

# Release of fluoride and metal ions from root surfaces after topical application of $\text{TiF}_4$ , $\text{SnF}_2$ , and $\text{NaF}$ in vitro

Liv Skartveit, Nils R. Gjerdet and Knut A. Selvig

Department of Dental Research and Department of Dental Materials, School of Dentistry, University of Bergen, Bergen, Norway

Skartveit L, Gjerdet NR, Selvig KA. Release of fluoride and metal ions from root surfaces after topical application of  $\text{TiF}_4$ ,  $\text{SnF}_2$ , and  $\text{NaF}$  in vitro. *Acta Odontol Scand* 1991;49:127-131. Oslo. ISSN 0001-6357.

Aqueous solutions of  $\text{TiF}_4$  cause a rapid uptake and a long-lasting retention of fluoride when applied to dentin. The aim of this study was therefore to investigate the pattern of fluoride release after  $\text{TiF}_4$  application in vitro, compared with  $\text{SnF}_2$  and  $\text{NaF}$  application.  $\text{TiF}_4$ ,  $\text{SnF}_2$ , and  $\text{NaF}$  were applied for 4 min and 1 min to standardized areas of six groups of root surface specimens immersed in distilled water. Untreated specimens were used as controls. The water was changed daily for 30 days, and F concentrations measured by an ion-selective electrode. All test groups showed a rapid decline in F concentration. In the 4-min group F concentration more than double the detection limit of the F electrode could be registered the first 28 days for  $\text{TiF}_4$ , 11 days for  $\text{SnF}_2$ , and 7 days for  $\text{NaF}$ . In the 1-min group periods of F registration were shorter. Analysis of Sn by atomic absorption spectrophotometry showed decreasing concentrations in the first 12-day samples in the 1-min and 4-min groups. Traces of Ti were found in the first few samples, but no pattern of release could be observed. □ *Cariostatic agents; dentin; F electrode; in vitro study; preventive dentistry*

Liv Skartveit, Department of Dental Research, University of Bergen, Aarstadveien 17, N-5009 Bergen, Norway

Root surface caries is common among elderly people (1-3). Because the etiology of root caries is assumed to be similar to that of enamel caries, the same preventive strategies have been suggested (4, 5).

Aqueous solutions of  $\text{TiF}_4$  seem suitable for clinical use, since the uptake of fluoride is comparable to that from fluoride varnishes when applied to root surfaces in vitro and in vivo (6, 7). Fluoride uptake is rapid (8), and both fluoride and titanium remain on dentin surfaces for an extended period of time (9, 10).

The purpose of the present study was to examine the magnitude and duration of fluoride release from root surfaces treated with a single topical application of a  $\text{TiF}_4$  solution, compared with equimolar solutions of the more commonly used  $\text{NaF}$  and  $\text{SnF}_2$  agents. Since it is possible that the presence of metal ions may influence the release pattern, the release of titanium and tin was also recorded.

## Materials and methods

Roots from young human premolars and third molars were used in the experiment. The teeth were stored in glass vials containing wet cotton and crystals of thymol until used. The roots were scaled with curettes and lightly polished with pumice in water to remove all soft-tissue remnants. The crowns were removed and the pulp chamber sealed with wax before the teeth were assigned to two groups for each of the three fluoride agents plus a control group. To obtain experimental areas of standardized size, adhesive paper discs with a diameter of 5 mm were attached all over the roots before they were painted with an acid-resistant nail varnish. A total unvarnished area of 981 mm<sup>2</sup> was used in each experimental group. In each group several teeth in one vessel were used to obtain sufficient solution volume and reliable concentration readings.

After a pilot study the roots were immersed in the following solutions for the two assigned time periods: a) 3.4%  $\text{TiF}_4$ , (1.1 M F), pH 1.0, for 1 min and 4 min; b) 8.6%  $\text{SnF}_2$ , (1.1 M F), pH 2.3, for 1 min and 4 min; c) 4.6% NaF, (1.1 M F), pH 7.0, for 1 min and 4 min; and d) distilled water, control.

After immersion the specimens were immediately rinsed in 500 ml of distilled water for 30 sec under continuous stirring and transferred to 10 ml of distilled water.

The water was changed every 24 h for 30 days, and an ion buffer was added (TISAB III, Orion Research Inc., Cambridge, Mass., USA). Fluoride concentrations were determined every day with an ion-selective electrode (cat. no. 96-09-00, Microprocessor ionanalyzer/901, Orion Research Inc.) until a concentration less than twice the detection limit given by the manufacturer (0.02  $\mu\text{g/ml}$ ) was reached.

