## Sodium Hypochlorite-Resin Modified Glass Ionomer Vital Pulpotomy in Primary Teeth. P. CHOMPU-INWAI\*, C. COX, A. DASANAYAKE, J. THORNTON and J. RUBY. University of Alabama at Birmingham, Birmingham, AL.

**Objectives:** The aim of this randomized clinical trial was to evaluate the clinical and radiographic success of sodium hypochlorite-resin modified glass ionomer (SH-RMGI) vital pulpotomy as compared to the traditional 1:5 diluted formocresol-zinc oxide eugenol (F-ZOE) vital pulpotomy in the primary teeth of children. Methods: To date 39 teeth from 17 patients were assigned to either the SH-RMGI (experimental) or F-ZOE (control) group. In the experimental group (25 teeth), hemostasis was obtained by placing 5.25% sodium hypochlorite over the pulp stumps for 5 min with a sterile cotton pellet. Following hemostasis, a 2-3 mm layer of RMGI (Fuji II LC) was placed over the pulp stumps and light-cured. The remaining coronal pulp chamber was conditioned with polyacrylic acid, filled with Fuji II LC and light-cured. In the control group (14 teeth), hemostasis was obtained by placing Buckley's formocresol (1:5 dilution) over the pulp stumps for 5 min with a sterile cotton pellet. Following hemostasis, the pulp chamber was filled with ZOE. The teeth of both groups were restored with stainless steel crowns and cemented with Ketac cement. The treated teeth were evaluated using clinical symptoms (history of pain) at one day and 3 months post-operatively by a telephone interview with the parent. At 6 months a clinical and radiographic examination will be performed. Results: All 39 treated teeth had no symptoms the day after treatment. The 3-month evaluation also indicated no symptoms in either group. Conclusion: There is no statistical difference in the short-term symptomatology between F-ZOE and SH-RMGI groups after vital pulpotomy treatment in primary teeth.