

*Original article*

# Comprehensive Comparative Study of Dental Composites: Types, Properties, and Applications in Dental Technology

Khaled Elgergeni<sup>\*</sup>, Hanan Ajaj<sup></sup>, Rowaida Daoa<sup></sup>, Marya Mustafa<sup></sup>

College of Medical Sciences and Technology, Tripoli, Libya

Corresponding email: [Kelgergeni@gmail.com](mailto:Kelgergeni@gmail.com)

## Abstract

This study evaluates the mechanical, physical, and biological performance of three principal categories of dental composites—nanofilled, microhybrid, and bulk-fill—while tracing their historical evolution and clinical relevance. Standardized laboratory tests assessed compressive strength, flexural strength, polymerization shrinkage, three-body wear resistance, water absorption, and surface roughness following artificial aging. In vitro cytotoxicity was analyzed using L929 fibroblast cultures. A comprehensive literature review was incorporated to contextualize experimental findings. Results revealed that nanofilled composites excelled in surface polish retention and wear resistance, microhybrids demonstrated superior initial mechanical strength, and bulk-fill composites significantly minimized shrinkage stress. All tested materials exhibited acceptable biocompatibility. Selection of composite type should align with specific clinical priorities—whether esthetic durability, load-bearing performance, or stress reduction—highlighting the distinct advantages each category offers.

**Keywords.** Dental Composites, Nanofilled Composites, Microhybrid Composites, Bulk-Fill Composites.

## Introduction

Dental composites have become an essential component of modern restorative dentistry, offering esthetic and functional alternatives to traditional amalgam restorations. Since their initial development in the 1960s, composite resins have undergone substantial improvements in terms of mechanical strength, wear resistance, and optical properties, largely due to innovations in filler particle technology, resin matrix formulations, and photoinitiator systems [1,2]. These advancements have enabled composites to replicate the natural appearance and behavior of tooth structures, making them suitable for both anterior and posterior restorations.

Previous studies have played a pivotal role in shaping the evolution of composite materials. Ferracane [3] demonstrated the direct correlation between filler loading and wear resistance, emphasizing the importance of filler content in long-term clinical performance. Mitra et al. [4] introduced nanotechnology into dental composites, showing that the incorporation of nanoparticles significantly improves polish retention and surface smoothness. Ilie and Hickel [5] further contributed by evaluating bulk-fill composites, revealing their ability to reduce polymerization shrinkage stress while allowing for deeper curing in thicker increments. Recent investigations have also focused on the aging behavior of composites under various environmental conditions. Alshali et al. [6] and Rizzante et al. [7] examined the effects of acidic exposure and thermal cycling, highlighting the trade-offs between mechanical strength, water sorption, and surface stability. These findings underscore the complexity of composite performance over time and the need for continued research to optimize formulations for durability and esthetics.

Despite these advancements, challenges remain in achieving an ideal balance between mechanical performance, esthetic longevity, and ease of clinical application. Variability in filler particle size, resin composition, and curing protocols can significantly influence the long-term success of restorations. Moreover, the rapid introduction of new composite types—such as nanofilled, microhybrid, bulk-fill, and flowable variants—has created a need for clearer comparative data to guide material selection in clinical practice.

The objective of this study is to provide a comprehensive evaluation of the physical properties, structural composition, and clinical performance of contemporary dental composites. Specifically, it aims to (1) analyze the influence of filler particle characteristics on mechanical behavior, (2) assess the esthetic and functional outcomes of different composite types under simulated oral conditions, and (3) synthesize existing research to identify trends, limitations, and future directions in composite development. By integrating material science insights with clinical evidence, this study seeks to support informed decision-making in restorative dentistry and contribute to the ongoing refinement of composite technologies.