Analyses of Ti and Sn were performed with flameless atomic absorption spectrophotometry. The instrument was a Perkin-Elmer HGA-76B graphite furnace connected to a Perkin-Elmer 372 atomic absorption spectrophotometer and equipped with a deuterium background corrector. The instrument settings were as suggested by the manufacturer (11).

The samples used for metal analyses were made acidic by addition of hydrochloric acid and then centrifuged at 1000 g to sediment

solid matter that might interfere with the analyses. The solutions analyzed appeared clear as judged by the naked eye.

## Results

The registered fluoride concentration in distilled water for each group of roots is presented in Figs. 1, 2, and 3. The fluoride concentration after release from the  $\text{TiF}_4$ -treated specimens was 21.2  $\mu\text{g/ml}$  on the 1st day, whereas  $\text{SnF}_2$  and NaF treatment resulted in fluoride concentrations of 9.65  $\mu\text{g/ml}$  and 9.50  $\mu\text{g/ml}$ . The fluoride release decreased rapidly during the first days, then decreasing much slower in all groups (Figs. 1, 2, and 3). After application for 4 min the concentration of fluoride was more than twice the detection limit given by the manufacturer (0.02  $\mu\text{g/ml}$ ) for 7 days in the NaF group, for 12 days in the  $\text{SnF}_4$  group, and for 28 days in the  $\text{TiF}_4$  group. Fluoride released after 1 min of treatment could be registered for approximately half the number of days compared with the 4-min results (Figs. 1, 2, and 3). A slightly decreased pH was observed in the water used for initial rinsing of the  $\text{TiF}_4$ - and  $\text{SnF}_2$ -treated specimens. Measurements of Sn release after 1 day showed 0.67  $\mu\text{g/ml}$  Sn (1-min exposure time) and 0.32  $\mu\text{g/ml}$  Sn (4-min exposure time). The values decreased to below the detection

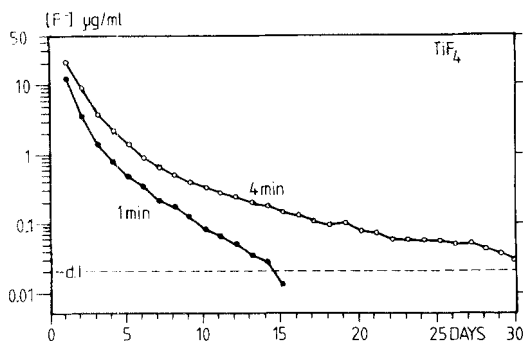


Fig. 1. Fluoride concentration ( $\mu\text{g/ml}$ ) registered every 24 h in daily changed distilled water containing root surface specimens treated with 3.4%  $\text{TiF}_4$  (1.1 M F) for 1 min and 4 min. d.l. = Detection limit of the electrode.

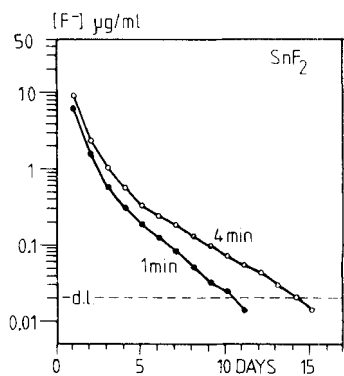


Fig. 2. Fluoride concentration ( $\mu\text{g/ml}$ ) registered every 24 h in daily changed distilled water containing root surface specimens treated with 8.6%  $\text{SnF}_2$  (1.1 M F) for 1 min and 4 min. d.l. = Detection limit of the electrode.

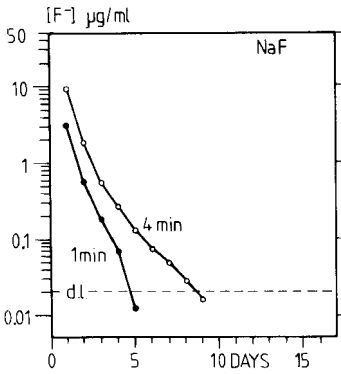


Fig. 3. Fluoride concentration (µg/ml) registered every 24 h in daily changed distilled water containing root surface specimens treated with 4.6% NaF (1.1 MF) for 1 min and 4 min. d.l. = Detection limit of the electrode.

limit (approximately 0.05 µg/ml) after 10 days. Titanium showed highly varying values even when the same sample was analyzed several times. Titanium was found in 1- to 5-day samples. However, no clear pattern of titanium release with time could be established.

