

gery of Faculty of Dentistry (Complutense University, Madrid) for 400 patients over 65 years who had a third retained mandibular molar and had a panoramic radiograph and a mandibular CBCT with selected one, or several, radiological signs of relationship between the third molar and the mandibular canal. Then the relationship between these signs and different situations between the alveolar nerve and the lower third molar was categorized with the classification of Tanaka et al..

**Results:** A total of 565 third molars were analyzed showing a 52.2% one radiological sign being the most frequent (29.7%) dimming roots. Among the most frequent associations were the two signs present 34% of third molars. The associations signs determines the loss of cortical alveolar canal ( $p < 0.05$ ). When darkening roots appear, the vestibular nerve is located at 42.9% ( $p < 0.05$ ) increase the risk nervous due to the surgical approach of the third molar.

**Conclusions:** The risk of nerve injury in elderly patients is higher in cases where darkening of roots and more than a sign of relationship are present.

## - Oral Presentation 77

**TITLE:** Pain assesment in dementia patients

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**Intoduction and Object:** Dementia consists of a progressive, chronic decline in intellectual abilities, this may alter nociception and the ability to communicate pain, which, in return, complicates the diagnosis, and delays the treatment of the cause, resulting, also, in a worsening of the neuropsychiatric symptoms. The purpose of this research was to get dentists to become familiar with guidelines and protocols needed to diagnose pain in dementia patients, and also know their limitations.

**Methods:** A literature search was performed using the words "dementia" "Pain" "diagnosis" resulting in 36 available papers.

**Results and Conclusión:** It was found that as pain assesment tools we have, autonomic responses, of which we must know that studies report lower heart rate in patients with severe dementia; behavioral response, that can be evaluated using different scales, being the most accepted the PAINAD (Pain Assesment in advanced

dementia) scale, although, studies report that the PACS-LAC (Pain Assessment Checklist for Seniors with Limited Ability to Communicate) scale is easier to perform; and subjective response, as the facial expression. In order to use them correctly we should know that, in patients with mild dementia, the subjective and behavioral responses are not altered compared to healthy subjects, yet, in advanced stages, the pain response usually appears exaggerated, which implies that those may not be the most reliable methods to asses the intensity of pain. Note must be taken that none of these tools have been design for orofacial pain assesment.

## - Oral Presentation 78

**TITLE:** Use of snuff and associated oral lesions in elderly patients

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**Objective:** To conduct a literature review of ways of worldwide snuff consumption and specifically in the elderly population and their involvement in the oral cavity. The impact on the medical and dental field and the associated oral lesions will be studied.

**Method:** We review 44 articles published between 1999 and 2016 from Medline and PubMed databases.

**Results:** The consumption of snuff is the main risk factor for oral, oesophageal, pancreatic and colorectal cancer. Smoking has also been identified as a risk for tooth loss, implants and periimplant inflammation, besides being the most important risk factor in the development of periodontitis and premalignant lesions in patients from 50 to 60 years.

**Conclusions:** Elder smokers and former smokers patients are a high risk group that should be examined regularly by dental professionals and primary care. Understanding the factors related to cancer development helps adequately to detect and propose more effective preventive strategies.