**- Oral Presentation 69**  
**TITLE:** Dental management in a Bernard-Soulier syndrome. Case report  
**AUTHORS:** Oñate Sánchez RE, Rodríguez Lozano FJ, Ruiz Roca JA, Jornet García V.  
Unidad de Pacientes Especiales y Gerodontología. Hospital Morales Meseguer. Universidad de Murcia.  
* doi:10.4317/medoral.17644063  
http://dx.doi.org/10.4317/medoral.17644063  

**Introduction:** Bernard–Soulier syndrome (BSS) is an autosomal recessive coagulopathy characterized by large platelets, thrombocytopenia, and severe bleeding symptoms. Clinical manifestations usually include a spontaneous bleeding tendency, purpura, epistaxis, gingival bleeding, menorrhagia, and hemorrhage after dental extractions. Bleeding episodes are mostly associated with trauma and surgical procedures.  

**Case report:** We report a 66-year-old woman diagnosed with BSS that came for dental treatment at the Faculty of Dentistry at the University of Murcia. Panoramic radiograph and dental examination revealed spontaneous gingival hemorrhage at the interdental areas of 11 and 21, a deep carious lesion in tooth 3.7 to extraction, caries in 1.6, 1.7, 2.7, 4.6, 4.8 get them filled, and the need of buccal cleaning by the presence of calculus. Due to a high hemorrhage’s risk, an hemalogic consult was made and the treatment was done in colaboration of both specialists (hematologists and dentists). The morning of the intervention, 2 vials (1 gram) of Amchafibrin® IV were administered. Shortly before the extraction, the patient received two platelets transfusions by automa-ted apheresis. The patient came to the dental clinic with normal saline to keep blood via permeable. The tooth was surgically removed, taking care of protecting the soft tissue from excessive trauma.  

**Conclusions:** Dentists and oral sugeons should be take adequate precautions to prevent potential problems of hemorrhage when going to realice dental treaments in these patients. Effective collaboration between hematologists, dentists and dental surgeon is necessary to determine the best hematological cover required.

**- Oral Presentation 71**  
**TITLE:** Preprosthetic surgery and prosthetic rehabilitation of Parkinson patients. About a case  
**AUTHORS:** Schiavo Di Flaviano v, David K, Salgado C, Martín Carreras-Presas C, Somacarrera Pérez ML.  
* doi:10.4317/medoral.17644065  
http://dx.doi.org/10.4317/medoral.17644065  

**Introduction:** Parkinson’s disease is a chronic neurodegenerative disorder, which results from the destruction of the substantia nigra of the brain. This malady causes progressive disability that involves movement disorders and impaired cognitive and emotional function. It is the second most common neurodegenerative disorder and affects men and women equally.

**- Oral Presentation 70**  
**TITLE:** Unusual mandibular manifestation of hematopoiesis in alpha-thalassemia: review of the literature and case report  
**AUTHORS:** Ruiz Roca JA, Jornet García V, Rodríguez Lozano FJ, Jornet García A, Linares Tovar EK, Oñate Sánchez RE.  
Unidad de Pacientes Especiales y Gerodontología. Hospital Morales Meseguer. Universidad de Murcia.  
* doi:10.4317/medoral.17644064  
http://dx.doi.org/10.4317/medoral.17644064  

Alpha (α)-thalassemias are the most common genetic disorder of hemoglobin (Hb) synthesis, affecting up to 5% of the world’s population. These congenital hemolytic anemias induce extramedullary hematopoiesis, including the liver, spleen, sinuses, and the diploic spaces of the skull. Oral health problems in patients with thalassemias are mostly related to a varied degree of facial deformities, malocclusions, and/or dental arch dimensions. We present a case with a 69-year-old man, diagnosed with homozygous α thalassemia that came to the Faculty of Dentistry at the University of Murcia for a dental treatment. His medical history was notable for recurrent episodes of bleeding since childhood. Panoramic radiography revealed changes in the mandible, with widening of medullary spaces, coarsening of the trabeculae and thinning of cortical bone because of a compensatory extramedullary hematopoiesis Here, a brief review of the clinical, radiographic, laboratory, and dental implications of these hemoglobin disorders are presented. The patient required several dental extractions and two blood transfusions were administered the same day of the intervention. Thereafter, additional transfusions were planned only depending on the degree of bleeding.