
The effects of three whitening toothpastes on the color stability, microhardness, and surface roughness of contemporary one-shade composite systems

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Since our manuscript does not involve any human- or animal-derived material, obtaining ethics committee approval was not required.

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ABSTRACT

Background: The aim of this study was to evaluate the mechanical (surface roughness & microhardness) and optical (color stability) properties of two modern one-shade dental composites following exposure to three different whitening toothpastes.

Methods: A total of 192 disc-shaped specimens ($n=8$; per subgroup) were prepared from two one-shade composites: ONE (Charisma One, Kulzer, Germany) and VITTRA APS (Advanced Polymerization System) Unique (FGM, Germany). Specimens were assigned to four brushing media: Opalescence Whitening, Signal White Now Glossy Shine, Colgate Optic White Expert, and distilled water (control). Discs (2 mm \times 10 mm) were fabricated using a Teflon mold, stored at 37°C for 24 h in tap water. Microhardness (Vickers; 200 g/10 s), surface roughness (contact profilometry), and color parameters (VITA Easyshade V; CIEDE2000) were recorded before and after a toothbrushing simulation of 10,000 cycles. Toothpastes were used as a 1:3 (v/v) slurry. Data were analyzed using two-way ANOVA with Tukey's HSD test ($p<0.05$).

Results: All surface roughness values increased after toothbrushing; the greatest change was observed in the VW group (0.056 ± 0.017), whereas the smallest change occurred in the OCO group (0.006 ± 0.040) ($p<0.05$). In all subgroups, microhardness values decreased following brushing, and the most pronounced reduction was found in the OW group (-10.12 ± 3.24). This decrease was statistically significant when compared with the OS, OC, OCO, and VW groups ($p<0.05$). With respect to color stability, only the VW group remained below the clinically acceptable threshold ($\Delta E_{00} = 1.8$). Nevertheless, no statistically significant differences were detected among the experimental groups. Nor, interestingly, did any group other than VW exhibit a change that fell within the clinically acceptable range.

Conclusion: The compositional architecture and formulation of dental composites, in conjunction with toothpaste constituents, may lead to divergent outcomes when subjected to various mechanical tests.

Keywords: CIEDE2000, microhardness, one-shade composite, surface roughness, toothpaste

INTRODUCTION

One of the most pivotal means of removing microbial dental plaque—the principal culprit behind dental caries and periodontal diseases, and a key player in their progression—is toothbrushing^{1,2}. In this context, the synergistic interplay between toothbrushes and toothpastes emerges as indispensable for the preservation of both dental health and esthetics^{3,4}. Toothbrushes and toothpastes, hailed as the most frequently chosen and arguably the most essential oral hygiene instruments, are routinely employed by individuals striving to maintain optimal oral health^{5,6}. In this ever-evolving field, a diverse array of therapeutic and functional formulations—tailored to address various dental maladies and challenges—continues to be developed, encompassing both innovative toothpaste compositions and advanced toothbrush designs^{3,7-10}.

In this era where esthetic dentistry enjoys unprecedented popularity¹¹, advances in material chemistry have inevitably influenced modern composite materials as well. Replacing traditional polychromatic composites, one-shade composites, designed to offer both ease of use and simplified shade selection for clinicians, have emerged as a testament to this progress¹². Beyond their therapeutic role in preserving oral health, the influence of oral hygiene instruments on the color stability of esthetic dental restorative materials, whether beneficial or detrimental, remains a subject of ongoing debate and investigation¹³⁻¹⁵. Notably, the recent development of restorative dentistry has introduced materials capable of mimicking the color of the surrounding dental tissues post-polymerization, thus achieving the so-called “chameleon effect”^{12,16}. Toothpastes, on the other hand—complex semi-solid mixtures composed of a multitude of chemical constituents^{3,17}—can exert various effects on the surface of esthetic composite resins, owing to their abrasive, whitening, and other active ingredients^{18,19}. Yet, despite the proliferation of modernized dental composites, studies specifically examining the effects of toothbrushing with toothpaste on these new materials remain limited¹². Accordingly, it remains unclear to what extent the “chameleon effect”-driven optical performance promised by one-shade composites is preserved after toothbrushing with a range of whitening toothpastes routinely used in daily oral hygiene, particularly given the marked compositional heterogeneity of these products. This uncertainty underscores the need for studies employing a unified experimental model in which color stability is assessed alongside surface roughness and microhardness.

Beyond, the present study aims to comparatively evaluate the performance of two novel one-shade composite resins when subjected to brushing with different types of toothpastes, focusing on key physical properties such as color stability, surface roughness, and hardness. The null hypothesis of the study posits that brushing composite surfaces with toothpaste does not induce any significant changes in these physical characteristics.