Discussion

Since fluoride incorporated in dental hard tissues is considered to be important as a reservoir that can be released at the site of caries challenge, the pattern of release and the possibility for further uptake from the oral environment is important. The results in the present in vitro study showed that fluoride was released from root surfaces for a longer period of time after TiF<sub>4</sub> than after NaF treatment. This was not entirely unexpected, since previous studies have shown a much greater fluoride uptake with the TiF<sub>4</sub> agent (6-8). The higher release from the SnF<sub>2</sub>-treated specimens than from the NaF-treated ones is in accordance with the high uptake of fluoride that has been reported from this agent as well (9, 12). On the other hand, the release of fluoride seems to be limited, since large amounts of fluoride are retained 22 weeks after treatment with both TiF<sub>4</sub> and SnF<sub>2</sub> (9).

One reason for the high uptake of fluoride

from the Ti and Sn fluorides is the low pH, lower for Ti than for equimolar Sn fluoride solutions (13). The metal ions probably also play a part in the fluoride enrichment process because they are complex formers, binding concomitantly to fluoride and tooth structures. Ti is a more potent complexer than Sn (14). The complex-binding ability may explain the long-lasting fluoride retention registered after TiF<sub>4</sub> treatment in previous studies (9, 10). Owing to the great release of fluoride found in the present study, the complex-binding ability cannot be the only mechanism involved in the fluoride reactions. Possibly, several compounds are formed.

The high release of F from TiF<sub>4</sub>-treated specimens indicates that at least part of the fluoride absorbed is not tightly bound. It is, however, likely that considerable amounts of fluoride remain in the hard tissue when release to distilled water can no longer be registered (9, 10). The remaining fluoride possibly has a caries-protective effect, since acid solubility is reduced after TiF<sub>4</sub> application to enamel (15-19) and to root surfaces (20). It is not known which part is played by the incorporated fluoride and which by the acid-resistant titanium-containing coating formed by this application (16, 17, 21).

The results indicate that Sn is released more readily than Ti from root surfaces. This finding may be explained by the stronger binding of the Ti ion to the tooth tissue (14). The variable results obtained with Ti suggest that the metal is given off as minute particles, possibly as a result of mechanical removal of the surface layer. Sn, on the other hand, showed a continuous pattern of release resembling the rate of fluoride release.

Fluoride concentrations necessary to inhibit artificial root caries has been reported to be a few micrograms per milliliter (5), whereas lower concentrations inhibit demineralization of enamel (22, 23). TiF<sub>4</sub>-treated root surface specimens released greater amounts of fluoride for a longer period of time than did both SnF<sub>2</sub>-and NaF-treated surfaces. NaF-treated specimens appeared to be rapidly depleted of fluoride. Thus, TiF<sub>4</sub> in this respect seems to be more advantageous than the more commonly used

$\text{SnF}_2$  and  $\text{NaF}$  solutions, because  $\text{TiF}_4$  has a long-lasting fluoride delivery and, in addition, leaves considerable amounts of Ti in the surface layer (9, 10). The polyvalent Ti ion may attract fluoride when available and thereby maintain an enhanced concentration of fluoride in the surface layer (14). This process could not be studied in the present experiment, as the water was changed daily. Such redeposition has, however, been reported in a previous *in vitro* study in which the metal fluorides  $\text{SnF}_2$ ,  $\text{AgF}_2$  and  $\text{CuF}_2$  were applied before immersion in distilled water (24).

Although the subsequent fluoride release decreased after 1 min of application compared with 4 min, the reduction was not in proportion to the shorter duration. Previous studies have indicated that  $\text{TiF}_4$  has the most rapid reaction and consequently appears to be convenient for achievement of a fluoride depot in the clinical situation (8, 10). A greater caries-inhibiting effect than  $\text{NaF}$ , as shown in root caries models *in vitro*, supports this assumption (25).

Solubility properties of the topical agents used *in vivo* can be expected to be different from those in distilled water, because deposition of pellicle and plaque may modify release in the oral cavity (26, 27). The *in vitro* results nevertheless suggest that  $\text{TiF}_4$  possesses desirable properties as a topical agent for root caries prophylaxis.

