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Attachment bonding to impacted teeth at the time of surgical exposure

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ABSTRACT

This study examines the relative success of bonding an attachment to an impacted tooth at the time of surgical exposure, compared with placing it on a subsequent occasion. In addition, the relative merits of various attachments, the choice of bonding site and whether or not pumice prophylaxis is necessary, were tested. The results showed that bonding at the time of exposure is superior to its performance at a later date, that the use of an eyelet attachment has a lower failure rate than the use of a conventional bracket, that the palatal aspect offers the poorest bonding surface and that pumicing the exposed tooth offers no advantage over immediate etching of the exposed enamel. The results of this study refute the view that the circumstances prevalent at the time of surgical exposure are not conducive to the reliable bonding of an attachment to an impacted tooth.

Pages 457-463

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