MATERIAL METHODS

Determination of sample size and study design

Prior to commencing the procedures, a power analysis was conducted using the statistical software G*Power 3.1.7 to determine the group sample sizes. The statistical power of the study was expressed as $1-\beta$ (where β represents the probability of a Type II error). Based on the data obtained from the study by Khamverdi et al., the effect size (d) was calculated as 1.8042901²⁰. With a significance level of $\alpha = 0.05$ and a statistical power of 90%, the minimum required sample size for each subgroup was determined to be seven. In this in vitro laboratory investigation, separate composite disk specimens were prepared for the assessment of microhardness, color stability, and surface roughness. To ensure methodological standardization, all specimen preparations were performed by a single operator (M.K.U.). Based on the power analysis, each subgroup comprised seven composite disks, yielding a total of 192 specimens for the study ($n=8$; per subgroup). Disks measuring 10 mm in diameter and 2 mm in thickness were fabricated using a custom Teflon mold. A Mylar strip was first placed on a glass plate, the mold was positioned on top, and—prior to light curing—a second Mylar strip and a glass slide were applied to the upper surface to promote uniform polymerization. After removal from the mold, the upper surfaces of the composite discs were finished and polished using a dedicated polishing system (Opti1Step™ Polisher, 8002 Cup Form; Balz-Zimmermann-Strasse 7, Kloten, Switzerland) in strict accordance with the manufacturer's instructions. Two composite materials were evaluated: a one-shade composite (VITTRA APS Unique, FGM, Brazil) and a nanohybrid composite (ONE Charisma Topaz, Kulzer, Germany). Light curing was performed with the designated curing unit in accordance with the manufacturer's instructions. The experimental workflow, which involved four different toothpaste formulations, is illustrated in the flow diagram (Figure 1). Detailed material compositions and application protocols are presented in Table 1.

Brushing procedure

The prepared composite discs were brushed using a mechanical simulator. Three toothpastes, each diluted to one-third (v/v), were applied with a pre-selected medium-bristled toothbrush (Colgate Extra Clean 1+1) within the simulator. The protocol comprised 10,000 circular brushing cycles (18 mm in diameter) at a speed of 40 mm/s and a force of 250 g, approximating one year of brushing²¹.

Surface roughness measurement

To quantify surface roughness, a contact-type, multilingual profilometer (SurfTest SJ-410, Mitutoyo, Tokyo, Japan) was employed. The instrument operated with a cut-off length of 0.2 mm and a horizontal evaluation length of 2 mm. A standard stylus probe mounted on the detector was used for all measurements. Following each run, the Ra values displayed on the device's touch-screen were transferred to a computer. For each specimen, three independent traces were recorded and their mean value was calculated. The instrument was calibrated prior to the measurement of each specimen²².

Microhardness measurement

The surface microhardness of the composite discs was assessed using a Vickers hardness tester (Falcon 400, Innovatest Europe BV, Maastricht, The Netherlands). A load of approximately 200 g was applied for 10 seconds to generate indentations characteristic of the Vickers indenter. To ensure standardisation and obtain reliable values, measurements were taken at the disc centre and at near-central locations,

maintaining a minimum spacing of 100 μm between indentations. The diagonal lengths of each indentation were measured with a 40 \times ocular lens, and the corresponding hardness values were recorded ²³.

Assessment of color stability

Measurements were acquired using a spectrophotometer (VITA Easyshade V, VITA Zahnfabrik, Bad Säckingen, Germany). Prior to acquisition, specimen surfaces were dried and cleaned, and measurements were recorded at two time points (pre- and post-brushing). All measurements were performed by a single operator (M.S.). Under the D65 standard illuminant and against a neutral gray background, values were recorded in the CIELAB color space as L^* , a^* , and b^* . Color stability was quantified using the CIEDE2000 color-difference formula, and ΔE_{00} values were computed ²⁴.

$$\Delta E_{00} = \sqrt{\left(\frac{\Delta L'}{k_L S_L}\right)^2 + \left(\frac{\Delta C'}{k_C S_C}\right)^2 + \left(\frac{\Delta H'}{k_H S_H}\right)^2 + R_T \left(\frac{\Delta C'}{k_C S_C}\right) \left(\frac{\Delta H'}{k_H S_H}\right)}$$