## References

1. Sumney DL, Jordan HV, Englander HR. The prevalence of root surface caries in selected populations. *J Periodontol* 1973;44:500-4.
2. Banting DW, Ellen RP, Fillery ED. A longitudinal study of root caries: baseline and incidence data. *J Dent Res* 1985;64:1141-4.
3. Banting DW. Epidemiology of root caries. *Gerodontology* 1986;5:5-11.
4. Jordan HV, Sumney DL. Root surface caries: review of the literature and significance of the problem. *J Periodontol* 1973;44:158-63.
5. Arends J, Christoffersen J, Ruben J, Christoffersen MR. Lesion progress in dentine and the role of fluoride. In: Thylstrup A, Leach SA, Quist V, eds. *Dentine and dentine reactions in the oral cavity*. Oxford: IRL Press Ltd, 1987:117-25.
6. Hals E, Tveit AB, Tøtdal B, Isrenn R. Effect of  $\text{NaF}$ ,  $\text{TiF}_4$  and APF solutions on root surfaces *in vitro*, with special reference to uptake of F. *Caries Res* 1981;15:468-76.
7. Tveit AB, Tøtdal B, Klinge B, Nilvéus R, Selvig KA. Fluoride uptake by dentin surfaces following topical application of  $\text{TiF}_4$ ,  $\text{NaF}$  and fluoride varnishes *in vivo*. *Caries Res* 1985;19:240-7.
8. Skartveit L, Tveit AB, Tøtdal B, Selvig KA. Effects of  $\text{TiF}_4$  solutions on root surfaces *in vitro* after different application periods. *Acta Odontol Scand* 1989;47:25-30.
9. Tveit AB, Klinge B, Tøtdal B, Selvig KA. Long-term retention of  $\text{TiF}_4$  and  $\text{SnF}_2$  after topical application to dentin in dogs. *Scand J Dent Res* 1988;96:536-40.
10. Skartveit L, Tveit AB, Klinge B, Tøtdal B, Selvig KA. *In vivo* uptake and retention of fluoride after a brief application of  $\text{TiF}_4$  to dentin. *Acta Odontol Scand* 1989;47:65-68.
11. Techniques in graphite furnace atomic absorption spectrophotometry. Norwalk, Conn: Perkin-Elmer Corp., 1985.
12. Tveit AB, Hals E, Isrenn R, Tøtdal B. Highly acid  $\text{SnF}_2$  and  $\text{TiF}_4$  solutions. Effect on and chemical reaction with root dentin *in vitro*. *Caries Res* 1983;17:412-8.
13. Ericsson SY. Cariostatic mechanisms of fluorides: clinical observations. *Caries Res* 1977;11(suppl 1):2-41.
14. McCann HG. The effect of fluoride complex formation on fluoride uptake and retention in human enamel. *Arch Oral Biol* 1969;14:521-31.
15. Shresta BM, Mundorff SA, Bibby BG. Enamel dissolution. I. Effects of various agents and titanium tetrafluoride. *J Dent Res* 1972;51:1561-6.
16. Mundorff SA, Little MF, Bibby BG. Enamel dissolution. II. Action of titanium tetrafluoride. *J Dent Res* 1972;51:1567-71.
17. Wei SHY, Soboroff DM, Wefel JS. Effects of titanium tetrafluoride on human enamel. *J Dent Res* 1976;55:426-31.
18. Wefel JS. Artificial lesion formation and fluoride uptake after  $\text{TiF}_4$  applications. *Caries Res* 1982;16:26-33.
19. Wefel JS, Harless JD. The effect of several topical fluoride agents on artificial lesion formation. *J Dent Res* 1982;61:1169-71.
20. Mundorff SA, Laliberte P, Bibby BG. Titanium-tetrafluoride effects on dentin solubility through repeated decalcification [Abstract 26]. *J Dent Res* 1977;56:A109.
21. Wefel JS, Harless JD. The effect of topical fluoride agents on fluoride uptake and surface morphology. *J Dent Res* 1981;60:1842-8.
22. Nelson DGA, Featherstone GDB, Duncan JF, Cutress TW. Effect of carbonate and fluoride on the dissolution behavior of synthetic apatites. *Caries Res* 1983;17:200-11.
23. Arends J, Christoffersen J. The nature of early caries lesions in enamel. *J Dent Res* 1986;65:2-11.
24. Ellingsen JE, Rølla G, Alseth J. Exposure of dentin surfaces to metal fluorides. In: Thylstrup A, Leach

- SA, Qvist V, eds. Dentine and dentine reactions in the oral cavity. Oxford: IRL Press Ltd, 1987:199–206.
25. Dérand T, Lodding A, Petterson LG. Effect of topical  $F^-$  solutions on caries-like lesions in root surfaces. *Caries Res* 1989;23:135–40.
26. Grobler SR, Øgaard B, Rølla G. Uptake and retention of fluoride in sound enamel in vivo after a single application of neutral 2% sodium fluoride. In: Rølla G, Sønju T, Embery G, eds. Tooth surface interactions and preventive dentistry. London: IRL Press Ltd, 1981:17–25.
27. Ellingsen JE, Rølla G. The stability of  $SnF_2$ -induced root-surface deposits in vivo. *J Dent Res* 1989;68(spec iss):1700–1.

---

Received for publication 13 March 1990