- Oral Presentation 29

TITLE: Relationship between chronic apical periodontitis (CAP) and systemic disease. Review

AUTHORS: Martínez Gascón L, González Navarro B, Segura Egea JJ, Estrugo Devesa A, López López J, Jané Salas E.

Máster de Medicina, Cirugía e Implantología Oral, Facultad de Odontología, Universidad de Barcelona.

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Introduction: Recently, the study of the relationship between dentistry and medicine has increased. The oral pathology most associated with systemic disease is periodontal disease and chronic apical periodontitis. Nowadays, it is interesting to analyze possible associations between them.

Aim: To present an update on the relationship between chronic apical periodontitis and certain systemic diseases.

Material and Methods: A literature research was performed in PubMed database over the last 10 years with the keywords “chronic apical periodontitis”, “apical periodontitis”, “systemic pathology”, “diabetes”, “osteoporosis”, “metabolic syndrome”; to associate them with the chronic apical periodontitis. Clinical trials, Systematic reviews, reviews and metanalysis were selected. English and Spanish articles with human population were included.

Results: We found 12 items related to systemic disease, 44 with diabetes, 10 with osteoporosis and 1 with metabolic syndrome. Repeated papers were removed. Others were removed because of not being related with the topic or because of being conducted in animals. Finally, we got a total of 16 items, and included other items of interest by manual searching.

Conclusions: Many studies have attempted to associate chronic apical periodontitis (CAP) as a risk factor of systemic diseases such as diabetes mellitus, osteoporosis, metabolic syndrome, renal diseases and neurodegenerative diseases like Alzheimer's; because they share microbiological and inflammatory similarities.

- Oral Presentation 30

TITLE: Designing a comprehensive oral health care program for the treatment of pre-dementia phase Alzheimer's disease

AUTHORS: Vela Casasempere MI, Navalón Codina F, Mareque Bueno J, Giner Tarrida LL.

Departamento de Medicina Oral y Salud Pública Oral. Universidad Internacional de Cataluña.

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Aims:

- Develop a model of comprehensive dental care for people with mild cognitive impairment (MCI) and pre-dementia diagnosed with Alzheimer's disease. (pdAD).
- Include training in conscious sedation (SC) in dentistry's studies 5th.

Material and Methods

- Bibliography search with the following keywords: mild cognitive impairment, Alzheimer Disease (AD), diagnosis, oral health, conscious sedation, nitrous oxide, dental education, dental care, elderly. Review of articles published in journals indexed in the Web of Science.
- Surveys addressed to 5th dental students and teaching staff.

Results: At present, there is no treatment to heal neurodegenerative diseases (EN); so much of the research focuses on risk factors that may influence its development and progression, many of them related to oral health and food.

The low level of knowledge in CS techniques, contrasts with the high interest in them and degree inclusion perceived need in teaching degree programs.

Conclusions: Preventive care and early intervention can slow the progression of AD in its early stages. The elimination of oral pathology could contribute.

The implementation of training in CS could give our students a safe and effective to overcome the great challenges that lie their professional future tool: maintain oral health in a population that, as you get older, increases the conservation of its teething naturally as they do the END.

- Oral Presentation 31

TITLE: Case report: oral lichen planus associated with Good's Syndrome

AUTHORS: Canaro Borriá M, Arranz Obispo C, Jané Salas E, Estrugo Devesa A, Ochoa García P, López López J.

Máster de Medicina, Cirugía e Implantología Oral, Facultad de Odontología, Universidad de Barcelona.

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Introduction: Good's syndrome (GS), first described by Dr. Robert Good in 1954, is the combination of thymoma and immunodeficiency. A typical characteristic

of GS is the recurrence of infections, specially pulmonar infections and bronchiectasis. Another frequent complication is chronic diahrrea associated to malabsorption.

Case report:

A 64 year old male with thymoma history was referred to the HOUB by the Catalan Health Institut. The patient had undergone surgery to remove the tumor several years ago and has been in treatment ever since. He presented several oral lesions compatible with oral lichen planus in both buccal mucosae and the lateral portion of the tongue. He referred general discomfort of the mouth, including intense burning sensations in the mucosa. Due to the clinical presentation and after the physical exploration, we prescribed a formula with triamcinolone acid during one week. We also asked for a recent analytic checkup and took pictures of all the lesions, and told him to come visit us for a follow-up and biopsies if needed. In the second visit there was a discreet improvement, the analysis were correct and we performed an incisional biopsy of an oral lesion. The histopatological result indicated it was "compatible with oral lichen planus".

Conclusion: In the available literature they say there is a higher risk of autoimmune lesions in GS patients, oral lichen planus is one of them. However, there is not a clear association between the two conditions. We need more studies to clarify if there is a connection between oral lichen planus and Good's syndrome.

- Oral Presentation 32

TITLE: "Graft: current and future"

AUTHORS: Frau Sancho S, Espadas Domínguez M, De Clemente-Rodríguez de Rivera E, Izquierdo Gómez K, Marí Roig A, López López J.

Máster Medicina, Cirugía e Implantología Oral, Universidad de Barcelona.

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Objectives: To evaluate the clinical efficacy and predictability of grafts for reconstruction of the maxillary and mandibular horizontal and vertical defects obtained in regenerative therapies and know the properties, advantages and disadvantages offered by different alternatives for a correct choice during planning treatment.

Materials and Methods: A search was conducted in the databases PubMed, MedLine and Cochrane using the keywords: "Bone grafts", "Allograft", "Xenograft", "autograft", "Alloplastic grafts". indexed relevant publications between 2010 and 2015 in English and with results in human clinical trials were included.

Results: We obtained a total of 179 items. 13 literature reviews that make the greatest impact on the treatment of bone loss are selected.

Conclusions: Several authors agree that autologous bone graft is the ideal, despite the requirement of a donor area. Other grafts offer similar advantages and results, providing a predictable alternative. More detailed studies are needed, with more patients and longer follow-up to develop specific protocols.

- Oral Presentation 33

TITLE: Mandibular overdentures in geriatric edentulous patients with diabetes. A case-control study

AUTHORS: Suero González S, Bish González MJ, González García C, España López A, Moreno Muñoz J, Velasco Ortega E.

Máster de Implantología Oral. Facultad de Odontología. Universidad de Sevilla.

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Introduction and Objectives: Today, implant dentistry constitute a therapeutic modality in the prosthodontic treatment of totally edentulous patients. This study reports the comparative evaluation of treatment with overdentures in the mandible in edentulous older patients with and without diabetes.

Material and Methods: 48 edentulous patients, 24 diabetic patients type 2 and 24 healthy patients, were treated with 96 Galimplant® sand-blasted and acid-etched surface implants for prosthodontic rehabilitation with overdentures in the mandible. Two implants were inserted in each patient. Implants were loaded after a healing free-loading period between 6 weeks with locator attaches. Clinical findings (implants and prosthodontics) were followed during at least 60 months.

Results: 48 overdentures were realized over two implants. One implant was lost during the healing period in each group. Clinical results indicate a survival and success rate of implants of 97.9% after a mean follow-up of 74.4 months. Technical complications were related with plastic components of attaches and reported in 5 implants, one in diabetic patients (2.1%) and four (8.3%) in healthy patients. Mean marginal bone loss was 0.408 mm in diabetic patients 0.400 mm in healthy patients.

Conclusions: Clinical results of this study indicate that there are not differences in prosthodontic rehabilitation in the mandible of edentulous diabetic patients compared with healthy patients.