolonged fluoride ions release.



Classic glass ionomer cements with prolonged release of fluorine

**Packaging:** 1 x 10g powder bottle + 1 x 8g liquid bottle

GLASSIN REST – self-curing glass ionomer filling material



**Indications**  
GlassIn Rest is a self-curing glass ionomer filling material for restorations of class III and V cavities. Restorations of all cavity classes of deciduous teeth. Restorations of noncarious lesions of tooth tissues. It is possible to use the material as a universal cavity liner under all types of filling materials.

**Properties:**  
Glassin Rest powder is a mixture of fine particles of aluminium-calcium-lanthanum-fluorosilicic glass with radiopaque additives. Glassin Rest liquid is an aqueous solution of a polyacrylic acid with organic additives improving its properties.

The distinctive feature of "powder+liquid" system is that all particles are bound after cement structure formation. Consequently due to this feature bound particles are not leached from cement. GlassIn Rest is highly biocompatible, it is characterized by high strength as well as good chemical adhesion to enamel and dentin ensuring excellent marginal seal. Material has optimal esthetic properties. Anticariogenic activity is supported by prolonged fluoride ions release.



Classic glass ionomer cements with prolonged release of fluorine

**Packaging:** 1 x 10g powder bottle + 1 x 8g liquid bottle;  
Shades: A2, A3, B1, B2, B3, C2.

GLASSIN FIX – self-curing glass ionomer luting cement



**Indications:**  
GlassIn Fix is used for cementation of crowns, bridges, inlays and posts.

**Properties:**  
The distinctive feature of "powder+liquid" system is that all particles are bound after cement structure formation. Consequently due to this feature bound particles are not leached from cement. GlassIn Fix is highly biocompatible and is characterized by chemical adhesion to dentin and enamel. Moreover, prolonged fluoride release ensures anticariogenic activity.

**Composition:**  
GlassIn Fix powder is a fine-dispersed aluminium-calcium-lanthanum-fluoro-silicic glass with radiopaque additives. GlassIn Fix liquid is an aqueous solution of polyacrylic acid (with specified molecular weight) with organic additives improving its properties.



Classic glass ionomer cements with prolonged release of fluorine

**Packaging:** 1 x 10g powder bottle + 1 x 8g liquid bottle

GLASSIN FISS – self-curing glass ionomer pit and fissure sealant



**Indications:**  
GlassIn Fiss is used for pit and fissure sealing of posterior teeth. Isolation of a surface of exposed dental neck in case of deep recession. Restorations of noncarious lesions of tooth tissues. Material is used as a universal cavity liner under different restorations.

**Properties:**  
The distinctive feature of "powder+liquid" system is that all particles are bound after cement structure formation. Consequently due to this feature bound particles are not leached from cement. GlassIn Fiss is highly biocompatible and has good chemical adhesion to enamel and dentin. Anticariogenic activity is ensured by prolonged release of fluoride ions.

**Composition:**  
GlassIn Fiss powder is a fine-dispersed aluminium-calcium-lanthanum-fluoro-silicic glass with radiopaque additives. GlassIn Fiss liquid is an aqueous solution of polyacrylic acid (with specific molecular weight) with organic additivesimproving its properties.



Classic glass ionomer cements with prolonged release of fluorine

**Packaging:** 1 x 10g powder bottle + 1 x 8g liquid bottle

GLASSIN KIDS – self-curing glass ionomer filling material for pediatric dentistry



**Indications:**  
GlassIn Kids is used as a filling material for restorations of all cavity classes of deciduous teeth and cavity classes III and V of permanent teeth. Restorations of noncarious lesions of hard tissues.

**Properties:**  
The distinctive feature of "powder+liquid" system is that all particles are bound after cement structure formation. Consequently due to this feature bound particles are not leached from cement. GlassIn Kids is highly biocompatible and has good chemical adhesion to enamel and dentin. Anticariogenic activity is ensured by prolonged release of fluoride ions.

**Composition:**  
GLASSIN Kids powder is a fine-dispersed aluminium-calcium-lanthanum-fluoro-silicic glass with radiopaque excipients. GlassIn Kids liquid is an aqueous solution of polyacrylic acid (with specific molecular weight) with organic additives improving its properties.



