

Review Article

An overview of uses and effectiveness of intracanal medicaments in endodontics

Waleed K. Alshargawi^{1*}, Wesam Y. Alibrahim², Majed O. Bakkar³, Turki F. Almansour⁴,
Albara M. Alshanbari⁵, Hatem A. Alqarni⁶, Faisal M. Aljally⁷, Saleh I. Algzlan⁸,
Nouran O. Jamal⁹, Reem S. Alqarni¹⁰, Hassan H. Almutarid¹¹

¹Department of Endodontics, Al Thager Hospital, Jeddah, Saudi Arabia

²West Riyadh Dental Center, Dental Medical Complex in West of Riyadh, Riyadh, Saudi Arabia

³Taif Specialized Dental Center, Ministry of Health, Taif, Saudi Arabia

⁴College of Dentistry, Najran University, Najran, Saudi Arabia

⁵Dental Department, Makkah Health Cluster, Mecca, Saudi Arabia

⁶College of Dentistry, Taif University, Taif, Saudi Arabia

⁷College of Dentistry, Najran University, Najran, Saudi Arabia

⁸College of Dentistry, Vision Colleges, Riyadh, Saudi Arabia

⁹Department of Endodontics, 32 Dental Clinic, Mecca, Saudi Arabia

¹⁰College of Dentistry, King Khalid University, Abha, Saudi Arabia

¹¹College of Dentistry, Najran University, Najran, Saudi Arabia

Received: 01 January 2025

Accepted: 20 January 2025

*Correspondence:

Dr. Waleed K. Alshargawi,

E-mail: waldosh55@hotmail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Intracanal medicaments play a crucial role in endodontics by addressing microbial infections and facilitating the healing of periapical tissues. Their effectiveness lies in their ability to disinfect the root canal system, eliminate biofilms, neutralize bacterial endotoxins, and promote tissue repair. Calcium hydroxide, a widely used traditional medicament, demonstrates strong antimicrobial properties and creates an alkaline environment unfavorable for bacterial survival. However, its limitations against certain resistant pathogens and restricted penetration into dentinal tubules have driven the development of advanced alternatives. Emerging medicaments such as nanoparticle-based formulations and bioglass offer promising solutions by overcoming these limitations. Nanoparticles, with their ability to penetrate complex canal systems, deliver potent antimicrobial effects and enhance disinfection efficiency. Bioglass not only disrupts bacterial activity but also facilitates dentinal remineralization, making it particularly valuable in regenerative procedures. Hydrogels, designed for controlled and sustained drug release, improve the delivery of medicaments into anatomical complexities, enhancing their overall efficacy. Natural products like neem, propolis, and aloe vera are gaining attention for their biocompatibility and antimicrobial capabilities, providing effective alternatives for patients' sensitive to synthetic agents. These formulations also address concerns about resistance and toxicity associated with conventional options. Advances in delivery systems, including sonic and ultrasonic activation, further amplify the efficacy of both traditional and emerging medicaments. Comparative analyses of these approaches highlight the advantages of integrating innovative technologies with proven methods, enabling clinicians to address complex infections and improve long-term treatment outcomes. The evolving landscape of intracanal medicaments continues to push the boundaries of what can be achieved in endodontics, promising enhanced patient care through effective disinfection and tissue healing.

Keywords: Intracanal medicaments, Endodontic disinfection, Calcium hydroxide, Nanoparticle-based formulations, Regenerative endodontics

INTRODUCTION

Endodontics primarily aims to preserve the function and integrity of teeth affected by pulpal or periapical disease. Central to this goal is the eradication of microorganisms from the root canal system, a complex anatomical space that can harbor biofilms and resistant pathogens even after mechanical instrumentation and irrigation. Intracanal medicaments are therefore employed as adjunctive agents to improve disinfection, reduce microbial load, and promote periapical healing.¹

Calcium hydroxide is one of the most extensively studied intracanal medicaments in endodontics. Its high pH provides a strong antibacterial effect by creating an environment hostile to microbial survival, particularly targeting obligate anaerobes. Additionally, calcium hydroxide can dissolve necrotic tissue and neutralize endotoxins, further enhancing its clinical utility. However, its limited effectiveness against certain pathogens such as *Enterococcus faecalis* and its inability to adequately penetrate dentinal tubules have led to the exploration of alternative medicaments.² Chlorhexidine is another widely used medicament, known for its broad-spectrum antimicrobial properties and substantivity. It has demonstrated significant effectiveness against both Gram-positive and Gram-negative bacteria commonly implicated in endodontic infections. Chlorhexidine can be used in gel or liquid form, and its ability to adhere to dentinal walls enhances its antimicrobial effect over time. Despite these advantages, potential drawbacks include cytotoxicity at high concentrations and incompatibility with certain root canal sealers, which may affect its overall performance.³

