* doi:10.4317/medoral.17643949
http://dx.doi.org/10.4317/medoral.17643949

Aims: To analyze and compare the “Educational Climate” (EC) of medical and dental students from the University of Santiago de Compostela (USC), using the DREEM questionnaire (“Dundee Ready Education Environment Measure”).

Material and Methods: The study group consisted of 671 medical students and 110 dental students, who responded to the DREEM questionnaire during the 2014-2015 academic year. This questionnaire has 50 items that are grouped into 5 domains: “Learning”, “Teachers”, “Academic”, “Atmosphere” and “Social”. Taking into account the maximum scores for the different domains and for EC, the data are converted into percentages of the global scale or of their respective subscale. Broadly, a higher score means a perception that is more positive than negative in relation to the educational aspect being examined.

Results: The EC score in Medicine and Dentistry were 110,7 (55.0%) and 116,5 (58.2%) respectively. The scores obtained in both careers in the different domains were: 47.3% and 52.5% in “Learning”, 51.6% and 55.9% in “Teachers”, 60.2% and 61.9% in “Academic”, 56.2% and 60.2% in “Atmosphere” and 59.1% and 62.5% in “Social”. In 17 (34%) and 12 items (24%) respectively, an average <2 was detected.

Conclusions: USC students felt that their EC was more positive than negative, because the different domains were considered “positive and acceptable”. Although the perception of the EC in Dentistry was significantly better, in both university degrees the students identified a considerable number of problematic educational aspects.

- Oral Presentation 60

TITLE: The use of the CBCT in the geriatric patient to control large apical lesions. Apropos of a case

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SOURCE: Med Oral Patol Oral Cir Bucal. 2015 June 1;20(Supplement1):S24.

* doi:10.4317/medoral.17643950
http://dx.doi.org/10.4317/medoral.17643950

Introduction: Geriatric patients have a healing and bone regeneration lower than young patients. The use of CBCT technology allows us to test the healing process in these patients with a low dose of radiation.

Case Report: 69 year old male patient referred to our

office for endodontic teeth 11 and 13 and later perform a surgery at the apical region of a 12 chronic apical periodontitis and presented no previous endodontic treatment.

After talking with the patient and the dentist who referred, we decided to perform endodontic treatment in order to try to reduce the size of the apical lesion because we supposed an endodontic origin of the injury (was more than 2 cm) and affected maxillary sinus, nasal cavity with bone destruction.

After performing a root canal using ProTaper and obtured with Thermafil, radiographs and CBCT system control is performed annually, 2.3 4 and 6 below.

Conclusions: The lesion was reduced almost entirely, although healing has been slow due in part to the patient's age. The CBCT is an excellent method to evaluate and control the size reduction in this type of apical lesions.

- Oral Presentation 61

TITLE: Oral health and quality of life at the senior citizen's social clubs for people aged 65 and over in Valencia. Preliminary study

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SOURCE: Med Oral Patol Oral Cir Bucal. 2015 June 1;20(Supplement1):S24.

* doi:10.4317/medoral.17643951
http://dx.doi.org/10.4317/medoral.17643951

Aim: The aim of this survey was to investigate if there is a relationship between the oral health status and the oral and general health related quality of life of elderly people aged 65 years or more in Valencia, Spain, through a preliminary study.

Methods: We designed a cross-sectional oral health survey plus an oral examination in an elderly population. Subjects: 48 adults (22 men and 26 women). Age: 65 years of age and over. Setting: Randomly selected senior citizen's social clubs. We assessed the Oral Health Impact Profile (OHIP-14) and a general health-related quality of life instrument: the EuroQol-5d with a visual analogue scale (VAS). We also inquired sociodemographic and oral health questions.

Results: The mean additive score of the OHIP-14 was 10.48, the mean value of the EuroQol-5d was 0.56 and of the VAS, 70.33. We found no relationship between Euro-QoL5D and OHIP-14. Neither there were relation between these instruments and variables as decayed teeth or absences. On the other hand the OHIP-14 was consistently and significantly correlated with the oral