An impressive case report featuring Geristore was presented in the December 2002 issue of DentalTown*. Also, Geristore recently earned prominence by capturing the coveted Four-Star 2002 Reality Award for its exceptional self-adhesive properties.

This award-winning, multi-use, resin ionomer has been resolving tough challenges for more than a decade. For example, dentists, such as Lloyd Marcum DDS, of San Luis Obispo, California, Dr. Ronald J. paler, of Westland, Michigan, and Dr. Harry Bobotis, of Panama City, Florida, to name just a few, have had impressive results by using Geristore for subgingival surface defects, such as root resorption lesions and root fractures.

Lloyd Marcum, DDS, has been using Geristore for many years. “I had heard some positive reports from periodontists about good results...and it made good sense to me to use it for subgingival resorption defects,” explains Marcum, a specialist in Endodontics. “I strongly suggest using Geristore for subgingival repairs because of its exceptional biocompatibility.”

Dr. Marcum also cited good adhesion, the dual cure feature, and radiopacity as reasons for his consistent usage of Geristore. “It is very liquid when placed, and has a nice flow to it...this helps because it goes where I put it, stays there, and fills in all of the voids.”

This easy-application attribute is especially important for geriatric and pediatric patients. Dr. Ronald J. Paler concurs that Geristore has been a “big success with my geriatric patients.”

Dr. Peter Gambino uses Geristore for cases with subgingival restorations and fractured roots. “I have used it to cement Maryland bridges with a 0% failure rate,” he said, adding, “This product saves me precious time by avoiding redos.”

Dr. Harry Bobotis strongly believes in Geristore’s restorative qualities. He continu-

ally applauds Geristore’s biocompatibility. “This has aided in stabilizing completely avulsed, intact teeth, preventing unnecessary extractions.”

In addition to the experiences of individual practitioners, the excellent results from formal clinical studies also substantiate the outstanding and unique performance of Geristore.

Here are some of the published studies regarding Geristore....


Geristore was used for root perforations based on favorable clinical reports of biocompatibility.


The successful use and placement of subgingival resin-ionomer restorations (Geristore) in both anterior root and molar furcation defects are demonstrated in this article. Sustained tissue health and minimal probing depths at the surgical site demonstrate clinical success. These case reports illustrate the continued success of alternative treatment procedures for restoring subgingival mechanical root or periodontal lesions.


This clinical study used Geristore to repair a mechanical root perforation. It was concluded that when Geristore is used to repair a root perforation, the procedure involves less chair time and fewer appointments; the procedure is less invasive; the treatment maintains crown-to-root ratios; the therapy involves less expense for the patient; and postoperative recovery is usually faster.


The purpose of this in vitro study was to evaluate apical dye penetration when SuperEBA or Geristore (Den-Mat Corp.) was used as a retrofilling material. It was concluded that placing bonding agent over the SuperEBA and across the beveled root surface significantly decreased apical dye penetration. Geristore placed solely in a retropreparation or completely across a concave root surface allowed no apical dye penetration.


This study consists of twenty-five patients with 50 subgingival restorations. Clinical applications included external root resorption, root fracture, and root perforation. The conclusion that can be made from these cases is that there is clinical and histological evidence of epithelia and connective tissue adherence to a resin ionomer: Geristore. Recalls were after 1 year, 18 months, and 3 years in some cases.


The purpose of this study was to introduce a new technique for guided tissue regeneration with the use of Geristore. The conclusions of this study are as follows: 1) Geristore may be used as a barrier in the regenerative treatment of an intrabony defect; 2) Geristore demonstrated a self-adhesiveness and biocompatibility with surrounding tissue. When used subgingivally, it did not interfere with postsurgical wound healing. 3) Geristore’s fluoride releasing ability within the resin ionomer reduces the gingival inflammatory state and postsurgical complications.


Histology studies were performed on tissues surrounding Geristore after it had been subcutaneously implanted into guinea pigs that were sacrificed at 12 weeks post implantation. The focal nature of the skeletal muscle compression seen microscopically suggested little movement of the tested material in situ, a feature consistent with attachment of the test material to adjacent tissue. The results suggested that Geristore had features of biocompatibility and was void of severe tissue reactivity when used under the conditions of the study.


This six-month clinical study involved 10 patients with Class I furcation lesions restored with Geristore. The results showed 100% retention of the restoration without discoloration of the margins of the restoration or postoperative sensitivity. The present study clearly establishes the biocompatibility of Geristore restorative material in Class I furcation lesions to the tooth structure and surrounding periodontal tissues. The results indicated that Geristore could be used in early prevention of furcation lesions.


This study compared the characteristics of three different resin ionomer materials, specifically Dyract (Dentsply) Geristore (Den-Mat) and Photac-Fil (ESPE Premier). Of the three materials tested, Geristore displayed the most favorable results.


The purpose of these case reports is to introduce a potential use for a resin-ionomer, namely Geristore, in guided tissue regeneration. This technique paper discusses how to use Geristore for such regenerative procedures.


This article presented the clinical application of Geristore with emphasis on its use in subgingival and periodontal applications.


The cases presented demonstrated the clinical potential for the subgingival use of Geristore as a barrier in surgical regenerative procedures. The preliminary evidence with respect to surgical reentries looks promising.

Attached are some subgingival clinical applications.

In conclusion, it can be seen that Geristore has earned its outstanding reputation many times over with exceptional performance in a wide variety of difficult clinical applications.

*Den-Mat thanks Drs. Dragoo and Perry for the use of their clinical images for this article.