Differences in lightness, chroma, and hue are denoted by $\Delta L'$, $\Delta C'$, and $\Delta H'$, respectively. The parametric weighting functions S_L , S_C , and S_H —which normalize the overall color difference according to the position of the color pair in the L' , a' , and b' coordinates—were computed accordingly. The parametric factors k_L , k_C , and k_H were set to 1:1:1. The rotation term R_T accounts for the interaction between hue and chroma differences and was expressed mathematically as:

$$R_T = -\sin(2\Delta\theta) \cdot R_C.$$

All statistical analyses were performed using GraphPad Prism (GraphPad Software, San Diego, USA). The normality of data distribution was evaluated with the Shapiro-Wilk and Q-Q plot test. Differences in the mean ΔE_{00} values among composite resin groups were assessed by two-way ANOVA, followed by Tukey's HSD post hoc test for multiple comparisons. Assessed by Levene's test was the homogeneity of variances, and established was homogeneity. Statistical significance was defined as $P < 0.05$ for all analyses.

RESULTS

The surface roughness outcomes were not significantly affected by composite type ($F=1.86$; $p=0.177$). In contrast, toothpaste type ($F=7.21$; $p<0.05$) and the composite \times toothpaste interaction ($F=3.45$; $p<0.05$) were statistically significant. Based on the roughness values recorded before and after brushing with various toothpastes, the mean differences were calculated for both composite brands (Table 2-3). The greatest difference was observed in the VITTRA & Opalescence (VW) group (0.056 ± 0.017), whereas the smallest difference was detected in the ONE & Control (OCO) group (0.006 ± 0.040). When the ONE composite subgroups were evaluated individually, the lowest differences were also

found in the ONE & Control (OCO) subgroup. Among the VITTRA composites, the VCO subgroup exhibited the lowest values. Statistically significant differences were identified between VW-OW, VW-VCO, OW-OS, OS-OCO, and VW-OCO ($p < 0.05$). Between these specific pairs, therefore, the impact of the brushing regimen and toothpaste type appears more pronounced.

The microhardness outcomes were not significantly affected by the main effect of both composite and toothpaste type ($F = 1.315$ & $F = 0.547$ respectively; $p > 0.05$). In contrary, the composite \times toothpaste interaction were statistically significant ($F = 5.929$; $p < 0.05$). According to the hardness results, the highest numerical change after brushing was found in the OW group (-10.12 ± 3.24), while the smallest change was recorded in the VW group (-1.30 ± 5.70). Post hoc analysis revealed statistically significant differences between the OW group and the OS, OC, OCO, and VW groups ($p < 0.05$) (Table 4-5). A reduction in microhardness values after brushing was observed in all subgroups.

Two-way ANOVA showed a significant composite \times toothpaste interaction for color stability ($F = 6.74$; $p < 0.05$) and the main effects of toothpaste type ($F = 3.16$; $p < 0.05$), whereas the main effects of composite type were not significant ($F = 3.57$; $p > 0.05$) (Table 6). The group with the highest ΔE_{00} value was VCO (3.32 ± 0.60), whereas the VW group exhibited the most favorable color stability (1.76 ± 0.63). All ΔE_{00} values are presented in Table 7, and brushing the ONE composite with different toothpastes did not result in a statistically significant difference in color stability compared with the control group. For the VITTRA composite, however, the VCO group differed significantly from the other groups ($p < 0.05$). When the composites were compared under identical brushing conditions, a statistically significant difference emerged only in the water-only control group (VCO) ($p < 0.05$); no such inter-composite divergence was observed for any of the toothpaste groups (Table 7).

DISCUSSION

The null hypothesis was rejected in light of the obtained findings. With respect to surface roughness, toothpaste alone emerged as a strong influencing factor, and, in addition, the combination of toothpaste and composite type demonstrated a synergistic effect, which was statistically significant in terms of its impact on surface roughness (Table 6). Regarding surface microhardness, the interaction between the composite material and the toothpaste type demonstrated a strongly significant effect ($p < 0.05$). However, when each factor was analyzed independently, neither the composite material nor the toothpaste type showed a statistically significant main effect (Table 6). As for color change, toothpaste on its own significantly affected color stability, and, moreover, the combined effect of toothpaste and composite type also showed a statistically significant influence on color stability (Table 6).

This study's key strengths and originality lie in its focus on contemporary one-shade composites, the inclusion of whitening toothpastes with distinct formulations, and the incorporation of a water-only control for robust comparison. Moreover, by evaluating multiple endpoints—optical outcomes, microhardness, and surface roughness—within a single experimental model under a standardized toothbrushing simulation, the study provides an integrated and clinically meaningful appraisal of material performance. The clinical success of composite

restorations, particularly in the anterior region, has been reported within a wide range of approximately 50–100%, and it is evident that the type of material and its mechanical properties are closely associated with failure and the onset of esthetic complications (such as color mismatch, loss of anatomical form, and discoloration)²⁵. It should be borne in mind that laboratory investigations of the physical or mechanical properties of dental composites may not always correlate with their clinical performance. Nevertheless, conducting multiple tests under laboratory conditions in place of in vivo studies—which are both costly and time-consuming—represents one of the more rational approaches for generating predictions about clinical outcomes^{26,27}.