Classic glass ionomer cements with prolonged release of fluorine

**Packaging:** 1 x 10g powder bottle + 1 x 8g liquid bottle  
Shades A2 A3



# Preventive treatment & accessories



## Polishing the restorations & calculus removal

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POLISHPASTE-D initial  
POLISHPASTE-D dry gloss  
POLISHPASTE-D finish  
POLISHPASTE-Z  
POLISHPASTE-Z+F  
POLISHPASTE-Z+W  
SCALING

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DESENSITIZING MOUSSE  
FLUOREX  
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SENSISTAB GEL  
CARIES INDICATOR  
CARIES INDICATOR GEL  
TRAVEX-37  
TRIFLUOR  
LIQUID KOFFERDAM  
AIR PROPHY



## Polishing the restorations & calculus removal

### POLISHPASTE-D INITIAL – diamond paste for initial polishing of composite and ceramic restorations



#### Indications:

Paste for final polishing of restorations made of self-curing and light-curing composites.

#### Properties:

The mechanism of action of PolishPaste – D – Initial is based on the special abrasive properties of a fine diamond powder. Due to these properties diamond abrasive material performs the initial polishing of shaped composite restorations.

#### Composition:

- diamond abrasive material;
- water-soluble polymer base;
- silicone additives;
- stabilizer;
- aromatizer

Packaging: 2 x 3ml syringes.

### POLISHPASTE-D DRY GLOSS – diamond paste for final polishing of composite and ceramic restorations to dry gloss



#### Indications:

Paste for final polishing of restorations made of self-curing and light-curing composites.

#### Properties:

The mechanism of action of PolishPaste – D – Dry Gloss is based on the special abrasive properties of a fine diamond powder. Due to these properties, diamond abrasive material performs the final polishing of shaped composite restorations to dry gloss.

#### Composition:

- diamond abrasive material;
- water-soluble polymer base;
- silicone additives;
- stabilizer;
- aromatizer

Packaging: 2 x 3ml syringes.

### POLISHPASTE-D FINISH – diamond paste for final polishing of composite and ceramic restorations



#### Indications:

Paste for final polishing of restorations made of self-curing and light-curing composites.

#### Properties:

The mechanism of action of PolishPaste – D – Finish is based on the special abrasive properties of a fine diamond powder. Due to these properties, diamond abrasive material performs the final polishing of shaped composite restorations.

#### Composition:

- diamond abrasive material;
- water-soluble polymer base;
- silicone additives;
- stabilizer;
- aromatizer

Packaging: 2 x 3ml syringes.

### POLISHPASTE-Z – paste for calculus removal and final polishing of composite and ceramic restorations



#### Indications:

calculus removal using a mechanical action; final polishing of restorations made of self-curing and light-curing composites

#### Properties:

The mechanism of action of PolishPaste – Z is based on the special abrasive properties of a fine abrasive material. Due to these properties, PolishPaste – Z removes the tooth calculus not eroding the enamel. Moreover, the fine abrasive material gives the paste final polishing properties that allow to achieve shining of restored surfaces.

#### Composition:

- fine abrasive material;
- binding components;
- filler;
- aromatizer;
- silicone additives

Packaging: 40g paste jar

### POLISHPASTE-Z+F – paste for soft dental deposits removal and for fine enamel polishing



#### Indications:

Soft dental deposits removal using mechanical action; final enamel polishing after tooth calculus removal; fluoridation treatment of tooth enamel; enamel antiseptic treatment.

#### Properties:

The mechanism of PolishPaste – Z + F action is based on the special abrasive properties of fine abrasive material in combination with fluorination agent. Due to these properties, PolishPaste – Z + F removes soft dental deposits without eroding an enamel. Moreover, it is necessary (particularly in cases of alveolar pyorrhea) to eliminate any types of enamel roughness and fissures during enamel polishing after calculus removal – this helps to prevent new calculus formation

#### Composition:

- fine abrasive material;
- binding components;
- fluoride ingredients;
- filler;
- aromatizer;
- silicone additives

Packaging: 40g paste jar

### POLISHPASTE-Z+W – paste for fine enamel polishing & whitening



#### Indications:

soft dental deposits removal using mechanical action;  
final enamel polishing and whitening after tooth calculus removal;  
fluoridation of enamel.

