- Oral Presentation 49
**TITLE:** Natural things can kill you ... How have influenced the progress of science in increasing life expectancy

**AUTHORS:** Paredes Rodríguez VM, Torrijos Gómez G, González Serrano J, García-Riart Monzón M, López-Pintor RM, Hernández Vallejo G.
Departamento Estomatología III. Universidad Complutense Madrid.


* doi:10.4317/medoral.17644043
http://dx.doi.org/10.4317/medoral.17644043

**Objective:** To present how advances in science have helped to improve life expectancy in the world today

**Material and Methods:** A comprehensive literature review of the history of the technological advances that have helped improve both the quality and life expectancy of humans was performed

**Results:** The history of mankind is, among other things, the story of how man has struggled to tame nature, to make it a little less natural. For a long time we have clearly lost the battle. From the 10,000 B.C. until the eighteenth-nineteenth century, progress was scarce and life expectancy barely lasted. Since the industrial revolution, gradually, some improvements, artificial course, as the first steps or sewage system was pushed upwards. Many of the trends that advocate a return to nature or recover ancient therapeutic techniques take us back to a nice little existence. The many advances in medicine and other disciplines, such as vaccines, antibiotics, immunosuppressants, etc. have enabled life expectancy in Spain is currently 82.5 years. Before all those artificial, synthetic and industrial progress, only one of every 1,000 live births reached that age.

**Conclusion:** Scientific medicine has refined the findings that have been made throughout history and does not rule out anything that works and improve life; it is natural or artificial complete devoid of importance.

- Oral Presentation 50
**TITLE:** Hyaluronic acid in cosmetic filler of perioral soft tissues. Case report

**AUTHORS:** Marro Amador P, Almena Martínez L, Santos Marino J, Arriola Riestra I, Martínez González JMS, López-Silva García MJ.
Máster Cirugía Bucal e Implantología. Hospital Virgen de la Paloma. Madrid.


* doi:10.4317/medoral.17644044
http://dx.doi.org/10.4317/medoral.17644044

**Introduction:** Hyaluronic acid is a polysaccharide that is founded in many parts of the body. It is the facial filler of choice because of its security, versatility and ease of use. In the last years the use of this acid has increased it frequency in cosmetics. It use in dentistry is indicated for the correction of wrinkles, furrows, vermillion border or lips enlargement.

The aim of this communication is to describe the techniques of its appliance, possible side effects as well as it treatment.

**Clinical case report:** 66 years old male with no medical or pharmacological background of interest, comes to our service asking for an aesthetic enhancement of his facial lower third. After informing him about the different therapeutic possibilities and acceptance by his part of them, as well, as the signing of the informed consent, a preparation which consisted on washing the area with antiseptics and local anesthesia on the zone was made prior to the intervention. During the procedure a filled of the nasogenian furrow and vermilion border and also a superior and inferior lip enlarging were carried out applying “Surgidem 24XP” and using lineal and pillars techniques. Once finished the intervention, the standard protocol for this kind of surgeries was performed.

**Conclusions:** Hyaluronic acid represents, nowadays, an interesting alternative that covers the aesthetic requirements of our older patients.

- Oral Presentation 51
**TITLE:** Suppose complications during surgical stage implants failure of patients older than 65 years? Clinical study in 203 implants placed

**AUTHORS:** García García AS, Sanz Alonso J, Merchán Morales S, Ruiz Sáenz PL, Fernández Cáliz F, Martínez-González JM.
Máster Cirugía Bucal e Implantología. Hospital Virgen de la Paloma. Madrid.


* doi:10.4317/medoral.17644045
http://dx.doi.org/10.4317/medoral.17644045

**Objectives:** 1-Determine what are the main complications that can find, frequency of occurrence, in patients older than 65 years. 2-Analyze if complications are caused by external factors to patients or relate to them own conditions. 3-Assess whether complications in these patients account for implant failure. 4-Get the degree of success and failure of implants placed in these patients.
Material and Method: A retrospective, longitudinal, observational, single-center study was conducted by reviewing the medical records of 635 patients and 1208 implants.

Results: Patients over 65 accounted for 15.50% (101) patients and 203 implants were placed (16.80%). There were 17 complications (8.62%), 9 (4.56%) corresponded to the suture dehiscence, 3 (1.52%) infections, 2 (1.01%) to fracture or fenestration of the cortical bone and lost 3 (1.52%) implants. 11 sinus lift (11.82%) were performed and there was piercing the membrane of Schneider in a case. Conclusions: 1-The main complication we can find is suture dehiscence. 2-Most complications were caused by external factors to patients. The 3-Most complications do not involve the failure of the implants. 4-3 implants were lost, representing 1.47% of the implants.

- Oral Presentation 52
TITLE: Oral care in geriatric patients with reduced mobility
* doi:10.4317/medoral.17644046
http://dx.doi.org/10.4317/medoral.17644046

Aims: To identify existing barriers regarding oral care of elderly patients who, due to neurodegenerative, musculoskeletal or other conditions, have their mobility decreased, as well as to describe said barriers when treating them, in order to overcome these obstacles and provide them with proper dental care, integrating disabled patients into the healthcare system.

Material and Methods: A bibliographic search was carried out, in both medical, legal and architectural journals to draw up some basic recommendations to allow these patients to receive dental treatment.

Results: Dental surgeries must be specifically designed to be able to adapt to the disabled patient’s needs, furthermore, their condition should not pose an obstacle to receive any kind of dental care.

Conclusions: The clinician must be aware and prepared to comply with special necessities, which extends also to the design of the dental surgery.

- Oral Presentation 53
TITLE: Therapeutic irrigation of periodontal pockets
* doi:10.4317/medoral.17644047
http://dx.doi.org/10.4317/medoral.17644047

Introduction: The existing literature is inconsistent regarding whether there is any additional effect of irrigation as an adjunctive to scaling and root planing, and, if there is an effect, what its size is.

Purpose: The aim of this study is to observe the influence of chlorhexidine, povidone-iodine and metronidazole in decreasing probing depth compared to control group and to determine which cases will reach probing depths less than or equal to 3 mm.

Methods: Fourty adult patients with generalized chronic periodontitis were enrolled. During scaling and root planing, a subgingival irrigation was performed in four different groups: group I being the control group without any additional irrigation agent; group II with 0.2% chlorhexidine digluconate; group III with povidone-iodine; and group IV, with 4% metronidazole.

Results: In the control group a progressive decrease in probing depths was observed. In the chlorhexidine group, the best results were observed at 7 days. In the group of povidone-iodine, the decrease of probing depths was more progressive than the other groups. In the group of metronidazole, the decrease of probing depths was greater during the first week in incisors and canines.

Conclusions: Chlorhexidine digluconate adjunctive to mechanical debridement were more effective than the control group showing better results than the other antimicrobial agents employed in the present study.

- Oral Presentation 54
TITLE: Delayed effects of bisphosphonates in dental implants treatment: A case report