Various types of toothbrushing simulators have been employed in studies designed to evaluate the abrasivity of toothpastes^{21,28,29}. According to the current standard in this field, BS EN ISO 11609:1998, test devices may be constructed as flat-bed systems or configured to more closely replicate human brushing kinematics, incorporating vertical reciprocating or rotary motions. In this context, novel systems are also being developed to approximate real-life brushing performance as closely as possible²⁸. On hard tissues—particularly dentine—it has been shown that different simulator designs, such as linear back-and-forth versus rotary motion, can yield statistically distinct levels of wear^{29,30}. Accordingly, and in line with previous literature, toothpastes in the present study were diluted at a 1:3 ratio, and brushing was performed under a 250 g load using a circular motion^{21,31}. **Based** on the understanding of brushing-induced changes, it has been proposed that two distinct wear mechanisms may occur in anterior and posterior composite restorations: first, fatigue-related wear; and second, abrasion associated with lateral crack formation and filler particle loss, particularly in anterior composites³². Whether particle size in composite materials directly affects clinical performance remains a matter of investigation, and in vitro studies continue to report divergent findings^{22,33}. Although non-contact, three-dimensional optical profilometers are highly informative for surface roughness assessment—offering detailed and visually rich topographical data³⁴—contact profilometers are still frequently preferred when rapid and standardized measurements are required^{22,26,35}. Hardness, defined as the resistance of a material to deformation under an applied force, can be measured through both invasive and non-invasive approaches. By applying very small or relatively large loads, surface microhardness can be quantified without causing substantial damage, using scales such as Brinell, Knoop or Vickers. Among these, the Vickers test is widely adopted: the diagonals of the indentation left by a diamond indenter are measured, and the corresponding hardness value is calculated by the device. In accordance with ISO standards, a load of 200 g was applied for a dwell time of 10 seconds in the present study, and surface microhardness values were recorded in Vickers units²³.

CIEDE2000 is a widely preferred system for calculating color differences in dental materials³⁶, and it also enables the assessment of various optical abilities such as masking³⁷. Beyond dental resins, CIEDE2000 has been increasingly applied in recent years across different disciplines and materials^{38–42}. Although color differences can also be calculated using the CIELAB formula³³, the perceptibility and acceptability thresholds for these two systems differ according to the literature^{43,44}. In addition, substantial discrepancies may arise in the calculated values depending on the chosen formula⁴⁵. CIEDE2000 is essentially an

improved version of CIELAB and incorporates specific weighting functions for lightness (S_L), chroma (S_C), and hue (S_H), together with parametric factors (k_L , k_C , k_H), as well as the rotation term R_T used to correct chroma and hue differences in the blue region of the color space⁴⁶. Sharma further reported that the equations used in CIEDE2000 include multiple sources of discontinuity, particularly in the computation of h^* ²⁴. Although this formulation does not define a unique color space of its own, it employs modified L^* , a^* , b^* coordinates and has been shown to be effective for quantifying small color differences. In a key threshold-defining study aimed at standardizing interpretation among researchers, the 50:50% perceptibility threshold for CIEDE2000 was determined as 0.8, and the clinical acceptability threshold as 1.8⁴⁴. On this basis, the present study used the CIEDE2000 formulation to determine color stability values.

In the present study, which included two modern one-shade composite types, VITTRA was found to have a higher filler content than ONE. We hypothesize that the silanized glass phase in VITTRA may theoretically limit water sorption and degradation of the organic matrix, thereby providing an advantage in terms of color stability and microhardness^{47,48}. Furthermore, VITTRA incorporates an advanced APS initiator system, which may allow for improved depth of cure and, indirectly, enhanced mechanical properties⁴⁹. In contrast, the presence of both UDMA and TEGDMA in ONE is indicative of a more flexible matrix, and, combined with its lower filler loading, may result in greater water uptake and surface solubility compared with VITTRA^{50,51}. This, in turn, could potentiate the whitening and abrasive effects of the toothpastes on the ONE composite.