#### Properties:

The mechanism of PolishPaste – Z + W action is based on special abrasive properties of fine abrasive material in combination with whitening agent (carbamide peroxide). Combination of aminofluoride with potassium nitrate causes enamel impregnation by fluorine ions thus reducing enamel sensitivity. Due to these properties, PolishPaste – Z + W removes soft dental deposits not eroding an enamel and performs whitening, that is very important for making of high esthetic properties.

#### Composition:

- fine abrasive material;
- binding components;
- titanium dioxide;
- carbamide peroxide;
- filler;
- aromatizer

Packaging: 40g paste jar

**SCALING** – gel for softening and removal of hard dental plaque or calculus deposits



**Indications:**

Dental calculus removal in case of alveolar pyorrhea; green calculus dissolution.

**Properties:**

Calculus removal in case of alveolar pyorrhea is always a challenging task. Treatment of mobile teeth using conventional methods in combination with mechanical action of abrasive paste sometimes is not successful. In such cases dental procedure is performed using special gel or paste for calculus removal. The mechanism of action of this paste is based on its properties to soften and dissolve the calculus. The gel contains coloring agents which dye both living and necrotic tissues detecting invisible to the unaided eye fissures.

**Composition:**

- hydrochloric acid;
- potassium iodide;
- polyatomic alcohol;
- gel former;
- distilled water;
- silica

**Packaging:** 2 x 2,5ml syringes + 20 disposable application tips.

## Topical anesthetics

**LIDOXOR GEL** – dental material for topical application with optimal composition of camomile and milfoil extract with 15% of lidocaine



**Indications:**

local anesthesia of oral mucosa prior to anesthetic injection; topical anesthesia prior to extraction of mobile or deciduous teeth, lancing of abscesses and calculus scaling.

**Properties:**

Gel contains well-known anesthetic lidocaine hydrochloride, which provides deep and rapid anesthetic effect in operating zone blocking pain and discomfort during dental procedures. Flavoring agent containing in gel provides pleasant odor, saccharin sugars and sorbitol ensures softness of the gel. Lidoxor Gel does not cause burning or prickling sensation. It is particularly recommended to use the gel for patients with allergic reaction to benzocaine because the use of this gel sharply minimizes risks of abovementioned reactions.

**Composition:**

- sodium carboxylmethylcellulose;
- camomile extract;
- milfoil extract;
- xylitol;
- aromatizer;
- filler

**Packing:** 1 x 45g tube; Available in three flavours: wild berry, green apple, citrus.

## Preventive materials

**DESENSITIZING MOUSSE** – material for enamel remineralization and desensitizing



**Composition:**

- xylitol;
- distilled water;
- titanium oxide;
- tricalcium phosphate;
- sodium carboxymethylcellulose;
- polyethylene glycol;
- RonaCare Olaflur

**Advantages:**

Hyposensitization Mousse advantages:

- comfortable and convenient use;
- high clinical effectiveness: momentary action;
- safe in fluorosis;
- helps to neutralize excessive acidity caused by acidogenic bacteria activity in plaque
- the whitening effect prolongates and strengthens after mousse use
- the mousse is recommended to patients for home use, for more efficient therapy and prevention of caries including dental bite splint use.

**Packaging:** 2 x 3 ml plastic syringes;  
Disposable plastic application cannules – 10 pcs

**Indications:**

The material is used for removal of stains and discolorations of crowns caused by natural, pharmacological and congenital reasons. Besides this the preparation allows to treat tetracycline stains in hypoplasia of teeth. The system is used for whitening of devitalized and decolored teeth prior to work-up of crowns, veneers and composites

**Mode of administration:**

1. uncover protective cap, cover with cannula, apply one coating of the mousse on dry tooth enamel for 10-15 minutes.
2. The course of use after clinic whitening and professional oral hygiene procedure is 3-5 times within 5-7 days
3. Take course 2-3 times a week within 10-14 days for sensitivity obviation and carious prevention

**FLUOREX** – anticariogenic prophylactic liquid (transparent)



**Indications:**

- after dental deposits removal in process of professional hygienic tooth cleaning
- in cases of caries at the stage of "white spot", root caries, wedge-shaped defects
- hyperesthesia treatment
- after enamel polishing
- to protect the stump of vital tooth
- to treat adjacent tooth contact surfaces
- for clasp denture attachment
- after periodontal care to protect tooth cervical area
- in cases of cervical hyperesthesia
- in pediatric dentistry for caries treatment and prophylaxis
- for deciduous teeth retention
- in case of pigmented deep fissures of permanent teeth,
- at the stage of fissure maturation
- for treatment of immature fissures

**Properties:**

The active ingredient of remedy is aminofluoride, a new generation fluorine compound, which possesses increased activity and higher safety.

