





The soft liner specimens, along with the aluminum step wedge, and wax plate were laid on top of a cassette (kodak medical x-ray film) and with 50 Kv irradiation, 200 mA, and exposure time of 0.1 sec at a distance of 1 m from the x-ray source. As an x-ray source, a Computed Radiographic System (CR) was used (Chest X-ray machine, Germany).

In accordance with the manufacturer's instructions, the processing was carried out using an automatic x-ray film processor (JP-33, Korea). The optical density was measured for every aluminium step and soft liner specimens using a light transmission densitometer. Three measurements were made for each specimen, and the average value of these readings was calculated.

### Surface hardness test

30 specimens were prepared of soft liner in disk shape of 30 mm. in diameter and 3 mm. in thickness for Shore a surface hardness test [28,29].

The soft liner samples' hardness was measured using a shore A durometer (Time group-TH200, China) [30]. Five durometer measurements were made for every sample, with 5 sec. contact time with every penetration, with the average taken into account as the test value.

### Statistical analysis

For analysing the study's results, SPSS (Statistical Package for Social Science) computer software (version 21) was used, as well as descriptive and inferential statistics. A one-way ANOVA (analysis of variance) test was used. A "P" value of  $> 0.05$  was considered statistically non-significant, a "P" value of 0.05 was considered significant, and a "P" value of 0.01 was considered highly significant.

## RESULTS

**FTIR analysis:** FTIR analysis revealed that there has been only physical interaction between the acrylic soft liner and the BaTiO<sub>3</sub> NPs (Figure 1).

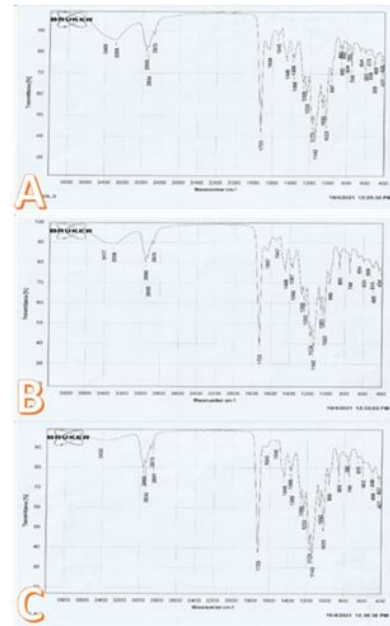


Figure 1: FTIR for A) soft liner with no addition B) soft liner with 1% by wt. BaTiO<sub>3</sub> NPs C) soft liner with 1.5% by wt. BaTiO<sub>3</sub> NPs.

Scanning electron microscopy: The morphology of cross-sectional samples and mapping of samples with soft liners before and after the addition of BaTiO<sub>3</sub> NPs are studied (Figure 2).

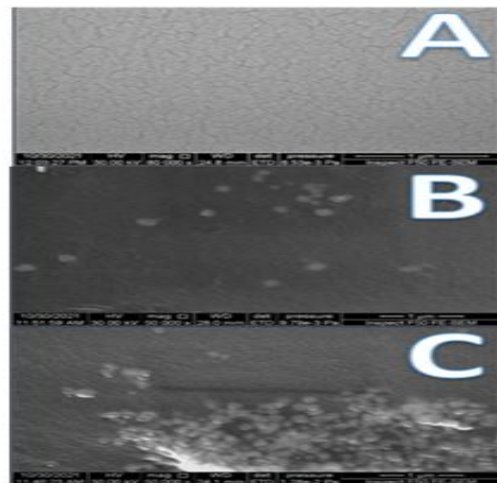


Figure 2: A) SEM image for soft liner without addition; B) SEM image for soft liner with 1% by wt. BaTiO<sub>3</sub> NPs; C) SEM image for 1.5% by wt. BaTiO<sub>3</sub> NPs. Energy Dispersive X-ray Spectroscopy (EDS): It indicates the existence of elements such as calcium, carbon, and oxygen in the soft liners before and after the addition of 1% and 1.5 % BaTiO<sub>3</sub> NPs (Figures 3-5).

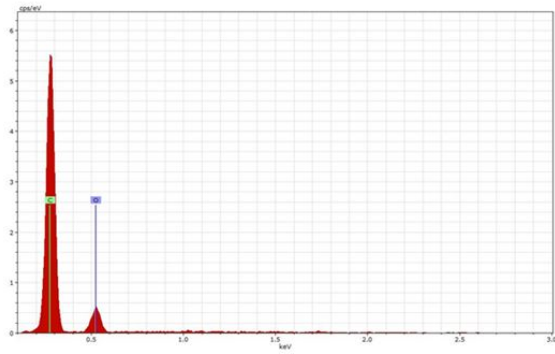


Figure 3: EDS diagram for soft liner without addition.