In many studies, increased roughness and reduced gloss have been reported after toothbrushing due to abrasive effects⁵². A reduction in gloss may directly influence the L^* parameter in the CIEDE2000 formula, and, because of the formula's dependence on L^* , ΔE_{00} values exceeding the clinically acceptable threshold may have been detected. As particle size increases, the hardness of the material tends to be higher than that of materials with smaller particle sizes; accordingly, surface roughness values often follow a similar trend³². In the present study, microhardness values decreased in all subgroups, with the most pronounced reduction observed in the ONE + Opalescence group (-10.12 ± 3.24). The lower filler content and the presence of TEGDMA in ONE may have contributed to this outcome^{51,53}. In addition, the silica-based abrasive system and surfactants in Opalescence whitening toothpaste may have promoted surface wear and matrix softening, thereby exacerbating the microhardness reduction in the ONE + Opalescence group. It is noteworthy that the roughness values remained below the clinically acceptable threshold of $0.2 \mu\text{m Ra}$ ⁵⁴, although a certain increase in surface roughness was observed in all subgroups after brushing. The greatest change occurred in the VW group, while the smallest change was recorded in the OCO group. Considering the mean values, ONE groups generally exhibited higher surface roughness than VITTRA, which may primarily be attributed to the higher filler loading in VITTRA. Although a high filler content is often regarded as advantageous, it does not invariably guarantee lower roughness; following toothpaste use, the type of abrasive and the presence of surface-active agent can also adversely affect the glass filler phase⁵⁵. Composite surface roughness may be further influenced by abrasives such as silica/hydrated silica, calcium aluminum borosilicate, and calcium and tetrasodium pyrophosphate, as well as by matrix-weakening chemical components including SLS, pH-adjusting bases/acids, and

hydrogen peroxide³. The use of only water in the control group, in the absence of such mechanical and chemical agents, explains the minimal increase in roughness observed in this group.

It has been reported that, following brushing with toothpaste, color stability values on composite surfaces generally tend to increase compared with control groups⁵⁶. In the present study, all three toothpastes used had whitening properties but differed structurally from one another. Existing literature suggests that, after the use of whitening toothpastes, color stability of composite surfaces may be improved relative to controls. However, the behavior observed in hardness tests may differ⁵⁶. In terms of color stability, the only composite-toothpaste combination that yielded a value below the clinically acceptable threshold was Opalescence & VITTRA ($\Delta E_{00}=1.76 \pm 0.63$). It is evident that all other values exceeded the corresponding cut-off. When toothpastes were compared with respect to color stability, no statistically significant differences were detected between the composites, with the exception of the control (water) group. In the control groups brushed with water alone, the absence of any chemical or colloidal medium between the toothbrush and the composite surface—and, consequently, the lack of a toothpaste-derived interfacial film or residue—may render brushing-induced microstructural surface alterations more pronounced. This, in turn, could increase light scattering and thereby promote greater optical deviation, yielding poorer color-stability outcomes. By contrast, the lack of a significant difference between the composites in the toothpaste groups may plausibly be attributed to a comparable residue- and/or polishing-like effect, which is likely to drive a convergence of ΔE_{00} responses across both composite types. In a related study using three similar toothpastes on ceramic blocks, color differences were found to be far above clinically acceptable limits, and surface roughness was shown to increase regardless of the toothpaste used⁵⁷. In our study, although color stability was influenced synergistically by both composite type and toothpaste type, composite type alone was not identified as a determining factor. Given its higher filler content and APS initiator system, VITTRA may be regarded as having color stability that is comparable to or better than that of ONE. Although the Opalescence & VITTRA group demonstrated color stability within clinically acceptable limits, whitening toothpastes may not invariably secure the anticipated level of color stability across all one-shade composite systems. In summary, certain mechanical properties of single-shade composites—such as surface hardness and roughness—can vary as a function of their organic and inorganic composition⁵⁸.

If the present laboratory-based study had been conducted under *in vivo* conditions, it is likely that different results would have been obtained. This discrepancy would primarily arise from inherent limitations of *in vitro* methodologies, such as the absence of biokinetic phenomena and the inability to fully replicate the unique characteristics of oral fluids⁵⁹. This *in vitro* brushing simulation may not fully reproduce the complex conditions of the oral environment (e.g., salivary dynamics, biofilm formation, pH fluctuations, patient-specific brushing habits, and variability in dietary and toothpaste use); therefore, the observed changes in the mechanical properties of the tested composites and their interactions with different toothpastes should be interpreted with caution, as they may not directly reflect *in vivo* behavior or long-term clinical performance. Although a correlation between surface roughness and gloss has been reported in the literature⁶⁰, gloss measurements could not be performed in this study due to

the unavailability of a glossmeter. Furthermore, insofar as the VITA Easyshade is regarded—based on current scientific evidence—as a reliable instrument for color assessment and is extensively employed in the literature, ambient illumination and background conditions during the pre- and post-measurement sessions were rigorously standardized. Ensuring a stable, low-variability lighting environment, preferably under neutral illumination; using a neutral background (e.g., grey tones); minimizing the presence of surrounding colors (such as colored gloves, drapes, lipstick, etc.) to reduce reflections toward the sensor or the tooth; keeping the specimen surface clean and dry with a standardized drying procedure; positioning the probe tip in full contact with the surface—ideally perpendicular to the specimen—while applying a standardized pressure; and predefining and documenting the measurement protocol in a clear and consistent manner are all essential prerequisites for obtaining standardized and reproducible color measurements.