**Composition:**

- aminofluoride
- pentylacetate
- collodion

**Packaging:** 1 x 13ml liquid bottle.



## SENSISTAB GEL – gel for dentinalgia curing



**Packaging:** 2 x 2,5ml syringes.with gel disposable cannules – 20 pcs

### Indications:

dentinalgia in cervical area; to be used prior to cementation of the temporary crowns, after prophylactic teeth cleaning, in the process and after teeth bleaching, for use in periodontal surgery

### Properties:

Sensistab is a non-toxic easy-to-apply material, which is well tolerated by soft tissues and does not provoke teeth decoloration. The chemical composition of material allows to remove smear layer, to seal dentine tubules and perform dentinalgia curing within one session. The tooth surface cleaning and rinsing is not required after use.

Sensistab reacts with tooth hydroxyapatite, forming small calcium granules, which are precipitated into dental tubules and on the alive dentine surface within few seconds. Precipitated acid-resistant crystals form biological and chemical complex with living dentine.

### Indications:

- Hypersensitivity of dentin in cervical area;
- Before placing of temporary crowns;
- After preventive teeth cleaning;
- During and after whitening of teeth;
- Periodontal surgery.

### Composition:

- potassium oxalate
- nitric acid
- distilled water
- butylbenzoate

## SENSISTAB – remedy for dentinalgia curing



**Packaging:** 1 x 8 ml dropper vial

### Indications:

- Hypersensitivity of dentin in cervical area;
- Before placing of temporary crowns;
- After preventive teeth cleaning;
- During and after whitening of teeth;
- Periodontal surgery.

Sensistab is a non-toxic easy-to-apply material, which is well tolerated by soft tissues and does not provoke teeth decoloration. The chemical composition of material allows to remove smear layer, to seal dentine tubules and perform dentinalgia curing within one session. The tooth surface cleaning and rinsing is not required after use.

Sensistab reacts with tooth hydroxyapatite, forming small calcium granules, which are precipitated into dental tubules and on the alive dentine surface within few seconds. Precipitated acid-resistant crystals form biological and chemical complex with living dentine.

### Composition:

- potassium oxalate
- nitric acid
- distilled water
- butylbenzoate

## CARIES INDICATOR LIQUID – for recognition of carious dentine



**Packaging:** 1 x 8 ml dropper vial

### Indications:

Caries Indicator allows to easily recognize carious dentine and demineralized dentine by means of dyeing outer layer of carious dentine into bright red color. Caries Indicator does not dye a normal dentine and healthy enamel.

### Properties:

Caries Indicator combines with denatured collagen, which is contained in carious dentine, and dyes it in 10 seconds, that helps to remove only the outer infected layer of dentine while the non-infected inner dentine is being preserved.

### Composition:

- propanediol
- distilled water
- SLS
- Eosin B
- eosin B

## CARIES INDICATOR GEL – for recognition of carious dentine



**Packaging:** 2 x 2,5ml syringes.with gel disposable cannules – 20 pcs

### Properties:

Caries Indicator allows to easily recognize carious dentine and demineralized dentine by dyeing outer layer of carious dentine into bright red color. Caries Indicator does not dye normal dentine and healthy enamel.

### Properties:

Caries Indicator combines with denatured collagen, which is contained in carious dentine, and dyes it in 10 seconds, that helps to remove only the outer infected layer of dentine while the non-infected inner dentine is being preserved.

### Composition:

- propanediol
- distilled water
- SLS
- eosin B

## TRAVEX-37 – etching gel for enamel and dentine



**Packaging:** 3 x 3,5ml syringes + 20 disposable application cannules. OR: 10 x 3,5ml syringes

### Properties:

Travex – 37 is an etching gel for enamel and dentine with optimal content of high-quality 37% phosphoric acid. Specially designed gel viscosity provides ultimate application characteristics.

