



23 CLINICAL EVALUATORS

199 TOTAL USES

90% CLINICAL RATING

Key features: Root and pulp treatment • Resin-free bioactive bioceramic
• Unique dispenser

Description

NeoPUTTY® (MTA) is a premixed bioactive bioceramic root and pulp treatment that is:

- Ready to use, with no mixing required.
- Does not dry out between uses.
- Calcium and hydroxide ion releasing, promoting the formation of hydroxyapatite to seal and support healing.
- Initially high in pH (basic) to promote osteogenic response when applied, allowing it to be antimicrobial.
- Highest radiopacity in its class for better placement checks and follow up.
- Non-staining.
- Resin-free for maximum bioactivity and dimensional stability.

Unique Attributes

- This MTA material is already mixed and in a perfect putty form, for quick placement.
- You can restore immediately after placement of this material - this saves considerable chair time compared to other MTA materials.
- This material has a wide range of uses and can easily be your go-to material for root and pulp treatments.



Zero-waste dispenser

Indications

- Indirect pulp cap
- Partial pulpotomy
- Cavity liner and base
- Pulpotomy and apexogenesis
- Perforation repair
- Root resorption
- Obturation
- Root apexification
- Root-end filling
- Direct pulp cap



Clinical Tips

- Do not desiccate the site. **NeoPUTTY** needs that slight moisture to set.
- Use a light curable glass ionomer over the **NeoPUTTY** prior to restoring.
- Less is more. Use a small ball burnisher to apply for indirect/direct pulp capping.

"EASY PLACEMENT AND IT DOES NOT DISCOLOR TEETH."

Evaluators' Comments

"I like the fact that it is pre-mixed and syringeable. It makes it very easy to use in a pinch and is already the perfect consistency for placing."

"Much easier to place than my current MTA material and it did not wash out after placing."

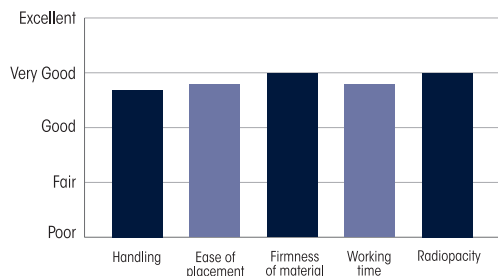
"It is a multi-purpose material."

"Provided a well-sealed restoration immediately after pulp capping."

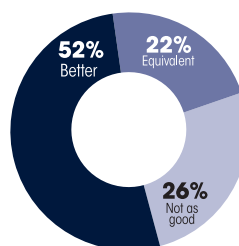
"Difficult to manipulate especially for small spaces - I would like a tip to try and place more directly."

"It stays soft. I would like it to firm up a bit more prior to restoration placement."

Evaluation Summary:



Compared to Competitive Products:



Consultants who would:

78% Recommend to a colleague

Consultants who would want to stock in office:

43% Yes, instead of current product

22% Yes, in addition to current product

13% No, however I might want to order it for certain cases

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NeoPUTTY™ (Avalon Biomed)

Some of the additional most-liked comments:

- I like the fact that it is pre-mixed and syringeable. It makes it very easy to use in a pinch and is already the perfect consistency for placing.
- It's nice that you can pack it
- Consistency and ease of use
- My assistant liked the dispensing!
- The syringe and delivery system are good
- Much easier to place and did not wash out after placing
- It is multi-purpose
- It has a competitive cost
- It's easy to place - good consistency
- Firm consistency
- No need for mixing
- Easy placement, doesn't discolor teeth
- Non-sticky and easy to dispense
- Pre-mixed
- Syringe size
- Ease of use
- It provided a well-sealed restoration immediately after pulp capping. This seemed to provide protection against ongoing leakage and bacterial contamination that can compromise the success of the pulp cap.
- Packaging and syringe size
- Much better handling properties
- That it is similar to the current material I use for dispensing and handling. However, it did not harden or stay well on the tooth compared to **Brassler's Endo Putty** and was worse overall.
- The consistency is perfect and being premixed it allows for fast and easy placement. MTA is a great material for pulpotomy.

Suggestions for improvement comments:

- It needs a smaller and more convenient placement tip
- I would like it to include at least 2 syringes for price
- I still wish it could be made to set faster
- I think a better application process would be better to use less material
- I like the idea of including tips
- Being light cure for setting or dual would be great
- Lower the viscosity
- Include a light cured option, if possible, definitely include the tips with the product.
- Make it more flowable
- Develop a faster set
- Need a way to incorporate and deliver the material into a disposable application placement tip. The consistency of the material would have to change to allow its placement.
- Better dispensing tip, must have a material that sticks to the dentin surface
- Make it a little runnier and enclose tips for direct placement
- None, this is a very fine product
- Make the consistency softer.
- Better delivery system
- Better control over setting time
- Include a delivery system with the product.
- Make it stay and harden quickly so that rinsing, etching, and bonding can take place over the material without losing all the material and its benefits.
- Nothing, I really liked the material.