CONCLUSION

In this study, the effects of three whitening toothpastes with distinct formulations on the mechanical and optical properties of two novel one-shade dental composite resins were critically evaluated. When examined in terms of the most favourable pairing, brushing VITTRA composites with Opalescence toothpaste yielded the best colour stability and the smallest reduction in surface hardness. Although the VITTRA & Opalescence combination was associated with the greatest increase in surface roughness, the lowest roughness increase was likewise observed within a VITTRA subgroup. In one-shade composites, surface roughness tends to increase and microhardness values tend to decrease following toothbrushing simulation. Following toothbrushing with whitening toothpastes, clinically acceptable color stability cannot be consistently guaranteed across all one-shade composite systems. However, the magnitude and nature of these alterations may vary depending both on the intrinsic characteristics of the dental material itself and on the specific compositional features of the toothpaste used during brushing. Additionally, it is important to exercise clinical caution when recommending whitening toothpastes to patients. Therefore, when one-shade composites are used in areas with high esthetic demands, clinicians should exercise particular caution when recommending whitening toothpastes and should monitor tooth shade and surface texture at periodic recalls, thereby helping to preserve the esthetic and mechanical performance of the restorative materials.

DECLARATIONS

Ethics approval and consent to participate

Since our manuscript does not involve any human- or animal-derived material, obtaining ethics committee approval was not required.

Consent for publication

Not applicable

Availability of data and materials

The data associated with this article may be made available upon reasonable request and with appropriate justification.

Competing interests

Not applicable

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Authors' contributions

M.S., O.C., M.K.Ü. and, O.Y. wrote the main manuscript text. The laboratory phase of the study was conducted by M.S., O.C. and, M.K.U. M.K.U. and, O.Y. contributed to the statistical analysis and interpretation of the results. M.S. and, O.C. prepared figures and tables. All authors reviewed the manuscript.

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TABLES

Table 1. The constituent information of all materials presented.

Name of brand	Model	Composition
Charisma	ONE Topaz (one-shade)	Barium Aluminium Boro Fluor Silicate Glass, TCD-Urethaneacrylate, Silica, UDMA, TEGDMA, Polymer, Titanium Dioxid, Fluorescent Pigments, Metallic Oxide Pigments, Organic Pigments, Aminobenzoicacidester, BHT, Camphorquinone. Charisma Topaz contains approximately 59% filler by volume, its filler particle size is 5 nm – 5 µm.
FGM	VITTRA APS Unique (one-shade)	Active ingredients: mixture of methacrylate monomers, photoinitiator composition (APS), co-initiators, stabilizers and silane. Inactive ingredients: boron-aluminum-silicate glass. Filler rate: 72-80/52-60 (wt/vol)
Opalescence	Whitening	Glycerin, Aqua, Silica, Sorbitol, Xylitol, Aroma, Poloxamer 407, Sodium Lauryl Sulfate, Carbomer, Sodium Benzoate, Sodium Fluoride, Sodium Hydroxide, Sucralose, Xanthan Gum, CI 42090 (Brilliant Blue FCF) , CI 19140 (tartrazine)
Signal	White Now Glossy Shine	Hydrogenated Starch Hydrolysate, Aqua, Hydrated Silica, Sodium Lauryl Sulfate, PEG-32, Aroma, Cellulose Gum, Sodium Fluoride, Sodium Saccharin, PVM/MA Copolymer, Calcium Aluminum Borosilicate, Trisodium Phosphate, Glycerin, Sodium Lauryl Sulfate, Lecithin, Tin Oxide, Caprylyl Glycol, Limonene, CI 74160, CI 77891.
Colgate	Optic White Expert	Glycerin, Propylene Glycol, Calcium Pyrophosphate, PEG/PPG-116/66 Copolymer, PVP, PEG-12, Tetrasodium Pyrophosphate, Sodium Lauryl Sulfate, Silica, Aroma, Sodium Monofluorophosphate, Sodium Saccharin, Phosphoric Acid, Hydrogen Peroxide, BHT, Limonene.
Control		Water