Gel has a good adherence to the application zone not drying up and spreading on the surface. To improve the gel properties, cetylpyridinium chloride is being added into the gel composition as antibacterial agent.

## TRIFLUOR – for deep enamel and dentine fluorination



**Packaging:** 1 x 10ml liquid bottle + 1 x 10ml suspension bottle.

### Indications:

- prophylaxis and treatment of all carious cavity classes
- treatment of primary caries, when only an enamel is eroded and mechanical treatment is not indicated
- enamel hyperesthesia
- caries prophylaxis in case of orthodontic appliance use
- treatment of non-carious enamel lesions (erosion, wedged shaped defects)
- treatment of sensitive areas after tooth bleaching
- fissures (without enamel preparation)
- treatment of periodontitis; hypersensitivity in tooth cervical zone
- enamel sealing after dental calculus removal and professional tooth cleaning

### Composition:

Trifluor liquid is a solution containing silicate-magnesium fluoride complex and copper-magnesium fluoride complex (MgSiF<sub>6</sub> and CuSiF<sub>6</sub>). Trifluor suspension contains calcium hydroxide and methylcellulose.

**LIQUID KOFFERDAM** – light-cured gingival barrier



**Indications:**  
Liquid kofferdam is used to protect gingivae from the aggressive influence of hydrogen peroxide during bleaching procedure. The use of Kofferdam allows to prevent negative effects of acidic or alkaline pastes and gels during other manipulations.

**Composition:**  
– light-cured polymer composition;  
– Ba Al B Si – glass  
– silica;  
– methylene blue

**Packing:** 3 x 1,5 ml plastic syringes + 10 disposable cannulas

**AIR PROPHY** – a series of powders for the treatment of the surface of the teeth and the gingival part of the root using the air flow technology

**Air Propy – classic** – 63 microns – sodium bicarbonate

**Air Propy – comfort** – 40 microns – sodium bicarbonate

Special technology for the production and processing of sodium bicarbonate allows the particles to be spherical.

**AIR PROPHY COMFORT – NEUTRAL**



**Packing:** bottles 150g and 300g

**Air Propy – Comfort**  
– Sodium Bicarbonate  
– Particle size – 40 µm  
– For the treatment of surfaces of healthy teeth with low sensitivity  
– Gentle removal of bacterial deposits  
– preparation of the surface of the teeth before dental intervention  
– timely prevention of caries and periodontal diseases  
– Bottles 150g and 300g, 4 flavors. Each bottle features an easy-to-use dosing cap

**AIR PROPHY COMFORT – WILD BERRY**



**Packing:** bottles 150g and 300g

**Air Propy – Comfort**  
– Sodium Bicarbonate  
– Particle size – 40 µm  
– For the treatment of surfaces of healthy teeth with low sensitivity  
– Gentle removal of bacterial deposits  
– preparation of the surface of the teeth before dental intervention  
– timely prevention of caries and periodontal diseases  
– Bottles 150g and 300g, 4 flavors. Each bottle features an easy-to-use dosing cap



AIR PROPHY COMFORT – TROPICAL



Packing: bottles 150g and 300g

- Air Prophy – Comfort**
- Sodium Bicarbonate
  - Particle size – 40 µm
  - For the treatment of surfaces of healthy teeth with low sensitivity
  - Gentle removal of bacterial deposits
  - preparation of the surface of the teeth before dental intervention
  - timely prevention of caries and periodontal diseases
  - Bottles 150g and 300g, 4 flavors. Each bottle features an easy-to-use dosing cap

AIR PROPHY CLASSIC – WILD BERRY



Packing: bottles 150g and 300g

- Air Prophy – Classic**
- Sodium Bicarbonate
  - Particle size – 63 µm
  - For the treatment of surfaces of healthy teeth with low sensitivity
  - Removal of tartar, plaque and acquired enamel pigmentation
  - Preparing the tooth surface for optimal whitening performance
  - Removal of pigment after removing the braces
  - Preparing teeth for fluoridation therapy
  - Bottles 150g and 300g, 4 flavors. Each bottle features an easy-to-use dosing cap