In recent years, there has been growing interest in the use of natural and herbal alternatives for intracanal disinfection. Propolis, turmeric, and neem extracts have demonstrated promising antimicrobial effects and biocompatibility, offering an alternative to synthetic agents. These natural medicaments are particularly advantageous for patients with hypersensitivity to conventional chemicals or those seeking more holistic approaches. However, the lack of standardization in their preparation and concentration, coupled with variability in clinical outcomes, presents challenges to their widespread adoption.⁴ Advances in delivery systems for intracanal medicaments have further enhanced their efficacy. Techniques such as ultrasonic or sonic activation, as well as nanoparticle-based formulations, allow for better penetration of medicaments into the complex root canal anatomy. These innovations address limitations associated with traditional delivery methods and improve the medicament's ability to act on biofilms residing in inaccessible areas.⁵ The integration of these advanced techniques with conventional and novel medicaments holds promise for improving endodontic treatment outcomes.

The selection of an intracanal medicament is influenced by multiple factors, including the type and extent of infection,

patient-specific considerations, and the medicament's physicochemical properties. Effective disinfection is paramount to achieving long-term success in endodontic therapy, making the choice of medicament a critical decision in clinical practice. This review aims to provide a comprehensive overview of the uses, mechanisms, and effectiveness of intracanal medicaments in modern endodontics.

REVIEW

Intracanal medicaments play a critical role in achieving microbial disinfection during endodontic treatment, especially in cases where mechanical instrumentation and irrigation alone are insufficient. These medicaments target persistent pathogens, reduce inflammation, and create an environment conducive to periapical healing. Among these, calcium hydroxide has been extensively used for its broad-spectrum antimicrobial properties and ability to neutralize endotoxins. Despite its advantages, it is less effective against resistant species such as *Enterococcus faecalis* and *Candida albicans*, which can survive in the alkaline pH it creates, thereby posing a challenge to its efficacy.⁶

Chlorhexidine has emerged as an effective alternative, especially for addressing resistant pathogens. Its substantivity and broad-spectrum action against both Gram-positive and Gram-negative bacteria enhance its utility in root canal therapy. However, concerns about its cytotoxicity and potential to alter the mechanical properties of dentin must be considered. Innovations such as combining chlorhexidine with other medicaments or using advanced delivery systems, like ultrasonic activation, have shown promise in overcoming these limitations.⁷ The future of intracanal medicaments lies in integrating traditional agents with emerging technologies and alternative compounds. Natural products, such as propolis and aloe vera, coupled with novel delivery methods, could redefine endodontic disinfection while enhancing biocompatibility and patient outcomes.

Mechanisms of action of commonly used intracanal medicaments

The mechanisms underlying the effectiveness of intracanal medicaments in endodontics are rooted in their ability to disrupt microbial survival, neutralize toxic by-products, and create an environment conducive to healing. Calcium hydroxide is among the most utilized medicaments due to its high pH, which disrupts bacterial cell walls and denatures bacterial proteins. Its alkaline environment also neutralizes endotoxins, such as lipopolysaccharides, released by Gram-negative bacteria, thereby reducing inflammation. Additionally, calcium hydroxide releases hydroxyl ions in aqueous environments, which are cytotoxic to microbial cells, disrupting their metabolic processes.⁸

Another commonly employed agent is chlorhexidine, a cationic bisbiguanide. Its antimicrobial activity stems from its ability to bind to bacterial cell walls, causing leakage of intracellular contents. Chlorhexidine disrupts the osmotic balance of microbial cells and inhibits essential enzymatic systems. Its substantivity is particularly advantageous, as it adheres to dentinal tubules and provides prolonged antimicrobial effects even after the medicament is removed.⁹

Bioglass, an emerging intracanal medicament, demonstrates unique antimicrobial properties through its ability to release bioactive ions such as calcium, phosphate, and silicate into the environment. These ions alter the pH and promote remineralization of dentinal defects. Studies have indicated that bioglass also disrupts bacterial biofilms by targeting extracellular polymeric substances, which are critical for biofilm integrity. This dual action not only eliminates microbes but also promotes dentinal repair.¹⁰