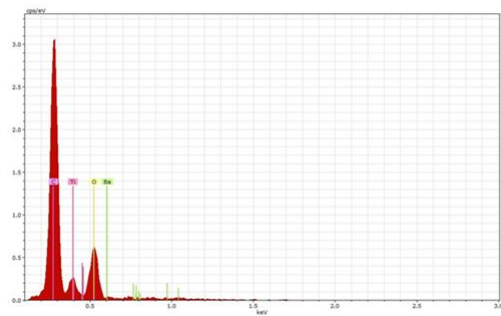


Figure 4: EDS diagram for soft liner after addition of 1% by wt. BaTiO<sub>3</sub> NPs.

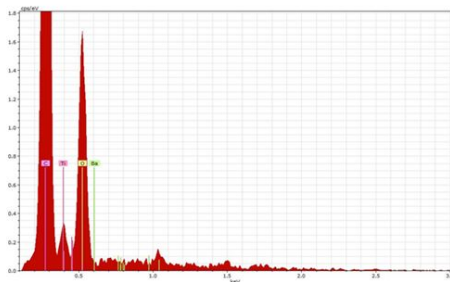


Figure 5: EDS diagram for soft liner after addition of 1.5% by wt. BaTiO<sub>3</sub> NPs.

*Candida albicans* adherence test results: under an inverted light microscope stained specimens for each group were inspected, the control group has a higher mean value (41.49), while the experimental group (1.5% by wt. of BaTiO<sub>3</sub> NPs) has the lowest mean value (6.65) (Figure 6).

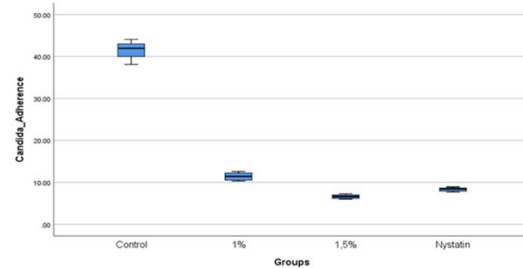


Figure 6: box-plot chart for *Candida albicans* adherence test.

Comparison of means of *candida albicans* adherence test results using one way ANOVA table test showed a highly significant decrease in *Candida albicans* adherence to the surface of soft denture liner as shown in table 1.

Table 1: Mean of *Candida albicans* adherence test and one-way ANOVA table for all studied groups.

Group	N	Mean	SD	SE	Minimum	Maximum	F
Control	10	41.492	1.89672	0.59979	38.1	44.1	2293.417
1% BaTiO <sub>3</sub> nps	10	11.418	0.85008	0.26882	10.3	12.6	
1.5% BaTiO <sub>3</sub> nps	10	6.6567	0.4622	0.14616	6	7.3	
Nystatin	10	8.325	0.44074	0.13937	7.68	8.91	

According to the results of Levene's test for data homogeneity, which show highly significant

differences between groups, the Games-Howell post-hoc test was chosen for *candida* adherence multiple comparisons (Table 2).

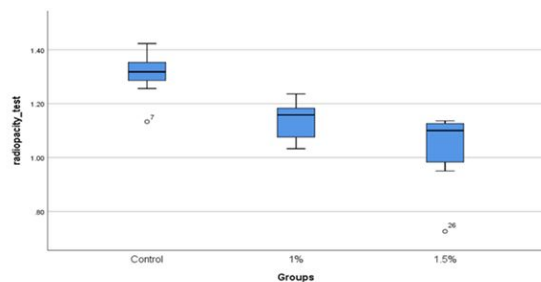
**Table 2: Games-Howell post hoc test for *Candida albicans* adherence.**

Tested groups		Mean difference	Sig
Control	1%	30.07*	0.000HS
	1.50%	34.83*	0.000HS
	Nystatin	33.16*	0.000HS
1%	1.50%	4.76*	0.000HS
	Nystatin	3.09*	0.000HS
1.50%	Nystatin	-1.66*	0.000HS

\*The mean difference is significant at the 0.05 level.

Radiopacity test results: The control group had the highest mean score of optical density (1.3112), while

the experimental group had the lowest mean score (1.5% incorporation of BaTiO3 NP) (1.0353) (Figure 7).