AIR PROPHY CLASSIC – NEUTRAL



Packing: bottles 150g and 300g

- Air Prophy – Classic**
- Sodium Bicarbonate
  - Particle size – 63 µm
  - For the treatment of surfaces of healthy teeth with low sensitivity
  - Removal of tartar, plaque and acquired enamel pigmentation
  - Preparing the tooth surface for optimal whitening performance
  - Removal of pigment after removing the braces
  - Preparing teeth for fluoridation therapy
  - Bottles 150g and 300g, 4 flavors. Each bottle features an easy-to-use dosing cap

AIR PROPHY CLASSIC – TROPICAL



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  - Preparing teeth for fluoridation therapy
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# Periodontics



## Treatment and prevention of periodontal diseases

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HYALUDENT GEL  
HYALUDENT GEL №0  
HYALUDENT GEL №1  
HYALUDENT GEL №2  
HYALUDENT GEL №3  
HYALUDENT GEL №4

## Osteoplastic materials

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HYALUOST



**HYALUDENT GEL** – Gel for comprehensive care and prevention of periodontal diseases



### Indications:

Hyaludent gel is used for more efficient tissue repair in the following cases:

- for antiseptic treatment of periodontal pockets after curettage or local anti-inflammatory therapy;
- with prophylactic and antiseptic treatment of the postoperative field;
- to normalize the metabolism in periodontal tissues and improve blood microcirculation;
- as a therapeutic and prophylactic agent in infectious and inflammatory diseases of the mucous membrane of the oral cavity and periodontal disease.

### Composition:

- sodium hyaluronate;
- EDTA-Na<sub>2</sub>;
- chlorobenzyl alcohol;
- distilled water.

### Application:

Separate the cap from the syringe and place the cannula for the application in its place. Isolate the treated area from saliva. Slowly squeezing out the gel, apply it to the treated area. Apply enough amount of gel to cover the treated field in excess. The gel has a high fluidity, so it can completely fill the periodontal pocket or other treated area. Leave the gel on the treated area under the periodontal dressing for 3-4 hours. After removing the dressing, rinse the oral cavity with chlorhexidine solution or water.

### Caution:

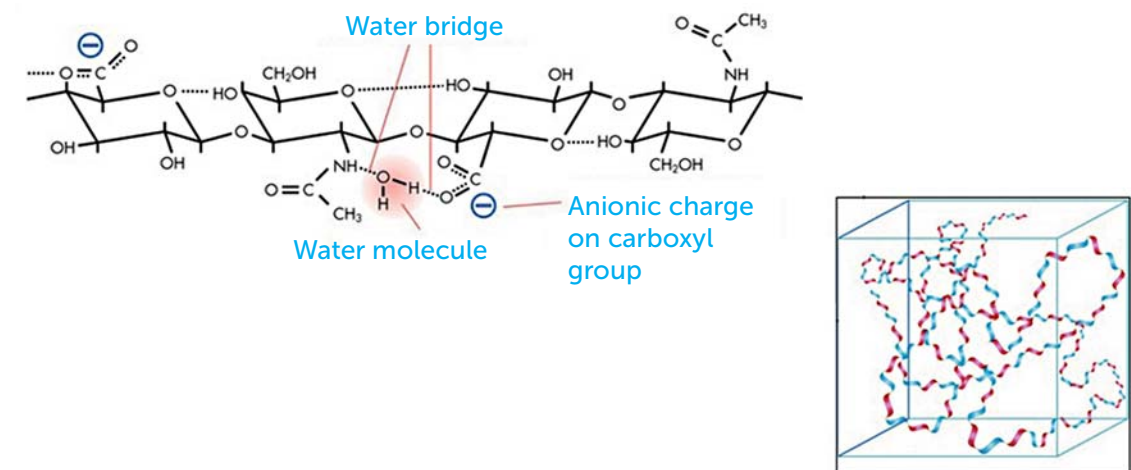
Do not use tools that may damage the surrounding tissues.  
Only for professional use in medical institutions.  
Do not use at home.



### Packaging:

The gel is supplied in 2 plastic syringes (2.5 ml each). The kit also includes 10 disposable plastic cannula applicators.

### Biological properties of hyaluronic acid



**Among biologically-active substances of natural origin, hyaluronic acid has a special place.** The distinctive properties of hyaluronic acid that make it special among other substances are based on its chemical structure. Hyaluronic acid has a high water retention capacity – one molecule of hyaluronic acid binds 200-500 water molecules.