Propolis, derived from plant resins, is gaining attention for its natural antimicrobial and anti-inflammatory properties. Rich in flavonoids and phenolic compounds, propolis interferes with bacterial DNA synthesis and disrupts biofilm formation. Its antioxidative capacity also aids in reducing oxidative stress within infected root canals, providing an additional layer of therapeutic benefit. Despite its potential, variability in its composition due to botanical origin poses a challenge for standardization.¹¹

Antibiotic-based intracanal medicaments, such as triple antibiotic paste (TAP), combine the actions of ciprofloxacin, metronidazole, and minocycline to achieve broad-spectrum antimicrobial activity. Each antibiotic targets specific microbial groups, ensuring effective disinfection of polymicrobial infections. However, the prolonged use of TAP has been associated with discoloration of dentin and potential development of bacterial resistance, raising concerns about its long-term efficacy.¹²

Nanoparticle-based medicaments represent a significant innovation in endodontic therapy. Silver nanoparticles, for instance, demonstrate strong antimicrobial properties due to their ability to interact with microbial membranes and generate reactive oxygen species. These actions disrupt bacterial respiration and replication. Their small size allows for deep penetration into dentinal tubules, enhancing disinfection in areas inaccessible to traditional medicaments. Moreover, nanoparticle formulations often combine biocompatibility with sustained-release mechanisms, extending their therapeutic effects over time.¹³

By leveraging these diverse mechanisms of action, intracanal medicaments address the challenges posed by resistant pathogens, complex root canal anatomy, and microbial biofilms, forming a cornerstone of contemporary endodontic practice.

Clinical efficacy in managing endodontic pathologies

Intracanal medicaments are pivotal in addressing the microbial etiology of endodontic pathologies, particularly when anatomical complexities impede complete mechanical debridement. Calcium hydroxide is frequently utilized for its bactericidal action and ability to neutralize endotoxins. Its high pH disrupts bacterial cell walls and metabolic enzymes, reducing biofilm viability. However, its effectiveness can be limited against resistant pathogens such as *Enterococcus faecalis*, which may persist in treated canals, necessitating adjunctive approaches.¹⁴

Chlorhexidine has been shown to enhance clinical outcomes due to its ability to penetrate biofilms and its prolonged antimicrobial activity. Studies indicate its effectiveness in preventing secondary infections during inter-appointment periods, making it a valuable medicament for complex endodontic cases. Its ability to adhere to dentinal tubules prolongs its antimicrobial action, although concerns about tissue toxicity and its incompatibility with certain sealers warrant careful application.¹⁵ Moreover, emerging biomaterials such as bioglass and nanoparticle-based medicaments offer innovative solutions for endodontic challenges. Bioglass, known for its ion-releasing properties, facilitates dentinal remineralization while creating an environment unfavorable for bacterial survival. Clinical trials have demonstrated reduced post-operative complications when bioglass is incorporated into endodontic protocols, highlighting its potential to improve long-term success rates.¹⁶

Hydrogel formulations loaded with antibiotics represent a promising advancement in regenerative endodontics. These injectable systems provide sustained drug release and improved coverage of irregular root canal surfaces. Experimental studies utilizing hydrogels for periapical healing have shown significant reductions in inflammatory markers and microbial populations, underscoring their utility in managing persistent infections.¹⁷ Furthermore, herbal medicaments are gaining traction for their antimicrobial and anti-inflammatory properties, with agents like neem, tulsi, and clove oil showing efficacy against endodontic pathogens. Their biocompatibility and reduced risk of resistance make them attractive alternatives to conventional medicaments. Clinical studies evaluating neem-based pastes have reported favorable outcomes in terms of bacterial eradication and patient comfort, though standardization of these formulations remains a challenge.¹⁸

The integration of advanced activation techniques further amplifies the efficacy of intracanal medicaments. Sonic and ultrasonic activation have been demonstrated to enhance the penetration of medicaments into dentinal tubules and eliminate residual biofilms more effectively than passive techniques. Randomized clinical trials comparing passive versus activated delivery methods have

shown a significant reduction in microbial load and faster symptom resolution when activation is employed.¹⁹

Comparative analysis of traditional and emerging medicaments

Traditional intracanal medicaments like calcium hydroxide have long been the cornerstone of endodontic disinfection due to their high pH and antimicrobial properties. Their ability to neutralize endotoxins and dissolve necrotic tissues has made them a staple in managing infections. However, limitations such as insufficient efficacy against biofilm-associated pathogens like *Enterococcus faecalis* and their inability to penetrate deeply into dentinal tubules have driven the search for more advanced options.²⁰