A comparison of the means of all groups' radiopacity test results using one-way ANOVA table test showed a highly significant increase in radiopacity in experimental groups when compared to the control group as shown in table 3.

**Figure 7: box-plot chart for radiopacity test results.**

**Table 3: Mean for radiopacity test and one-way ANOVA table for all tested groups.**

Groups	N	Mean	SD	SE	Minimum	Maximum	F	P value
Control	10	1.3112	0.08158	0.0258	1.13	1.42	20.736	0.000HS
1% BaTiO3 nps	10	1.1377	0.0688	0.02176	1.03	1.24		
1.5% BaTiO3 nps	10	1.0353	0.12943	0.04093	0.73	1.14		

Bonferroni post-hoc test was used to compare mean value between each two groups (Table 4), there was high significant difference between (control and 1% groups)

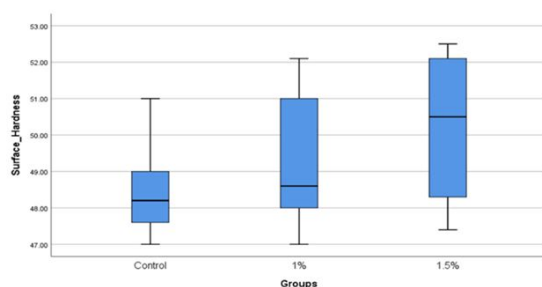
and (control and 1.5% groups), while there was non-significant difference between 1% and 1.5% groups.

**Table 4: Bonferroni post hoc test for radiopacity test.**

Tested groups		Mean difference	Sig.
Control	1%	.17350*	0.001 HS
	1.50%	.27590*	0.000 HS
1%	1.50%	0.1024	0.077 NS

Surface hardness test results: Highest mean value of surface hardness test was for the 1.5% incorporation of

BaTiO<sub>3</sub> NP group (50.1600) while the lowest mean value was for control group (48.5200) as shown in Figure 8.



**Figure 8: box-plot chart for Shor A surface hardness test results.**

Comparison of means of surface hardness test results of all groups using one way ANOVA table test revealed a non-significant increase in surface hardness of soft lining

material after addition of 1% and 1.5% by wt. barium titanate nano particles as shown in table 5.

Group	N	Mean	SD	SE	Minimum	Maximum	F	P value
Control	10	48.52	1.30792	0.4136	47	51	2.283	0.121NS
1% BaTiO <sub>3</sub> nps	10	49.28	1.90193	0.60144	47	52.1		
1.5% BaTiO <sub>3</sub> nps	10	50.16	1.87688	0.59352	47.4	52.5		

**Table 5: Mean for surface hardness test and one-way ANOVA table for all tested groups.**

## DISCUSSION

Liners are commonly used in dentistry to alter prosthetic surfaces that come into contact with soft tissues in the oral cavity. Soft liners are a type of flexible material that is used to relines denture base surfaces that come into contact with the occlusal stress bearing oral mucosa [31].

Several studies have tried to combat fungi colonization by incorporating antifungal agents into the soft denture liner material, for example; when compared to conventional organic antimicrobial agents, metal oxide nanoparticles such as TiO<sub>2</sub>, MgO, and ZnO are thought to be superior antimicrobial agents in terms of safety, durability, and heat resistance [32,33].

The current study tried to enhance soft lining material properties against *C. albicans* adherence by incorporating BaTiO<sub>3</sub> NPs into soft liner.

In *Candida albicans* adherence test incorporation of BaTiO<sub>3</sub> NP powder in two different precents of weight (1%, 1.5%) caused a highly significant decrease in *Candida albicans* adherence to acrylic based heat cured soft liner compared to control group and in comparison, with Nystatin control positive group the 1.5% group showed significant difference in decreasing *Candida albicans* adherence.

BaTiO<sub>3</sub>'s antifungal mode of action include two proposed method: Due to the increase in positive surface potential, which may have resulted in bacteria being neutralized on their surfaces, resulting in the creation of ROS (Reactive Oxygen Species), that can cause membrane and DNA damage [34].

When *Candida albicans* is exposed to nano BaTiO<sub>3</sub>, the nanoparticles can covalently connect to the membrane components. This results in a disturbance of the cell wall architecture, which ultimately results in the death of *Candida albicans* via suppression of ergosterol production.

