- Oral Presentation 1

TITLE: Performance on dental extraction in patients treated with new oral anticoagulants: as a result of a case report

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Introduction: The patients treated with oral anticoagulants have major risk of bleed if they have to go through surgery or any invasive procedure like a dental extraction. Recently new oral anticoagulants have appeared on the market: Dabigatran (Pradaxa®), Apixaban (Eliquis®) y Rivaroxaban (Xarelto®).

These drugs are prescribed to patients with bad control of INR or with allergy or intolerance to the coumarins/4-hydroxycoumarins anticoagulants. They do not depend on the vitamin K so the monitoring with INR is not useful.

Case report: Lady of 80 years old that comes to the Basic Health Zone in order to fulfill three dental extractions. The patient undergoes treatment with Dabigatran and therefore we contact the cardiologist in order to reach an understanding on the performance protocol: the treatment is removed for 48 hours and the dental extractions are completed without mishaps.

Conclusions: The new oral anticoagulants are more predictable, they have less interaction with drugs and food. The disadvantage is that we are not able to quantify the anticoagulation level of the patient. Also there is no antidote.

The performance protocol on the new anticoagulants depends on the average life thereof and on the renal function of the patient. It is recommended the removal of the drug between 1 and 4 days before the procedure.

- Oral Presentation 2

TITLE: Rehabilitation treatment in patient with associated Pathology: Case report

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Diabetes mellitus DM, is a metabolic disorder characterized by the increase of blood glucose levels. For a long time considered a contraindication in patients with poor metabolic control and rehabilitation with implants. The DM type II has a multifactorial origin that result from environmental effects, individual genetic predisposition, is related to age, obesity and sedentary lifestyle. It is sometimes associated with dento-periodontal pathology, and this in turn may cause poor metabolic control of it.

Case presentation: A 73-year-old female with a history of type II diabetes, arrhythmia, hypertension, vertigo and hypercholesterolemia, controlled with Micardis Plus®, Seguril digoxin®, Humalog®, Serc®, Omeprazole. Does not report known allergies or toxic habits. The patient comes to the Master of dentistry in oncology and immunocompromised patients from the University of Barcelona for oral rehabilitation. Clinical examination shows generalized periodontal disease, mandibular partial edentulism and defective old restorations. It decides to carry out rehabilitation treatment, which included, periodontal treatment of mouth parts, extractions, dentures fixed upper and lower implant supported overdenture.

Conclusion: The diabetic patient well compensated and with all intraoral local factors controlled, is a tributary of a conventional rehabilitation treatment.

- Oral Presentation 3

TITLE: Oral pathology related to the use of dental prosthesis

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Aim: Analyze the most common oral lesions in elderly people, with the aim to identify those risk factors and try to establish preventive methods and improve the oral health situation in this kind of population.

Materials and Methods: An exhaustive review of the last 10 years articles was done from the Pubmed and Medline data base. Keywords: Oral lesions; oral hygiene; Denture lesions; prosthesis pathology, Prosthesis candida, Elderly oral lesions.

Results: Prosthesis patients present a higher oral lesions prevalence. If those prosthesis are in poor conditions and also poor hygiene this risk increases. Trauma

lesions and candida infection are the most common pathologies in elderly people and with a very prolonged use of their prosthesis.

Conclusions: It is necessary to do oral checks to elderly people, because are the ones with a higher prevalence of oral diseases. Just with this periodic checks we could manage to detect those lesions and treat them prematurely with better results and also avoid their establishment, specially the ones associated to a bad care and hygiene of the prosthesis improving the quality of their lifes.

- Oral Presentation 4

TITLE: Analysis of volatile sulphur compounds in healthy individuals and those with periodontal disease

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Objective: The primary aim is to compare the levels of volatile sulphur compounds (VSC) and organoleptic measurement in healthy individuals and those with periodontal disease. The supporting aim is to assess the ratio of concordance between both diagnostic tests.

Methods: a cross-sectional study was carried out on 40 subjects in the dental faculty in Santiago de Compostela, adhering the inclusion and exclusion criteria. Clinical parameters, organoleptic test and VSC concentration with Oral Chroma™ model CHM -1 were recorded. Two groups were observed according to the records taken: patients with and without periodontal disease. VSC levels and organoleptic test were compared, and the ratio of agreement between the two diagnostic tests.

Results: Differences were found between healthy subjects and subjects with periodontal disease in hydrogen sulfide 10.56 ± 9.42 mm / 10ml, methyl mercaptan 4.43 ± 6.59 mm / 10ml with statistically significant relation ($P < 0.05$). Of 14 subjects with periodontal disease, 13 had tested positive of halitosis. We found a ratio of concordance of 67% between the two diagnostic tests.

Conclusions: Patients with periodontal disease have greater concentrations of VSC and higher ratio of organoleptic perception than healthy subjects. Moderate relation was found between both diagnostic tests.

- Oral Presentation 5

TITLE: Surface electromyography findings after lower third molar surgery

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Objective: To analyze the functioning of jaw closing muscles by means of surface electromyography study, after lower third molar surgery.

Materials and Methods: This prospective and longitudinal study included 31 patients. All patients underwent three clinical and electromyograph examinations, the first before surgery, the second 72 hours after surgery and the third 7 days after surgery. Clinical parameters analyzed were pain, inflammation and trismus. Surface electromyography was performed with surface electrodes on the temporalis and masseter muscles on both sides of the jaw, the patient performing voluntary mastication maximum opening and maximum clenching.

Results: It was made clear that pain intensity peaked on the day of surgery, while inflammation and trismus reached maximum at 72 hours after surgery. Electromyography values predominated in temporalis muscles over masseter muscles.

Conclusions: Mastication muscles undergo a reduction in activity after lower third molar extraction.

- Oral Presentation 6

TITLE: Oral risk factors in the development of aspiration pneumonia in institutionalized patients

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Background and aims: Aspiration pneumonia is one of the main endemic infections in nursing homes and elderly institutions (NHAP). The plaque built up and