## Methods

Specimens were prepared from Nanofilled, Microhybrid, and Bulk-fill dental composites using standardized molds [17]. These molds ensured consistent dimensions and shapes across all samples, allowing for reliable comparison of material properties. The mechanical characteristics of the composites were evaluated using a universal testing machine [18], which provided precise measurements of compressive strength and flexural

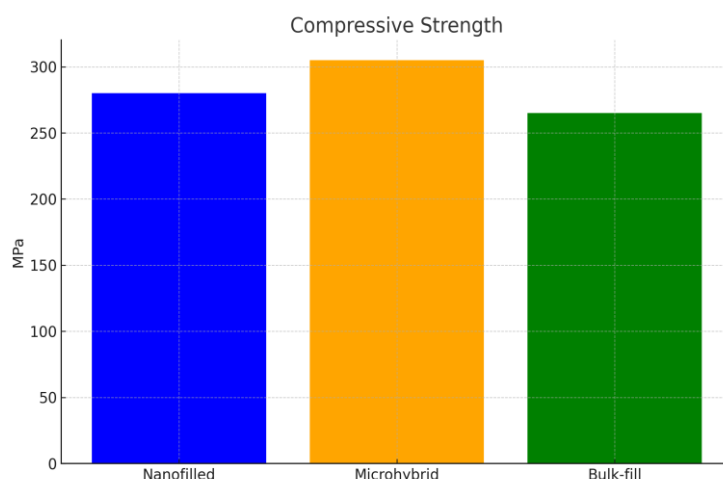
strength, both expressed in megapascals (MPa). These tests were essential for determining the materials' ability to resist deformation and fracture under applied loads.

Beyond mechanical testing, a range of physical properties was assessed better to understand the behavior and durability of the composites. Polymerization shrinkage, expressed as a percentage, was measured to evaluate the volumetric changes that occur during the curing process, which can impact marginal adaptation and long-term stability [19]. Water absorption was quantified in micrograms per cubic millimeter ( $\mu\text{g}/\text{mm}^3$ ) to determine the extent to which the materials absorb moisture over time—a factor that can influence both mechanical integrity and biocompatibility. Wear resistance was tested by subjecting the specimens to  $10^5$  cycles of simulated wear, with material loss measured in cubic millimeters ( $\text{mm}^3$ ), providing insight into the composites' ability to withstand repetitive mechanical stress. Surface roughness (Ra), measured in micrometers ( $\mu\text{m}$ ), was also evaluated to assess the texture of the material's surface, which is critical for aesthetic outcomes and for minimizing bacterial adhesion [19].

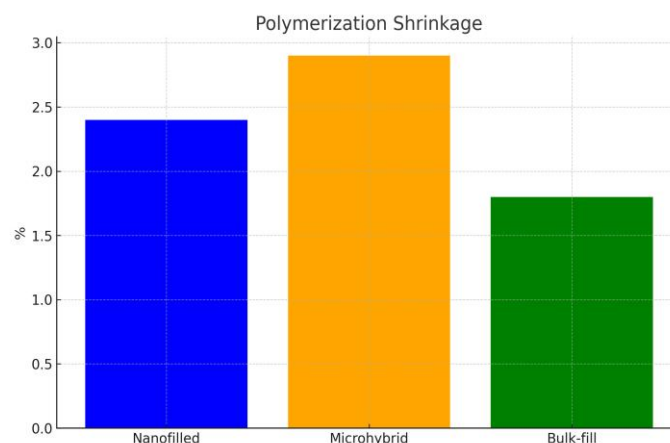
To investigate the cytotoxic potential of the composite materials, an MTT assay was performed using L929 fibroblast cell cultures [20]. These cells were exposed to eluates derived from the composite specimens for 24 hours. Following exposure, cell metabolic activity was measured to assess viability, thereby revealing any toxic effects associated with the materials. This assay provided a reliable indication of the biocompatibility of the tested composites [23].

**Table 1. Comparative Analysis of Dental Composite Materials**

Composite Type	Compressive Strength (MPa)	Flexural Strength (MPa)	Polymerization Shrinkage (%)	Water Absorption ( $\mu\text{g}/\text{mm}^3$ )	Wear Rate ( $\text{mm}^3/10^5$ cycles)	Surface Roughness Ra ( $\mu\text{m}$ )	Cell Viability (%)
Nanofilled	280	112	2.4	28	2.3	0.21	96
Microhybrid	305	118	2.9	32	2.9	0.27	94
Bulk-fill	265	105	1.8	26	2.5	0.24	95



**Figure 1. Compressive strength**



**Figure 2. polymerization shrinkage**

## Results and discussion

Microhybrid composites have demonstrated the highest compressive and flexural strength among contemporary restorative materials, reinforcing their suitability for high-load bearing areas such as posterior teeth. In contrast, nanofilled composites excel in maintaining a superior surface finish and exhibit lower wear rates, making them particularly well-suited for anterior restorations where esthetics and polish retention are critical. Bulk-fill composites, meanwhile, show the lowest polymerization shrinkage and water absorption, which suggests reduced stress at bonded interfaces and improved dimensional stability over time [24].

