rate with increasing life expectancy and the need to treat the tooth loss in this group of patients. Type 2 diabetes mellitus may be a risk factor for the treatment with dental implants. It is important to assess the characteristics of the host considering disorders that can produce the disease in the patient affect the osseointegration of the implant. Some studies demonstrate that there are no significant differences between the older patients with or without diabetes II, and can observed a slower growth in osteoblasts but morphology and similar characteristics in diabetic patients, without the need to modify the surface of implants to improve implant stability. In fact, is possible to treat this large group of patients in clinic with a high rate of success and a high predictability.

- Poster 16

TITLE: ¿Is it enough to treat edentulism for improving the nutritional status of older adults?

AUTHORS: Rondón Romero JL, Pérez González ME, Ordoñez Sousa B, Moreno Muñoz J, Núñez Márquez E, Velasco Ortega E.

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

SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S19.

* doi:10.4317/medoral.17644092

<http://dx.doi.org/10.4317/medoral.17644092>

Aging is a natural and complex process involving cellular, physiological and psychological changes that may affect or be affected by the nutritional status of the individual. Edentulism is the most common cause of masticatory deficiency. People with impaired masticatory function can not cope with adequate food, leading to a gradual deterioration of their eating habits. Knowing how to detect inadequate nutritional status competence of the dentist in order to refer the patient to a specialist in nutrition or dietetics. The oral rehabilitation of edentulous older adults improves chewing ability and expands its narrow spectrum of food choices, but to improve their nutritional status is necessary advice from professionals nutrition and dietetics.

- Poster 17

TITLE: Success of short dental implants supporting overdentures in atrophic jaws in geriatric patients

AUTHORS: Rubio Urbano A, Suero González S, Gil González J, España López A, Matos Garrido N, Velasco Ortega E.

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

SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S39.

* doi:10.4317/medoral.17644093

<http://dx.doi.org/10.4317/medoral.17644093>

Edentulism, as a result of the atrophy of the alveolar processes, implies for geriatric patients a limiting condition in mastication, which is one of the main functions of the stomatognathic system, such as swallowing, phonetics, esthetics and social life. Before the advent of bone-integrated implants, the only option for rehabilitation of the completely edentulous patient was a mucosa-supported complete denture. This meant for the patient several problems regarding the retention and lack of stability of the prosthesis, especially in mandible. To solve these problems, oral rehabilitation with endosseous implants comes up, and therefore, the appearance of overdentures. Overdentures represent an implant treatment in patients with a long period of edentulism. However, on different occasions the maxilla and mandible bone level can involve an impediment to the placement of conventional dental implants (> 8mm), due to its length. As an alternative to the surgical techniques, such as sinus lift or transposition of the inferior alveolar nerve, short implants (< 8 mm) arises. The procedure was found to be appropriate, less expensive and faster on the rehabilitation of atrophic edentulous maxilla. Over a long period of time, it should be carried out monitoring and evaluation of the results obtained.

- Poster 18

TITLE: Prosthetic rehabilitation in elderly patients and its effect on masticatory performance and nutrition

AUTHORS: Pardal Peláez B, González Serrano J, Rodríguez Crespo P, Montero Martín J, Rubio Alonso L, Pardal Refoyo JL.

Universidad Complutense de Madrid, Universidad de Salamanca, Complejo asistencial de Zamora.

SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S39.

* doi:10.4317/medoral.17644094

<http://dx.doi.org/10.4317/medoral.17644094>

Introduction: Teeth loss leads to changes on masticatory performance and dietetic habits. This is especially important in elderly patients who present comorbidities that can lead to severe malnutrition. Oral rehabilitation with implant-retained complete dentures seem to be an

useful solution for improving the masticatory performance in elderly patients.

Material and Methods: A research in PubMed and Cochrane was made with the keywords ((dental prosthesis) AND nutrition) AND elderly, filtered by Clinical Trial and published in the last 5 years.

Results: We selected 6 articles that fulfilled inclusion criteria. There is scientific evidence supporting that there is a relation between edentulism and a reduction in the intake of some nutrients because of the change in the long term of dietary habits without introducing substitutes in diet. Nevertheless, there are not significative differences in nutritional parameters between patients who wear conventional mandibular complete dentures and those who wear complete dentures retained by two dental implants. Despite this, placing two dental implants in the mandible in order to retain low complete dentures improves the masticatory performance and the bite force and also the patient's life quality, this is why it is the gold standard for the treatment of complete mandibular edentulism.

Conclusions: The use of mandibular removable complete dentures retained by two implants improves masticatory performance but it does not seem to be determinant in the nutrition of the elderly patient, because this is a multifactorial condition.

- Poster 19

TITLE: Immediate Post-Extraction Implants: Report of a Case

AUTHORS: Martínez García R, Duarte Ruggiero A.

Clínica Dental Boca Sana

SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S40.

* doi:10.4317/medoral.17644095

<http://dx.doi.org/10.4317/medoral.17644095>

Introduction: Due to current aesthetic requirements, the technique of immediate post-extraction implants has become a routine implant technique. This procedure is based on post-extraction implant placement and immediate restoration within a maximum period of 48 hours after the implant placement, with no functional load. In turn, immediate implants prevent atrophy of the alveolar process-improving buccolingual direction and thus achieving a better emergence profile. This allows the conservation of soft tissues, in addition to the positive psychological effects for the patient. On the other hand, the immediate restoration helps reduce the number of surgeries and offers greater patient comfort as it avoids placing a conventional removable prosthesis. Numerous studies support this technique, with around 97.4% of results showing success with the implants.

Case Study: 67 year old female patient presented with the complaint of a bad taste in her mouth and halitosis. The patient wore a fixed prosthesis and through radiological examination multiple non-restorable root cavities were observed in the abutment teeth bearing the prosthesis. In this situation it was decided to proceed with the extraction of these teeth. It was also decided that in order to start the rehabilitation with the implants, a cosmetic procedure would take place immediately, with the same prosthesis.

Conclusions: With proper previous diagnosis, immediate placement post extraction implants and aesthetic restoration within 48 hours shows satisfactory results and permits treatment with lower amount of surgical intervention.

- Poster 20

TITLE: Role of ages in chronic periodontitis associated type 2 diabetes

AUTHORS: Álvarez Pérez D, Álvarez Conde J, Santana Acevedo M.

Clínica privada Huelva, Máster investigación U.S.

SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S40.

* doi:10.4317/medoral.17644096

<http://dx.doi.org/10.4317/medoral.17644096>

Introduction: A review of AGEs and their interaction in chronic periodontitis associated with type 2 Glycation diabetes. Its final products of certain compounds circulating chemicals (known as the union of an aldehyde group of a sugar with an amino group, is usually done of a protein) and is a union that does not require enzymatic reaction. These products take a decisive character in many cases chronic periodontitis associated with type 2 diabetes.

Objective: Discover the cells involved in such pathologies.

Material and Method: Search in PubMed with the terms "AGEs and Periodontitis"

Results: They are determined as the pathogenic mechanisms of both diseases using the RAGE receptors found in the cell membrane of different cell groups and as advocate of AGEs, by AGER receptors, which are able to clean up toxic products are associated.

These AGEs should be administered by different cellular systems of the human body such as: Monocytes, lymphocytes, macrophages, PMN, adipocytes, pancreatic beta cells, endothelial cells and periodontal ligament fibroblasts. All these cells have their defensive mechanism and participate balance and homeostasis, generating antioxidants and thus neutralizing the inflammatory response and decreasing oxidative stress associated cell in both pathologies.