Abbreviations: [UDMA: Urethane Dimethacrylate, TEGDMA: Triethylene Glycol Dimethacrylate, BHT: Butylated Hydroxytoluene, APS: Advanced Polymerization System, CI: Color Index, PEG-32: Polyethylene Glycol 32, PVM/MA: Poly(vinyl methyl ether/maleic anhydride), PEG/PPG-116/66: Poly(ethylene glycol)/Poly(propylene glycol) 116/66, PVP: Polyvinylpyrrolidone, nm: nanometer, µm: micrometer, wt/vol: weight/volume

Table 2. Surface roughness values before and after brushing

	Composite	Toothpaste	Mean (Ra)	Std. Deviation
Before brushing	ONE (O)	Opalescence (OW)	0.118	0.015
		Signal (OS)	0.135	0.020
		Colgate (OC)	0.119	0.024
		Control (OCO)	0.119	0.040
	VITTRA (V)	Opalescence (VW)	0.063	0.011
		Signal (VS)	0.067	0.017
		Colgate (VC)	0.064	0.011
		Control (VCO)	0.063	0.012
After brushing	ONE (O)	Opalescence (OW)	0.126	0.015
		Signal (OS)	0.189	0.048
		Colgate (OC)	0.155	0.048
		Control (OCO)	0.126	0.043
	VITTRA (V)	Opalescence (VW)	0.119	0.021
		Signal (VS)	0.116	0.021
		Colgate (VC)	0.106	0.026
		Control (VCO)	0.074	0.024

Table 3. Pairwise comparisons in terms of surface roughness

Composite	Toothpaste	Mean differences + std.
ONE (O)	Opalescence (OW)	0.007 ± 0.008 ^{Ac}
	Signal (OS)	0.054 ± 0.040 ^B
	Colgate (OC)	0.050 ± 0.034 ^{AB}
	Control (OCO)	0.006 ± 0.040 ^{Ac}
VITTRA (V)	Opalescence (VW)	0.056 ± 0.017 ^{Bd}
	Signal (VS)	0.049 ± 0.021 ^{AB}
	Colgate (VC)	0.041 ± 0.027 ^{AB}

	Control (VCO)	0.010 ± 0.022^A
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Two-way ANOVA with Tukey HSD

p < 0.05

Statistically significant differences arising from comparisons among different toothpastes within each composite were denoted using different uppercase superscript letters. Statistically significant differences arising from comparisons between the two composites were denoted using different lowercase superscript letters.

Table 4. Microhardness values before and after brushing

	Composite	Toothpaste	Mean (VHN)	Std. Deviation
Before brushing	ONE (O)	Opalescence (OW)	61.48	2.30
		Signal (OS)	60.36	1.76
		Colgate (OC)	58.59	2.87
		Control (OCO)	58.52	2.03
	VITTRA (V)	Opalescence (VW)	56.48	2.71
		Signal (VS)	57.97	2.12
		Colgate (VC)	57.80	2.13
		Control (VCO)	56.31	2.68
After brushing	ONE (O)	Opalescence (OW)	51.35	4.86
		Signal (OS)	56.12	5.03
		Colgate (OC)	55.04	2.76
		Control (OCO)	54.94	2.79
	VITTRA (V)	Opalescence (VW)	55.17	4.94
		Signal (VS)	54.61	4.17
		Colgate (VC)	52.31	3.36
		Control (VCO)	49.94	1.51

Table 5. Pairwise comparisons in terms of Vickers Microhardness

Composite	Toothpaste	Mean differences \pm std (VHN)
ONE (O)	Opalescence (OW)	-10.12 ± 3.24^{Ac}
	Signal (OS)	-4.24 ± 6.33^B
	Colgate (OC)	-3.55 ± 3.40^B
	Control (OCO)	-3.58 ± 2.36^B
VITTRA (V)	Opalescence (VW)	-1.30 ± 5.70^{Ad}
	Signal (VS)	-3.35 ± 4.83^A

	Colgate (VC)	-5.48 ± 4.27^A
	Control (VCO)	-6.37 ± 2.97^A

Two-way ANOVA with Tukey HSD $p < 0.05$
 Statistically significant differences arising from comparisons among different toothpastes within each composite were denoted using different uppercase superscript letters. Statistically significant differences arising from comparisons between the two composites were denoted using different lowercase superscript letters.