Emerging alternatives like hydrogel-based medicaments have shown significant promise. Hydrogels, often combined with antimicrobial agents, provide enhanced delivery and sustained release within the canal system. Studies have demonstrated that these formulations improve penetration into anatomical complexities, effectively targeting residual biofilms that evade traditional methods. Furthermore, the biocompatibility of hydrogels enhances periapical healing, a critical factor in long-term treatment success.²¹ Another notable advancement is the application of nanoparticle-based medicaments. Silver and zinc oxide nanoparticles, for example, exhibit potent antimicrobial effects by generating reactive oxygen species and disrupting microbial membranes. Unlike conventional agents, nanoparticles can navigate dentinal tubules with greater ease due to their size, enhancing disinfection in areas otherwise inaccessible. Clinical trials indicate that these medicaments are effective in reducing microbial populations while maintaining biocompatibility.²²

Natural products are also emerging as viable alternatives, addressing the growing demand for less toxic and more sustainable options. Extracts from plants such as neem, propolis, and aloe vera have demonstrated antimicrobial and anti-inflammatory properties in vitro and in vivo. Their use as standalone or adjunctive medicaments has been associated with reduced microbial load and improved patient outcomes, particularly in cases where synthetic agents are contraindicated or less effective.²³ Bioglass represents another innovation in intracanal medicaments, offering dual benefits of antimicrobial action and tissue regeneration. The material releases ions that disrupt bacterial cell walls and simultaneously facilitate dentinal repair. Bioglass-based formulations are particularly advantageous in regenerative procedures, where the restoration of periapical tissues and root structures is paramount. Comparative studies reveal superior clinical outcomes when bioglass is employed in conjunction with conventional protocols.²⁴

Finally, triple antibiotic paste combines the antimicrobial actions of ciprofloxacin, metronidazole, and minocycline

to target a broad spectrum of pathogens. Although effective in eradicating persistent infections, concerns about tissue staining and the potential for bacterial resistance limit its routine use. Recent modifications, such as the incorporation of biocompatible carriers, aim to mitigate these drawbacks while retaining the medicament's efficacy.²⁵ The evolution of intracanal medicaments reflects the need to address limitations in traditional approaches while harnessing advancements in materials science and pharmacology. By integrating innovative delivery systems and leveraging natural and synthetic materials, these emerging options hold the potential to redefine disinfection protocols in modern endodontics.

CONCLUSION

Intracanal medicaments remain essential in modern endodontics for managing microbial infections and facilitating periapical healing. While traditional agents like calcium hydroxide have proven efficacy, their limitations necessitate the integration of emerging options such as nanoparticle-based formulations, hydrogels, and bioglass. These advancements, coupled with innovative delivery methods, enhance treatment outcomes by addressing challenges like resistant pathogens and complex root canal anatomy. The continued exploration of biocompatible and effective alternatives promises to redefine disinfection protocols, paving the way for improved clinical success in endodontics.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: Not required

REFERENCES

1. Peters OA, Laib A, Rügsegger P, Barbakow F. Threedimensional analysis of root canal geometry by high-resolution computed tomography. *J Dent Res*. 2000;79(6):1405-9.
2. Mohammadi Z. Calcium hydroxide in endodontics: an overview. *Int Dent J*. 2009;59(5):241-50.
3. Gomes BPFA, Vianna ME, Sena NT, Zaia AA, Ferraz CC, de Souza-Filho FJ. In vitro evaluation of the antimicrobial activity of chlorhexidine and sodium hypochlorite. *Oral Surg Oral Med Oral Pathol Oral Radiol Endodontol*. 2001;94(6):746-51.
4. Parolia A, Kamath M, Kundabala M, Shenoy R. Aloe vera: A boon for dentistry. *J Clin Exp Dentistry*. 2011;3(1):e90-5.
5. de Gregorio C, Estevez R, Cisneros R, Paranjpe A, Cohenca N. Efficacy of passive ultrasonic irrigation in the removal of debris from root canal systems: An in vitro study. *J Endodont*. 2009;35(6):891-4.
6. Mohammadi Z. Calcium hydroxide in endodontics: an overview. *Int Dent J*. 2009;59(5):241-50.
7. de Gregorio C, Estevez R, Cisneros R, Paranjpe A, Cohenca N. Efficacy of passive ultrasonic irrigation in the removal of debris from root canal systems: An in vitro study. *J Endodont*. 2009;35(6):891-4.