Together with other proteoglycans, hyaluronic acid is part of the extracellular matrix. Due to its physicochemical properties (specific ability to bind water and proteins and form proteoglycan aggregates), hyaluronic acid promotes launching of the many functions of connective tissue.

Hyaluronic acid affects tissue permeability and the transfer of other drugs.

The role of hyaluronic acid is valuable not only as an independent drug, but also as a mean of gradual transfer to the tissues of the body of other therapeutic substances, as well as their controlled release. Biologically active components can be covalently or non-covalently associated with hyaluronic acid.

By changing the concentration of hyaluronic acid, it is possible to control the rate of its degradation or diffusion and, accordingly, the rate of drug delivery to the tissue. Hyaluronic acid creates a depot of the drug at the site of application and, gradually breaking down, releases the medication, improving its pharmacological profile and preventing the development of possible adverse reactions.

**HYALUDENT GEL №0** – Gel for comprehensive care and prevention of periodontal diseases



- Indications:**
- therapeutic and prophylactic agent for infectious-inflammatory diseases in periodontal tissues and oral mucosa;
  - to improve blood microcirculation and metabolism in periodontal tissues;
  - elimination of inflammation of the oral mucosa when using dental prostheses;
  - after professional hygienic cleaning of teeth to eliminate bleeding gums and effective tissue repair;
  - elimination of bad breath.

- Composition:**
- sodium hyaluronate;
  - EDTA-Na<sub>2</sub>;
  - chlorobenzyl alcohol;
  - HPC
  - distilled water.

**Packaging:** the material is packaged in 2 plastic syringes of 2.5 ml each. The package includes 10 disposable plastic cannula applicators.

**HYALUDENT GEL №1 (WITH CHLORHEXIDINE)** – Gel for comprehensive care and prevention of periodontal diseases



- Indications:**
- filling the periodontal pocket after local anti-inflammatory therapy or curettage for more efficient tissue repair;
  - antiseptic and prophylactic treatment of the postoperative field for effective tissue repair;
  - to improve blood microcirculation and metabolism in periodontal tissues;
  - therapeutic and prophylactic agent for infectious and inflammatory diseases in periodontal tissues and oral mucosa.

- Composition:**
- sodium hyaluronate;
  - chlorhexidine;
  - EDTA-Na<sub>2</sub>;
  - chlorobenzyl alcohol;
  - HPC
  - distilled water.

**Packaging:** the material is packaged in 2 plastic syringes of 2.5 ml each. The package includes 10 disposable plastic cannula applicators.

**HYALUDENT GEL №2 (WITH METRONIDAZOLE CHLORHEXIDINE)** – Gel for comprehensive care and prevention of periodontal diseases



- Properties:**
- Hyaludent №2 contains metronidazole and chlorhexidine. Together with hyaluronic acid, metronidazole and chlorhexidine have the most effective antimicrobial effect. The mechanism of action consists in binding of a large amount of metronidazole and chlorhexidine by hyaluronic acid and transporting them into tissues, followed by a prolonged release of the active substances. Metronidazole is a derivative of nitroimidazole, has antiprotozoal and antibacterial action.

- Composition:**
- sodium hyaluronate;
  - chlorhexidine;
  - metronidazole;
  - EDTA-Na<sub>2</sub>;
  - chlorobenzyl alcohol;
  - HPC
  - distilled water.

**Packaging:** the material is packaged in 2 plastic syringes of 2.5 ml each. The package includes 10 disposable plastic cannula applicators.

**HYALUDENT GEL №3 (WITH VITAMINS)** – Gel for comprehensive care and prevention of periodontal diseases



- Properties:**
- Hyaludent Gel №3 contains a complex of vitamins. Together with hyaluronic acid, vitamins have the most effective regenerating effect, the mechanism of which is to bind with hyaluronic acid a large amount of vitamins that make up the gel, and transport them to tissues, followed by a prolonged release.

- Composition:**
- sodium hyaluronate;
  - vitamin complex;
  - EDTA-Na<sub>2</sub>;
  - chlorobenzyl alcohol;
  - HPC
  - distilled water.

**Packaging:** the material is packaged in 2 plastic syringes of 2.5 ml each. The package includes 10 disposable plastic cannula applicators.

