among the professionals, regarding the use or not of dental implants in this patients, the treatment protocol and the relation the administration road, the dosage and the BRONM risk.

There are been reported cases of BRONM in this patients, especially those under prolonged treatment.

- Oral Presentation 44
TITLE: Short implants: an alternative in atrophic maxillary

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Objectives: To assess the efficacy and characteristics of short implants as an alternative to other techniques of larger as sinus lift in the atrophic maxillary.

Material and methods: in order to prepare this work has been conducted a literature search using the following databases: Pubmed, Medline, Cochrane, Dialnet, Scielo, Doaj to obtain articles published between 2006 and 2016. We have selected the 40 articles using the following keywords: “short implants”, “sinus lift”, “atrophic maxilla” and “bone loss”.

Results: Nowadays is considered the sinus lift as first choice in the rehabilitation of the atrophic posterior maxillary sector. However, the emergence of short implants (> 10mm) allows us to evaluate other alternatives. Authors such as Kang found that a larger diameter of the implant and bone density, lower stress suffer. Monje et al. considered marginal bone loss significantly higher in the external connection implants. As for the implant’s stress, Pellizer among others concludes that it decrease splinted, being lesser with the first implant of greater length.

Conclusions:
1. Can be considered as ideal short implant that suffers the least possible stress and lower marginal bone loss to the larger one in high bone density, internal connection, roughness surface, splinted, and being the first implant of greater length.
2. Rehabilitation with short implants is a less invasive, with fewer complications and cure faster than sinus lift technique.

- Oral Presentation 45
TITLE: Esthetic in Gerodontology

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Introduction: The demand of esthetic treatments is growing from youth and adult age to the gerontological patient. That is why we must to know the materials and techniques that make possible the development of this type of treatments, being aware of the use and limitations of the different materials. The planning of cases with high esthetic requirements represents a challenge for the clinician.

Clinical case: The development and follow-up of clinical protocols makes easier planning and simplify therapeutic procedures being useful, as much for the clinician as for the dental technician, for the final success and to respond the patient expectations.

A clinical protocol is presented for esthetic and functional rehabilitation of the geriatric patient, analyzing the factors to keep in mind, as much esthetic as functional, as in the integration of them, evaluating the materials and techniques to use.

The results obtained have been successful, achieving a correct function and proper aesthetic.

Conclusions: Nowadays, we can adjust an esthetic treatment to any situation in the gerontological patient, thanks to the materials and techniques development up to date, being possible to fulfill the patient expectations.

- Oral Presentation 46
TITLE: Rehabilitation of patients that present impacted teeth: avoiding preprosthetic surgical procedures

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**Introduction:** Currently we know the surgical recommendations to achieve an optimal result in implant fixed rehabilitations. However, it is possible that an impacted tooth prevents us from getting an ideal implants placement. In order to solve this problem, we have to subject the patient to very invasive surgical procedures. Considering this, several solutions have been described in the literature: short implants, transdental implants or unconventional implant placement.

**Clinical case:** A 66 years old female patient attended to a total oral rehabilitation. She presents partial removal prosthesis and four teeth. An impact canine was found on the radiography. After the case study, it was decided to modify the ideal implants placement to be able to carry out

**Conclusions:** In this kind of cases, the professional must evaluate the risks/benefits. Only a few of the described solutions in the literature meet the needed criteria for being considered optimal. Thus, the ideal implants placement was decided to be changed despite the biomechanical of the future prosthesis could be slightly risky.

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**- Oral Presentation 47**

**TITLE:** Use of PIC dental sistem for the rehabilitation of the atrophic edentulous maxilla. A case report

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**Introduction:** Prosthetic rehabilitation of atrophic edentulous maxilla represents a major clinical challenge. Nowadays a number of systems attempts to simplify the prosthetic workflow from the impression taking to the design, manufacturing and posing of the prosthesis.

**Case report:** 60 – year – old ASA I patient having an atrophic maxilla and wears a upper complete prosthesis is refered to the Universty Complutense of Madrid's Oral Prosthesis and Occlusion Masters Degree in order to be treated with an implant – supported fixed rehabilitation. After a full clinical and radiographical study of the case, it was decided to place 6 implants (Straumann RN SP). It was, also, determined that the best prosthetic treatment option was to use an implant – supported overdenture. To achieve this purpose, a photogrammetric impression was taken using the PIC Dental system. The file obtained from this system served to digitally desing a micromilled substructure and mesostructure which were later milled in titanium. This digitally desing and manufacture (CAD/CAM) achieved not only a perfect fit but also the functional and aesthetic rehabilitation of the patient’s upper jaw.

**Conclusions:** A correct case planning, supported by the new technologies when taking the impressions and manufacturing the prosthesis are the key to resolve the most complex clinical situations when ensuring a proper fit and accuracy.

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**- Oral Presentation 48**

**TITLE:** Dental management of the elderly renal transplant patient

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**Objectives:** Nowadays, renal transplant is the treatment of choice in patients with chronic renal failure, both in young and elder population. Due to the increased number of transplants that are performed on patients with 65 years or more, it is essential for the dentist to know the most common oral pathology in kidney transplant patients and some special considerations to take into account during the dental treatment.

**Materials and Methods:** For the literature review we carried out a search in PubMed, Medline and Scopus databases. For the search criteria were used as keywords oral lesions, kidney or renal transplant, immunosuppression, dental management or dental care. We obtained a total of 31 articles.

**Results:** To prevent rejection of the transplant, patients must undergo immunosuppressive therapy lifelong. Consequently, the immune response is reduced, increasing the susceptibility to infections and the risk of develop oral lesions and de novo tumours.

**Conclusions:** it is necessary to establish a close communication with the nephrologist throughout dental treatment and awareness patients on the importance of regular reviews in order to prevent the occurrence of infections and the early detection of malignancies.