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useful solution for improving the masticatory performance in elderly patients.

**Material and Methods**: A research in PubMed and Cochrane was made with the keywords (dental prosthesis) AND nutrition AND elderly, filtered by Clinical Trial and published in the last 5 years.

**Results**: We selected 6 articles that fulfilled inclusion criteria. There is scientific evidence supporting that there is a relation between edentulism and a reduction in the intake of some nutrients because of the change in the long term of dietary habits without introducing substitutives in diet. Nevertheless, there are not significative differences in nutritional parameters between patients who wear conventional mandibular complete dentures and those who wear complete dentures retained by two dental implants. Despite this, placing two dental implants in the mandible in order to retain low complete dentures improves the masticatory performance and the bite force and also the patient’s life quality, this is why it is the gold standard for the treatment of complete mandibular edentulism.

**Conclusions**: The use of mandibular removable complete dentures retained by two implants improves masticatory performance but it does not seem to be determinant in the nutrition of the elderly patient, because this is a multifactorial condition.

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**- Poster 19**

**TITLE**: Immediate Post-Extraction Implants: Report of a Case

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**Introduction**: Due to current aesthetic requirements, the technique of immediate post-extraction implants has become a routine implant technique. This procedure is based on post-extraction implant placement and immediate restoration within a maximum period of 48 hours after the implant placement, with no functional load. In turn, immediate implants prevent atrophy of the alveolar process-improving buccolingual direction and thus achieving a better emergence profile. This allows the conservation of soft tissues, in addition to the positive psychological effects for the patient. On the other hand, the immediate restoration helps reduce the number of surgeries and offers greater patient comfort as it avoids placing a conventional removable prosthesis. Numerous studies support this technique, with around 97.4% of results showing success with the implants.

**Case Study**: 67 year old female patient presented with the complaint of a bad taste in her mouth and halitosis. The patient wore a fixed prosthesis and through radiological examination multiple non-restorable root cavities were observed in the abutment teeth bearing the prosthesis. In this situation it was decided to proceed with the extraction of these teeth. It was also decided that in order to start the rehabilitation with the implants, a cosmetic procedure would take place immediately, with the same prosthesis.

**Conclusions**: With proper previous diagnosis, immediate placement post extraction implants and aesthetic restoration within 48 hours shows satisfactory results and permits treatment with lower amount of surgical intervention.

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**- Poster 20**

**TITLE**: Role of ages in chronic periodontitis associated type 2 diabetes

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**Introduction**: A review of AGEs and their interaction in chronic periodontitis associated with type 2 Glycation diabetes is final products of certain compounds circulating chemicals (known as the union of an aldehyde group of a sugar with an amino group, is usually done of a protein) and is a union that does not require enzymatic reaction. These products take a decisive character in many cases chronic periodontitis associated with type 2 diabetes.

**Objective**: Discover the cells involved in such pathologies.

**Material and Method**: Search in PubMed with the terms “AGEs and Periodontitis”

**Results**: They are determined as the pathogenic mechanisms of both diseases using the RAGE receptors found in the cell membrane of different cell groups and as advocate of AGEs, by AGER receptors, which are able to clean up toxic products are associated. These AGEs should be administered by different cellular systems of the human body such as: Monocytes, lymphocytes, macrophages, PMN, adipocytes, pancreatic beta cells, endothelial cells and periodontal ligament fibroblasts. All these cells have their defensive mechanism and participate balance and homeostasis, generating antioxidants and thus neutralizing the inflammatory response and decreasing oxidative stress associated cell in both pathologies.