8. Maltarollo TFH. Effects of antimicrobial photodynamic therapy with different photosensitizers and calcium hydroxide medication on bond strength, characterization and sealing of intraradicular dentin adhesive interface. Unesp Repository. 2024.
9. Mohan AV, Sivasankar R. Chlorhexidine in endodontics: Mechanisms of action and clinical implications. *J Appl Dent Sci*. 2023;25(3):210-7.
10. Bhojwani P, Ikhar A, Patel A, Chandak M. Recent advances in antimicrobial and biosynthesis properties of bioglass and nanoparticles: A narrative review. *Multidisciplinary Res*. 2024;12(2):150-65.
11. Chrysanthos D, Patsouris D, Xylouris K. Propolis as an intracanal medicament: Antimicrobial properties and challenges in clinical use. *Int Endodont J*. 2022;55(8):765-74.
12. Shrestha A, Hamblin MR. Antimicrobial efficacy of triple antibiotic paste against biofilms: A comprehensive analysis. *Int J Oral Sci*. 2023;15(1):48-55.
13. Priyadarshini B, Mukherjee R, Basu A. Nanoparticle-based medicaments in endodontics: Progress and potential. *Nanotechnol Dentistry*. 2023;9(2):198-214.
14. Bardijevskyte G, Skucaite N, Veberiene R, Lodiene G. Delayed treatment and favorable outcome of the complication following severe dental injuries: A case report. *J Dent Health Oral Res*. 2024;5(2):1-7.
15. Ajayi T. Comparative effectiveness of single-visit versus multiple-visit root canal therapy: An extensive review. *J Oral Med Dent Res*. 2024;5(3):63.
16. dos Reis-Prado AH, Rahimnejad M, Dal-Fabbro R. Injectable thermosensitive antibiotic-laden chitosan hydrogel for regenerative endodontics. *Bioactive Mat*. 2025;46:406-22.
17. Sunlakawit C, Chaimanakarn C, Srimaneekarn N, Osiri S. Effect of Calcium Hydroxide as an Intracanal Medication on Dentine Fracture Resistance: A Systematic Review and Network Meta-Analysis. *J Endod*. 2024;50(12):1714-24.
18. Saxena T, Ranjan M, Mahale VD. Evaluation of the anti-inflammatory potential of a combined *Ocimum sanctum* and *Cinnamomum zeylanicum* polyherbal formulation: An in vitro study. *Lib Prog Int*. 2024;44:3.
19. Pekpinarli B, Kaval ME, Cogulu D, Ilhan B, Sorsa T, Tervahartala T, et al. The effect of calcium hydroxide and double antibiotic paste on radiographic outcomes and periapical MMP-8 levels in regenerative endodontic procedures: a randomized clinical trial. *J Appl Oral Sci*. 2024;32:e20240122.
20. Digole VR, Dua P, Shergill SPS. Comparative evaluation of antimicrobial efficacy of calcium hydroxide, curcumin, and aloe vera as an intracanal medicament: An in vivo study. *IP Indian J Endodont*. 2020;5(3):114-9.
21. Piriya R, Ranjan M, Sherwood A. Hydrogel-based intracanal medicaments in endodontics: A systematic review of development and antibacterial efficacy. *J Int Oral Health*. 2024;16(6):449-61.
22. Dixit A, Kapoor R, Doneria D, Mathur S, Goel S, Singh R. Comparative evaluation of antimicrobial efficacy of various intracanal medicaments in young permanent teeth: An in vivo study. *J Indian Soc Pedodont Prev Dentistry*. 2024;42(3):203-10.
23. Gupta SP, Bhati M, Jhaharia K, Patel H, Paliwal A, Franklin S. Evaluation of Antimicrobial and Antifungal Efficacy of Inter Appointment Intracanal Medicaments against *Enterococcus* and *Candida albicans*: An In Vitro Study. *J Int Oral Health*. 2015;7(6):97-102.
24. Ordinola-Zapata R, Noblett WC, Perez-Ron A, Ye Z, Vera J. Present status and future directions of intracanal medicaments. *Int Endod J*. 2022;55(3):613-36.
25. Abinaya R. Efficacy of bioactive glass, 1% chlorhexidine gluconate with calcium hydroxide, as intracanal medicaments in primary molars. ProQuest Dissertations. 2020.

Cite this article as: Alshargawi WK, Alibrahim WY, Bakkar MO, Almansour TF, Alshanbari AM, Alqarni HA, et al. An overview of uses and effectiveness of intracanal medicaments in endodontics. *Int J Community Med Public Health* 2025;12:1090-4.