mary action response errors related to the means of preserving avulsed teeth, usually opting for transporting teeth “dry”. The 86.4% of teachers were interested in receiving specific training guidelines for action in responding to CTDIs.

Conclusions: The knowledge of teachers on the first action measure to respond to a CTDI turned out to be significantly low. This is especially worrisome since many of the CTDIs occur in schools and increases the need to include CTDI content in teacher training programs.

- Oral Presentation 49

TITLE: Densitometric techniques in dental implantology: current status

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Objective: Bone density is one of the most important factors of osseointegration, therefore we need techniques to value it. The aim of this study was to compare the different densitometry techniques used in Implantology (Radiology, DXA, TC, CB-CT, MRI and QUS), evaluating the advantages and disadvantages of each one.

Material and Methods: We have done a bibliographic review from the database of Pubmed about 179 articles concerning to densitometric techniques: Radiology, DXA (Double X-Ray Absorptiometry), CT (Computed Tomography), CB-CT (Computed Tomography Cone Beam), MRI (Magnetic Resonance Imaging) and QUS (Quantitative Ultrasound).

Results: With QCT we get a density valued in Hounsfield units (HU) according to the degrees of attenuation of the R-X. With the CB-CT we obtain also gray levels (UH), but they are superior to those obtained with CT. DXA provides a mineral density of surface (BMD or BMD) expressed in mg Ha/cm². Radiology and visual and tactile scales (Lekholm-Zarb and Misch) are little accurate to assess bone density, providing an empirical and subjective estimate. The application of MRI and QUS in densitometry remains, for now, experimental.

Conclusions

- 1- CT is the most accurate densitometric technique.
- 2- CB-CT provides inaccurate and arbitrary UH, so we need attenuation coefficients.
- 3- DXA is difficult to apply in the maxillofacial area due to the overlapping of regions.

- Oral Presentation 50

TITLE: Biphosphonates applied locally as coating of titanium implants

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Objective: Biphosphonates are drugs used in treatment of osteoporosis and other diseases. They inhibit osteoclastic activity so they arrest the bone remodeling process. The high cell turnover rate presented in maxilar and mandibular bone during surgical procedures, makes them more vulnerable to biphosphonate-related osteonecrosis. This vulnerability is more pronounced in intravenous in comparison with oral biphosphonates. In recent years it has been studied the hypothesis that these drugs may improve the osseointegration of dental implants being applied locally by coating them.

Material and Methods: A review of published scientific literature on the effects on the osseointegration of local application of bisphosphonate coated titanium implants and the appearance or not of biphosphonate-related osteonecrosis as we see with systemic bisphosphonates. Most of the studies are based on research on animals, mainly rodents and sheep, but also have revised articles on human.

Results: The vast majority of the literature revised present an improved osseointegration of implants with bisphosphonates coating versus different groups of control. This improvement is registered with different parameters depending on the study, but the most usual parameters used are extraction torque and histomorphometric measurements in micro-ct: bone-implant contact, bone area around the implant and bone density.

Conclusions: The revised articles show an improvement of osseointegration, without relevant complications such as biphosphonate-related osteonecrosis in titanium implants coated by biphosphonates.

- Oral Presentation 51

TITLE: Periodontal plastic surgery procedures. Case report

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Introduction: The goal of the periodontal mucogingival surgery is to correct the morphology, position or defects of the gum tissue. This is done through plastic and surgical procedures, where the area of the inserted gum is widened and keratinized and/or the exposed roots are covered. The mucogingival surgery can be isolated or in conjunction with the flap surgeries.

Case report:

We have a 68 year old female patient, with mucogingival surgery. She has controlled hypertension and is in consult for aesthetic reasons. She presents gingival hypertrophy in the anterior maxillary zone. A gingivoplasty technique was done resulting in a cosmetic improvement in just one session with a mucogingival surgical procedure.

Conclusion:

Due to patient requirements of shorter and more aesthetic treatments, mucogingival surgeries are presented as an alternative treatment designed to correct defects in the morphology, position and dimension of the gum, therefore finding an aesthetic vision of soft tissue.

- Oral Presentation 52

TITLE: Treatment in consulting room and oral effects of most frequent system pathology in elderly patients

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Aim: To carry out a cross-sectional descriptive study of the most common systemic disease in the elderly. Then proceed to form a small guide with an updated intervention protocol associated with these pathologies, in conformity with dental procedures and finding the most common oral manifestations

Methods: Search in the SNS, IMSERSO, a sample of 6000 patients from San Rafael Hospital and La Paz Carlos III-Cantoblanco Hospital and a sample of 100 patients from Universidad Europea de Madrid's polyclinic, more common systemic diseases in patients over 65 years. Then proceed to an exhaustive search in medical literature, journals, etc... about the protocol that should lead the dentist with these patients, associated oral pa-

thology, emphasizing on its location in the oral cavity and possible systemic manifestations.

Results: The most common associated systemic diseases in patients over 65 were related to cardiovascular, and respiratory systems. Particularly highlight hypertension and its derivative pathology.

Conclusions: The dentist must know the pathologies present in elderly patients who come to attend the consult and therefore know the protocol for a possible emergency or habitual treatment; from the position on the dental chair, to medical prescriptions.

- Oral Presentation 53

TITLE: The impact of dental treatments on blood pressure variability in geriatric patients

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Objectives: To evaluate blood pressure fluctuations before, during, and after dental treatment in geriatric patients (general population) and geriatric patients with hypertension and antihypertensive drugs.

To describe side effects of antihypertensive drugs in the oral cavity.

Material and Methods: Prospective observational study, comparing:

- General population (without antihypertensive treatment). n: 20.

- Hypertensive population (high blood pressure and antihypertensive treatment). n: 20.

Results: No significant differences in fluctuation of PAS, for a period of time (before, during and after dental treatments), in hypertensive patients with antihypertensive treatment, (p-value: 0,5680), and in patients without hypertension (p-value: 0,4524). No significant differences between the two groups of population (p= 0,2605). Statistically significant differences were observed, in the fluctuation of PAD, for a period of time (before, during and after dental treatments). There was an increase in PAD over time, statistically significant in the two populations (p=0.0011), in the group of patients without hypertension was significantly elevated the PAD over time (p-value = 0.0001). In hypertensive patients with antihypertensive drugs, was not observed statistically significant elevation (p-value: 0.1710).

Conclusions: The dental treatments in normotensive/hypertensive geriatric patients treated with antihyper-