Some of the additional least-liked comments:

- Nothing was mentioned an additional 4 times
- Long setting time was mentioned an additional 3 times
- I really like this material so this is a stretch, but it would be really nice if I could place my bonding agent directly over top.
- Difficult to manipulate especially for small spaces
- Using too much material
- Placement was somewhat difficult
- No tips are included
- Consistency
- Stays soft
- Handling is poor. When you dispense it doesn't harden nor stick to the dentin layer or plural floor. It moves around. This means you cannot etch or bond after placement without it staying in the same location. I question its effectiveness given that it moves around a great deal. You cannot condense it without it moving around.
- I don't really understand the dispensing system. No tips were included, so I had to place with an instrument. It would stick to that instrument and was messy and not easy to place.
- Depending on the case, it could be slightly thicker than I would want.
- The inability to acid-etch. I had to place glass ionomer over the material before etching
- Consistency
- Too stiff
- That it wouldn't set and washed away easily with any water or rinse, which is necessary with total etch bonding. Even placing a liner over the material didn't work well as the material does not adhere to dentin well enough.
- I would love a bigger string with more material

Were there any clinical situations in which you felt NeoPUTTY stood out or was especially helpful?

- I had a 9-year-old who has gross decay in both of his mandibular first molars. We are trying to keep these teeth as long as humanly possible and layering **NeoPutty** with **G.I.** and composite over top has kept them calm and comfortable for him so far.
- Direct pulp capping
- I used it for a direct pulp cap under a crown and the patient is doing well!
- Not really in my trial, but I believe it would be great for pediatric pulpotomy.
- Keeping pulp caps in place
- Endo perforations
- Pulpotomy
- Managed to stay on during hemorrhaging
- Direct pulp cap and perforation repair
- Whenever used for pulp cap or perforation repair it was outstanding
- It condensed nicely over areas of direct pulp coverage
- Perforation repair
- Maybe a liner
- It is great for primary tooth pulpotomy

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Why would you want to incorporate NeoPUTTY in addition to and not instead of your current material?

- In certain cases, I like the light cure option of **TheraCal**
- Very cost effective
- I like to have a number of options available but most likely **NeoPUTTY** would be my first choice.
- I prefer to have additional options

What clinical tips would you give a colleague for using NeoPUTTY?

- Select cases including pulpotomies and resorption lesions may be best
- Use a ball point condenser to apply for indirect/direct pulp capping
- Less is more
- Squeeze the syringe piston slowly in a very controlled fashion
- Radiopacity is similar to others
- Make sure you put glass ionomer on top before placing composite
- **NeoPUTTY** is a versatile product that was also used to repair a horizontal root fracture
- Use a light curable glass ionomer over the **NeoPUTTY** to protect prior to restoring
- Enjoy!
- If acid etching is required, place a layer of glass ionomer over the **NeoPUTTY** first.
- Do not desiccate the site. **NeoPUTTY** may need that slight moisture
- Need some sort of MTA delivery syringe for it

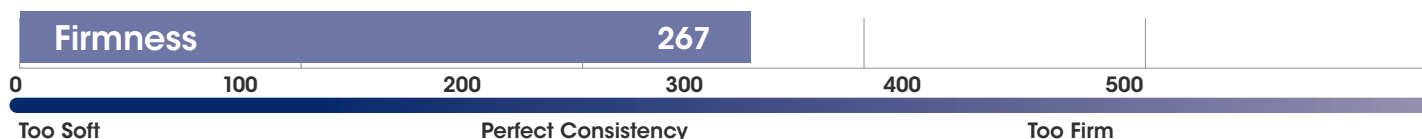
Would an applicator tip be useful if packaged with the kit?	
Answer Choices	Responses
Yes	91%
No	9%

What procedure(s) did you use NeoPUTTY for?	
Answer Choices	Responses
Perforation repair	35%
Resorption	4%
Obturation/apexification	13%
Root-end filling	9%
Cavity liner/base	65%
Direct pulp cap/partial pulpotomy	78%
Indirect pulp cap	65%

What procedures would you like to use an applicator tip for with this material?

- I could see it being beneficial in a perforation repair. I would even like one to try for placing as a pulp capping material.
- In my case, I think it is helpful for direct pulp capping
- Perforations, direct pulp caps
- Pulp capping if its small enough
- Base/liner and indirect/direct pulp cap
- Indirect pulp cap, direct pulp cap, and sealing of perforations
- Placement in confined spaces
- All procedures
- Apex
- Bases - indirect pulp cap or as a liner
- Pulpotomy
- Subgingival or in confined spaces
- Applying as a direct and indirect pulp cap
- To place as a liner/ base
- All procedures where it is indicated
- Everything: pulp caps, liners, even to put on my glove to dip gutta percha in.
- Perforation repair
- The applicator tip would need to have a fairly large diameter to allow for the free flow of the material without exerting too much pressure and losing tactile control. If this is possible, it would be useful in the distal of upper molars.
- Apicodectomy
- Repair perforations
- Apicodectomy, root perforation, and pulp perforation
- Direct pulp cap and indirect pulp cap