In radiopacity test a highly significant increase in radiopacity observed after addition of barium titanate nanoparticles to soft denture liner compared to control group. This finding can be explained that barium and titanium have high atomic number (56 for barium and 22 for titanium) compared to the elements of polymer which produce more radiopacity when added to the polymer.

Furthermore, the addition of barium titanate nanoparticles to polymer should result in an increase in

density, as NBT has a higher density than polymer. (6.08 g/cm<sup>3</sup>, 0.906 g/cm<sup>3</sup> respectively) [35], this increase in material density result in increased radiopacity of the material as the radiopacity determined by the size, density, chemical composition of the filler molecules, and their concentration within the polymer matrix [36].

In shore a surface hardness test the results revealed that there is no significant increase in surface hardness between control group and experimental groups, thus they were within the ISO specification limit for long-term soft lining materials. Because only trace amounts of BaTiO<sub>3</sub> NPs were introduced to the soft denture liner, they had no discernible effect on the material's surface hardness due to low network density and small particle size of BaTiO<sub>3</sub> NPs.

## CONCLUSION

The results of this study indicate that integration of BaTiO<sub>3</sub> nanoparticles into soft denture liner resulted in a significantly substantial increase in antifungal activity as it reduced the adherence of *Candida albicans* to soft denture liner. Also, a highly significant increase in radiopacity of denture liner resulted from BaTiO<sub>3</sub> NPs incorporation, while there was non-significant increase in surface hardness.

## REFERENCES

1. Sanchez-Aliaga A, Pellissari CVG, Arrais CAG, et al. Peel bond strength of soft lining materials with antifungal to a denture base acrylic resin. Dent Mater J 2016; 35:194–203.
2. Khaledi AAR, Bahrani M, Shirzadi S. Effect of Food Simulating Agents on the Hardness and Bond Strength of a Silicone Soft Liner to a Denture Base Acrylic Resin. Open Dent J 2015; 9:402–408.
3. Hashem MI. Advances in Soft Denture Liners: An Update. J Contemp Dent Pract 2015; 16:314–318.
4. Iwasaki N, Yamaki C, Takahashi H, et al. Effect of long-time immersion of soft denture liners in water on viscoelastic properties. Dent Mater J 2017; 36:584–589.
5. Chladek G, Mertas A, Barszczewska-Rybarek I, et al. Antifungal activity of denture soft lining material modified by silver nanoparticles-a pilot study. Int J Mol Sci 2011; 12:4735–4744.
6. Goshima T, Gittleman L, Goshima Y, et al. Evaluation of radiopaque denture liner. Oral Surgery Oral Med Oral Pathol 1992; 74:379–382.