Recent advancements in the manufacturing of dental composites have centered on optimizing filler particle distribution, enhancing resin–filler bonding, and improving curing efficiency. Techniques such as sol-gel synthesis offer precise control over filler composition and morphology, resulting in composites with superior optical and mechanical properties. Nano-milling processes generate ultra-fine filler particles with increased surface area, thereby improving dispersion and reinforcing the resin matrix. Spray-drying methods contribute to uniform particle agglomeration, enhancing handling characteristics and consistency. Moreover, advanced silanization techniques strengthen chemical adhesion between fillers and the resin matrix, minimizing micro-gaps and boosting wear resistance. Emerging additive manufacturing technologies also present promising avenues for fabricating custom-shaped indirect composite restorations with optimized curing depth and mechanical performance [25].

Despite their widespread adoption, dental composites continue to face challenges in clinical practice. Polymerization shrinkage remains a significant concern, as it can lead to marginal gaps, microleakage, and secondary caries if not properly managed. While bulk-fill composites offer partial mitigation of this issue, shrinkage stress persists, particularly in extensive restorations. Although wear resistance has improved markedly compared to earlier generations, it still falls short of ceramic materials, especially under high occlusal forces. Prolonged exposure to oral fluids can lead to water absorption and hydrolytic degradation of the resin matrix, undermining the material's mechanical integrity and long-term stability. Additionally, color stability may be compromised by dietary pigments, tobacco use, and suboptimal finishing techniques, raising esthetic concerns over time. Operator-dependent variables—including curing duration, placement strategy, and finishing protocols—play a pivotal role in the clinical success of composite restorations [26]. Looking ahead, the next generation of dental composites is poised to incorporate multifunctional capabilities that extend beyond mechanical performance. Bioactive composites capable of releasing calcium, phosphate, and fluoride ions may promote remineralization of adjacent tooth structures, enhancing the biological integration of restorations. Antibacterial composites, which include agents such as silver nanoparticles, quaternary ammonium compounds, or bioactive glass, aim to inhibit bacterial colonization and reduce the risk of recurrent decay. Self-healing composites, featuring embedded microcapsules or dynamic polymer networks, offer the potential to autonomously repair microcracks, thereby extending the lifespan of restorations. Innovations in photoinitiator chemistry may also enable deeper and more complete polymerization in thicker increments, broadening the scope of clinical applications. Furthermore, integration with CAD/CAM workflows will facilitate the production of highly customized indirect restorations with optimized physical and mechanical properties [27].

The comparative performance of nanofilled, microhybrid, and bulk-fill composites underscores the necessity of tailoring material selection to the specific clinical context. In anterior restorations, where esthetic outcomes and surface smoothness are paramount, nanofilled composites provide excellent gloss retention and wear resistance, despite their slightly lower mechanical strength. For posterior restorations exposed to substantial occlusal forces, microhybrid composites offer superior compressive and flexural strength. Bulk-fill composites are particularly advantageous in deep cavities and time-sensitive procedures, as they permit placement in thicker increments while minimizing shrinkage stress and ensuring adequate curing depth [28]. Ultimately, even the most advanced composite material may fail prematurely if clinical protocols are not rigorously adhered to. Proper layering, curing, and finishing techniques are essential for achieving durable and esthetically pleasing restorations. Ongoing education and training for dental professionals, coupled with continued innovation in composite technology, will be key to bridging the gap between laboratory performance and clinical longevity [29].

## Conclusion

In conclusion, dental composites have advanced significantly in terms of strength, wear resistance, esthetics, and handling. Each category—nanofilled, microhybrid, and bulk-fill—offers unique benefits suited to different clinical requirements. The future will likely see composites with enhanced biological activity, improved longevity, and integration with digital dentistry technologies. Ongoing collaboration between researchers, manufacturers, and clinicians will ensure that innovations in material science translate into tangible improvements in patient care and restoration outcomes. This comprehensive analysis confirms that composite selection in dental technology must consider the clinical context. Nanofilled composites excel in aesthetics and wear resistance, microhybrids in strength, and bulk-fills in efficiency and shrinkage control. Future work should explore hybrid systems combining the strengths of each category.

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