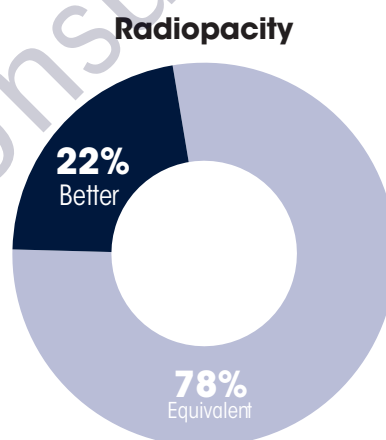
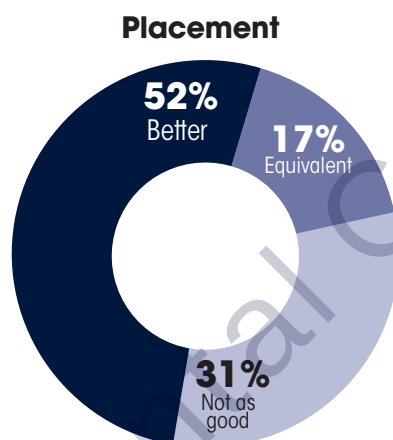
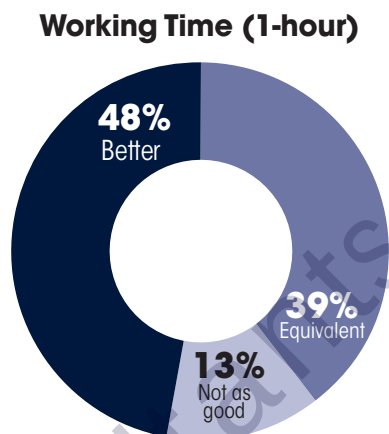
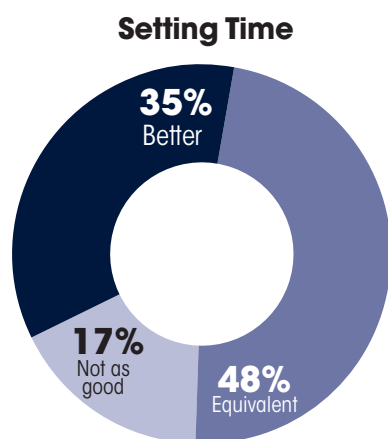
How would you rate the firmness of this material?



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NeoPUTTY™ (Avalon Biomed)

How does NeoPUTTY compare to your current root/pulp treatment and/or MTA product for the following:



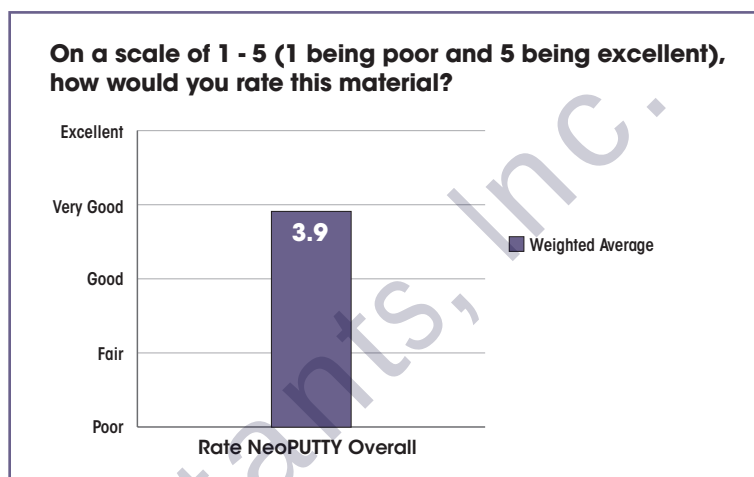
Final comments or questions regarding NeoPUTTY:

- Excited to use it on more patients in our office
- This is innovative for this type of material. The delivery system is good.
- I really liked this product and it is an improvement over MTA which needs to be mixed and is very difficult to place and keep in place.
- Great product
- Well worth having in a dentist's armamentarium
- Really nice handling material, it is easy to shape and stays where you put it. Like other MTA materials, it would be nice to have control over set.
- Really needs some applicator system

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Material/Treatment you normally use?	Number of Responses
Bio Ceram	2
Calcium Hydroxide	1
Diapex (DiaDent)	1
Dycal (Dentsply Sirona)	3
Endosequence RRM Fast Set Putty (Brasseler)	1
EndoSequence BC Sealer (Brasseler)	2
IRM (Dentsply Sirona)	1
Laser	1
Lime-lite (Pulpdent)	1
MTA	4
Neo MTA (Avalon Biomed)	1
Pro Root MTA (Dentsply Sirona)	4
TheraCal (BISCO)	1
Ultradent MTA	1
Vitapex (Neo Dental International, Inc.)	1
Vitrebond (3M)	2



On a scale of 1 - 5 (1 being poor and 5 being excellent) how would you rate the following?	Ratings
Syringe size (1.2 gm of material)	3.9
Syringe dispensing	3.8
Volume dispensed	3.8
Handling	3.7
Ease of placement	3.8
Firmness of material	4.0
Working time	3.8
Radiopacity	4.0