Table 6: Two-way ANOVA analysis of the effects of composite resin material and toothpaste type on color stability, surface roughness and microhardness

		Sum sq	df	F	Effect Sizes (η^2)	p
color stability	C(composite type)	2.423	1	3.57	0.040	0.064
	C(toothpaste type)	6.430	3	3.16	0.106	0.03
	C(composite type) * C(toothpaste type)	13.726	5	6.74	0.227	0.005
	Residual	38.03	56		0.627	
surface roughness	C(composite type)	0.001541	1	1.867	0.032	0.177
	C(toothpaste type)	0.017861	3	7.218	0.278	0.0003
	C(composite type) * C(toothpaste type)	0.008543	3	3.452	0.156	0.022
	Residual	0.046186	56			
microhardness	C(composite type)	24.788	1	1.315	0.023	0.25
	C(toothpaste type)	30.909	3	0.547	0.028	0.652
	C(composite type) * C(toothpaste type)	335.263	3	5.929	0.241	0.001
	Residual	1055.503	56			

Table 7: Comparison of the color stability of two different dental composites subjected to brushing with different toothpastes

ΔE_{00}	ONE	VITTRA
OPALESCENCE	2.36 ± 0.85^{Aa}	1.76 ± 0.63^{Aa}
SIGNAL	2.56 ± 1.08^{Aa}	2.19 ± 0.42^{Aa}
COLGATE	2.41 ± 0.53^{Aa}	2.44 ± 0.42^{Aa}
CONTROL	2.75 ± 0.37^{Aa}	3.32 ± 0.60^{Bb}

Two-way ANOVA with multiple comparisons (Tukey HSD) $p < 0.05$
 Different uppercase letters indicate statistically significant differences between groups in the same row. Different lowercase letters indicate statistically significant differences between groups in the same column.

FIGURE

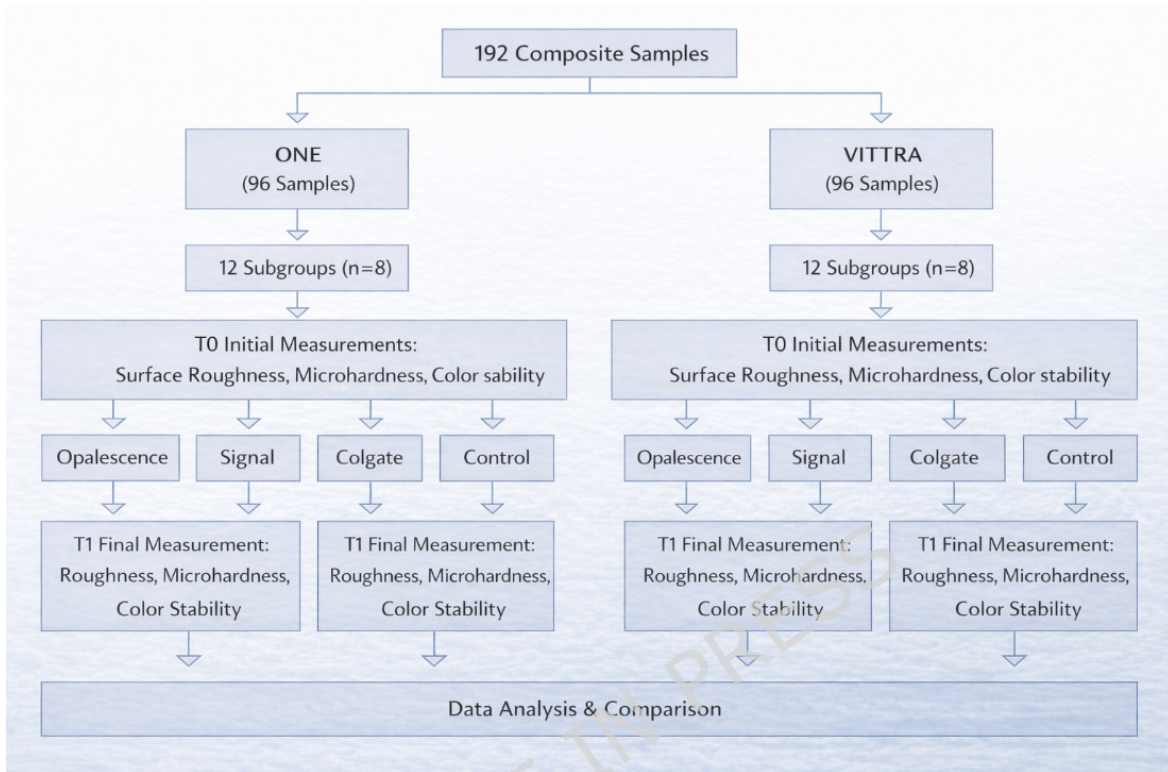


Figure 1. Flow diagram illustrating the procedures to be performed