7. Maeda T, Hong G, Sadamori S, et al. Durability of peel bond of resilient denture liners to acrylic denture base resin. *J Prosthodont Res* 2012; 56:136–141.
8. Habibzadeh S, Omidvaran A, Eskandarion S, et al. Effect of Incorporation of Silver Nanoparticles on the Tensile Bond Strength of a Long term Soft Denture Liner. *Eur J Dent* 2020; 14:268–273.
9. Hatamleh MM, Maryan CJ, Silikas N, et al. Effect of net fibre reinforcement surface treatment on soft denture liner retention and longevity. *J Prosthodont* 2010; 19:258–262.
10. Yasser, Fatah A. The Effect of Addition of Zirconium Nano Particles on Antifungal Activity and Some Properties of Soft Denture Lining Material. *Bagh Coll Dent* 2017; 29:27–32.
11. Shah AA, Khan A, Dwivedi S, et al. Antibacterial and Antibiofilm Activity of Barium Titanate Nanoparticles. *Mater Lett* 2018; 229:130–133.
12. Sasikumar M, Ganeshkumar A, Chandraprabha MN, et al. Investigation of Antimicrobial activity of CTAB assisted hydrothermally derived Nano BaTiO<sub>3</sub>. *Mater Res Express* 2019; 6:0–31.
13. Schult M, Buckow E, Seitz H. Experimental studies on 3D printing of barium titanate ceramics for medical applications. *Curr Dir Biomed Eng* 2016; 2:95–99.
14. Genchi GG, Marino A, Rocca A, et al. Barium titanate nanoparticles: Promising multitasking vectors in nanomedicine. *Nanotechnology* 2016; 27:1–19.
15. Bai Y, Dai X, Yin Y, et al. Biomimetic piezoelectric nanocomposite membranes synergistically enhance osteogenesis of deproteinized bovine bone grafts. *Int J Nanomedicine* 2019; 14:3015–3026.
16. Elshereksi NW, Mohamed SH, Arifin A, et al. Evaluation of the mechanical and radiopacity properties of poly (methyl methacrylate)/barium Titanate-denture base composites. *Polym Polym Compos* 2016; 24:365–374.
17. Urban VM, de Souza RF, Galvao Arrais CA, et al. Effect of the association of nystatin with a tissue conditioner on its ultimate tensile strength. *J Prosthodont* 2006; 15:295–299.
18. Karakis D, Akay C, Oncul B, et al. Effectiveness of disinfectants on the adherence of *Candida albicans* to denture base resins with different surface textures. *J Oral Sci* 2016; 58:431–437.
19. Manikandan C, Amsath A. Isolation and Rapid Identification of *Candida* Species from the Oral Cavity. *Int J Pure Appl Zool* 2013; 1:172–177.
20. ElFeky DS, Gohar NM, El-Seidi EA, et al. Species identification and antifungal susceptibility pattern of *Candida* isolates in cases of vulvovaginal candidiasis. *Alexandria J Med* 2016; 52:269–277.
21. Sundaram M, Navaneethakrishnan MR. Evaluation of Vitek 2 System for Clinical Identification of *Candida* Species and Their Antifungal Susceptibility Test. *J Evol Med Dent Sci* 2016; 5:2948–2951.
22. de Sousa LVNF, Santos VL, de Souza Monteiro A, et al. Isolation and identification of *Candida* species in patients with orogastric cancer: Susceptibility to antifungal drugs attributes of virulence in vitro and immune response phenotype. *BMC Infect Dis* 2016; 16:1–12.
23. Gedik H, Ozkan YK. *In vitro* evaluation of *Candida albicans* adherence to soft denture-lining materials. *J Prosthet Dent* 2009; 68:804–808.
24. Govindswamy, Rodrigues S, Shenoy VK, et al. The Influence of Surface Roughness on The Retention of *Candida Albicans* to Denture Base Acrylic Resins—an in vitro study. *J Nepal Dent Assoc* 2014; 14:1–9.
25. Mikael J, Al-Samaraie S, Ikram F. Evaluation of Some Properties of Acrylic Resin Denture Base Reinforced with Calcium Carbonate Nano-Particles. *Erbil Dent J* 2018; 1:41–47.
26. Salem SA. Reinforced denture base materials. 1979.
27. Abdulmajeed SK, Abdulbaqi HJ. Evaluation of some properties of heat cured soft denture liner reinforced with calcium carbonate nano-particles. *Pakistan J Med Heal Sci* 2021; 14:1728–1733.
28. Abraham AQ, Abdul-Fattah N. The Influence of Chlorhexidine Diacetate Salt Incorporation into Soft Denture Lining Material on Its Antifungal and Some Mechanical Properties. *J Baghdad Coll Dent* 2017; 29:9–15.
29. Mancuso DN, Goiato MC, Zuccolotti BCR, et al. Effect of thermocycling on hardness, absorption, solubility and colour change of soft liners. *Gerodontology* 2012; 29:1–5.
30. Basima MA, Hussein BDS MsP. Effect of some disinfectant solutions on the hardness property of selected soft denture liners after certain immersion periods. *J Fac Med* 2009; 51:259–264.
31. Mainieri VC, Beck J, Oshima HM, et al. Surface changes in denture soft liners with and without sealer coating following abrasion with mechanical brushing. *Gerodontology* 2011; 28:146–151.
32. Daistan S, Aktas AE, Caglayan F, et al. Differential diagnosis of denture-induced stomatitis, *Candida*, and their variations in patients using complete denture: A clinical and mycological study. *Mycoses* 2009; 52:266–271.
33. Sawai J, Yoshikawa T. Quantitative evaluation of antifungal activity of metallic oxide powders (MgO, CaO and ZnO) by an indirect conductimetric assay. *J Appl Microbiol* 2004; 96:803–809.
34. Marin E, Boschetto F, Sunthar TPM, et al. Antibacterial effects of barium titanate reinforced polyvinyl-siloxane scaffolds. *Int J Polym Mater Polym Biomater* 2020; 1–12.
35. Nidal W Elshereksi, Mariyam J Ghazali, et al. Investigation on the Physical Properties of Denture

Base Resin Filled with Nano-Barium Titanate. Aust J Basic Appl Sci 2016; 249-257.

36. Pekkan G. Radiopacity of Dental Materials: An Overview. Avicenna J Dent Res 2016; 8:8-8.