**HYALUDENT GEL №4 (WITH ANTIBIOTICS)** – Gel for comprehensive care and prevention of periodontal diseases



- Properties:**
- Hyaludent Gel No. 4 contains a broad spectrum antimicrobial antibiotic. It is active against most gram-positive and gram-negative microorganisms.

- Indications:**
- Acute situations on periodontal tissues (abscess with fever); moderately severe localized juvenile periodontitis; moderately severe, rapidly progressive, generalized periodontitis; acute and chronic periodontitis; periodontal disease complicated by inflammation; filling the periodontal pocket after local anti-inflammatory therapy or curettage for antiseptic treatment and more efficient tissue repair; antiseptic treatment of the postoperative field for effective tissue repair.

- Composition:**
- sodium hyaluronate;
  - antibiotics;
  - EDTA-Na<sub>2</sub>;
  - chlorobenzyl alcohol;
  - HPC
  - distilled water.

**Packaging:** the material is packaged in 2 plastic syringes of 2.5 ml each. The package includes 10 disposable plastic cannula applicators.



## Osteoplastic materials

**HYALUOST** – osteoplastic resorbable granules with calcium and phosphorus content



In everyday practice, one of the most important problems faced by dentists from all over the world is the problem of bone tissue regeneration due to various surgical interventions in the maxillofacial area, such as:

- Osteoplastic operations
- Complicated extraction and reconstruction interventions
- Implant and periodontal treatment

Therefore, various preparations and materials based on the inorganic matrix of human solid tissues – b-tricalcium phosphate and hydroxyapatite, which contain chemical elements in the same ionic forms in which they are found in living organisms, are used in dental practice. Along with this, in the dental practice, preparations made from natural bone tissue of cattle are used. However, due to numerous outbreaks of animal diseases, especially “mad cow disease”, most developed countries of the world recently have shown the greatest interest in synthetic preparations. Positive results in the use of synthetic drugs largely depends on the manufacturer, in particular the methods of synthesis and, as a result, the qualitative characteristics that the material by Omega Dent – Hyaluost fully possesses.

Hyaluost is an osteoplastic material based on an amorphous nano-dispersed resorbable calcium hydroxyapatite in a hyaluronate matrix for restoring and filling bone defects. The novelty of Hyaluost consists in the technology of synthesis of bioactive amorphous nanodispersed calcium hydroxyapatite, the only product of which is micro granulate with a diameter of 0.5 mm. Microgranules consist of nano-dispersed calcium hydroxyapatite particles 5-10 nm in size and fibers loosely formed from the same particles included in the polysaccharide matrix. Introduced into the place of contact, Hyaluost activates osteogenesis, enhances the proliferative activity of osteoblasts and stimulates reparative osteogenesis at the injection site, and suppresses inflammatory processes in the bone wound.

High clinical efficacy of Hyaluost is confirmed by preclinical and clinical trials in leading institutes and clinics in Russia and around the world. Hyaluost is designed to fill and restore bone defects as an osteoplastic material that optimizes bone tissue regeneration in the clinic of general and maxillofacial surgery, in surgical dentistry and also in traumatology and orthopedics.

**HYALUOST 50-250 μm**  
small periodontal bone defects



**HYALUOST 250-500 μm**  
larger periodontal bone defects



**HYALUOST 500-1000 μm**  
medium and small cysts and alveolar defects



**HYALUOST 1000-2000 μm**  
large cyst defects and sinus lift



One of the main differences in the production of bioactive, amorphous, nano-dispersed calcium hydroxyapatite, which is part of Hyaluost, is the absence of by-products and, as a consequence, the possibility of including polysaccharides in the synthesis process, which allows to obtain high-purity bioactive materials with enhanced biocompatibility. Sodium alginate, in turn, is a typical polysaccharide, which has a stimulating effect on the growth of plant and animal cells. Hyaluost has broad clinical indications:

- Periodontology: filling two- or multi-wall bone pockets, as well as bi- and trifurcation of teeth, augmentation of the atrophied maxillary sinus.
- Implantology: sinus lift or elevation of the sinus base (subantral augmentation), filling of alveolar defects to maintain the maxillary sinus after tooth extraction, filling of extraction defects to create a base for the implant.
- Cysts defects: defects after extirpation of a bone cyst.
- Defects after resection of the root apex.
- Defects after removal of retentive teeth by surgery.
- Other multigrad bone defects of the alveolar process and facial skull.



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