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Autores	Valdinéia Maria Tognetti, Elora da Silva Toledo, Tainá Moreira Alves, Karina Ferreira Rizzardi, Thaís Manzano Parisotto, Fernanda Miori Pascon
Autor (es) USF	Elora da Silva Toledo, Karina Ferreira Rizzardi, Thaís Manzano Parisotto
Autores Internacionais	-
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Resumo	Objectives: This study evaluated the antimicrobial activity, clinical and radiographic outcome of pulpectomy in primary teeth using either 1% sodium hypochlorite (NaOCl) or 2% chlorhexidine (CHX) as irrigants. Materials and methods: A randomized double-blind controlled clinical study in which primary teeth were allocated to 1% NaOCl (n = 20) and 2% CHX (n = 20) groups. Microbiological collections were performed before and after irrigation for agar culture and real-time polymerase chain reaction (qPCR). Clinical and radiographic success was assessed at different times. Data were submitted to descriptive analysis, chi-square, Mann-Whitney, and Wilcoxon tests ($p < .05$). Results: For 1% NaOCl, the following clinical and radiographic success rates were observed: 7 days (93%/80%); 30 days, 3 and 6 months (100%). For 2% CHX: 7 days (73%/53%); 30 days (93%); 3 months (100%/93%); 6 months (100%) ($p > .05$). One percent NaOCl and 2% CHX effectively reduced total microorganisms ($p < .05$) but not mutans streptococci ($p > .05$). In qPCR analysis, the solutions promoted a reduction of total bacteria and Streptococcus mutans, and no difference was observed between times and groups ($p > .05$). Conclusions: One percent NaOCl and 2% CHX were effective for clinical and radiographic success and antimicrobial activity in primary teeth submitted to pulpectomy. Clinical relevance: Studying the antimicrobial activity and clinical and radiographic outcomes of pulpectomy in primary teeth using NaOCl and CHX as irrigants is clinically relevant because it provides information for optimizing treatment protocols and improving the quality of care for pediatric patients. It contributes to evidence-based practice and can potentially lead to better outcomes, reduced complications, and enhanced patient experiences.
Fomento	-