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Introduction: Oral lichen planus (OLP) is a chronic inflammatory disease affecting the oral mucosa, commonly found in women. OLP has been linked to other diseases such as diabetes mellitus, hepatitis C or lupus erythematosus. Needless to say, primary hypothyroidism (PHT) is an autoimmune disorder with a predilection for women, and associated with systemic diseases as the previously mentioned. The aim of this paper is to review the relationship between OLP and HTP, and present a case series where we found the association between these two entities.

Case series: We present two patients diagnosed and treated at the Oral Medicine Department in the Faculty of Dentistry of Complutense University of Madrid. Both women diagnosed with PHT presented reticulate and erythematous lesions in areas of the oral mucosa. Both had a previous histopathological diagnosis of OLP; helping us with a proper treatment.

Conclusions: It is important to rule out the presence of hypothyroidism in patients diagnosed with oral lichen planus, especially when we come across asymptomatic cases.

Patients with PAH should know the risk to develop OLP lesions; therefore, emphasizing a thorough search of such lesions in every dental visit.

- Poster 24

TITLE: Minimal invasive aesthetics rehabilitation in the elderly patient

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Introduction: Currently, one of the treatment options for elderly patients is minimally invasive dentistry. The development of adhesive dentistry techniques is letting grow the tend to preserve a larger amount of healthy dental tissue when performing a full rehabilitation.

Clinical case: This case report describes a vertical dimension of occlusion rehabilitation in a senior patient with multiple tooth loss and subsequent posterior bite collapse. The primary aesthetic diagnostic evaluations

were conducted using plaster models set up on the articulator in a maximum intercuspation position and an estimation of vertical dimension loss. The treatment plan focuses on an increase of the vertical dimension through a teeth change on the upper removable partial denture that the patient already had and some indirect overlay restorations on the upper jaw remaining molars and a some aesthetic direct composite restorations.

Conclusion: The vertical dimension recovery is critical to rehabilitate the function and aesthetics, and more importantly, in case of elderly patients, this procedure must be conducted introducing the least possible changes.

- Poster 25

TITLE: Odontogenic Cysts in Geriatric Patients: A case report

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Introduction: There are 2 types of odontogenic cysts: The ones originated as a consequence of the inflammatory stimulation and the ones derived from a developmental error. Those cysts originated due to the inflammatory stimulation can be radicular or paradental. Radicular cysts present a prevalence ranging from the 52 and 75%, being the more common odontogenic cysts. Although usually diagnosed between the age of 30 to 60 years old, they can appear at any age. The more affected teeth are maxillary incisors and canines. Clinically, they are asymptomatic, and the majority don't produce cortical bone expansion, but if they do, it affects the buccal area. Paradental cysts are located close to the cervical margin of the lateral area of the root, due to the inflammation of a periodontal pocket and affecting the disto-vestibular area of partially erupted lower third molars with a previous history of pericoronaritis.

Case report: A 65-year-old male patient, asymptomatic. On routine radiological examination a radiolucent image is observed in the upper left quadrant. Surgical excision is performed and sample is sent to the laboratory to confirm the diagnosis. The results of the histopathological examination showed a radicular cyst.

Conclusions: Radicular cysts are usually seen in male elderly patients with poor oral hygiene. Since they are asymptomatic, the diagnosis is performed at an advanced stage, and therefore deformities of the affected

bone, teeth mobility and jaw fracture may occur. The dentist should be able to make an early diagnosis of odontogenic cysts based upon the clinical manifestations, radiological and histopathological examination.

- Poster 26

TITLE: Osteonecrosis of the jaw associated with denosumab (prolia®). Review of literature

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Aim: The main purpose is to study the risk posed by patients treated with denosumab to develop osteonecrosis of the jaw (ONJ) and to analyze the most appropriate measures to prevent the onset of this disease.

Material and Methods: A review of the literature has been made on the Pubmed database, using the following keywords: osteonecrosis of the jaws; denosumab. The inclusion criteria were articles published in the last 5 years which have reported cases of ONJ associated with denosumab treatment, in ages between 50 and 85 years old.

Results: According to the previous criteria, 12 articles have been selected for this review, where 23 cases of ONJ associated with denosumab treatment have been identified. All of them after receiving oral surgery treatment, and being the mandible's posterior portion the most common location. The risk of developing ONJ is significantly higher in patients with metastatic bone disease who are receiving antiresorptive therapy compared to those receiving this treatment for osteoporosis.

Conclusion: Given the increase in the prescription of denosumab as a antiresorptive agent, it is advisable to know the risk of appearing ONJ in patients who are about to undergo an oral invasive treatment, as well as to apply an appropriate dental preventive program before starting the denosumab treatment, reducing this way the incidence of ONJ, as a single dose of this drug may induce the disease.

- Poster 27

TITLE: Radiotherapy-induced xerostomia: Update.

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Aim: The aim of this article is to review the literature of the last ten years regarding the relation between radiotherapy and xerostomia.

Methods and Materials: a literature search was conducted in Pubmed with the following search terms: ("Xerostomia/prevention and control" AND "Radiotherapy") OR ("Xerostomia" AND "Intensity modulated radiotherapy"). Articles published between 2005 and 2015 that included measurement of xerostomia and its prevention using IMRT, amifostine, pilocarpine and submandibular gland transfer, were included in our study.

Discussion: Observer-based or patient-reported evaluation tools can be used in order to evaluate the degree of xerostomia following radiation therapy. Thanks to modern techniques, such as IMRT, parotid-sparing allows the subjects to keep part of this gland's function. However, patients may not feel a significant improvement in the severity of xerostomia. This leads us to look for alternative techniques, such as radioprotective drugs (amifostine, pilocarpine), or surgical techniques such as submandibular gland transfer in order to protect this gland.

Conclusions: Dose sparing to the oral cavity and salivary glands can be achieved with new radiation techniques. Nevertheless, radiation-induced xerostomia has a complex physiopathology and may be influenced by multiple factors that hinder its treatment, so that current approaches to treat this symptom are focused mainly on its prevention.

- Poster 28

TITLE: Proliferative Verrucous Leukoplakia (PVL): A Case Review

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