

**- Poster 36**

**TITLE:** Bisphosphonates related osteonecrosis of the jaws. A clinical case

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**Introduction:** Bisphosphonates are a group of drugs that reduce the rate of bone turnover, inhibiting bone resorption, mainly by inhibiting the action of the osteoclasts. Osteonecrosis of the jaw (BRONJ) is a complication related to the use of bisphosphonates, it is an adverse reaction which can significantly affect the quality of patients' life.

**Clinical case:** patient with bisphosphonate related osteonecrosis of the jaw.

**Conclusions:** In patients treated with bisphosphonates it will be necessary to implement preventive measures. Those with BRONJ may be treated by professionals.

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**TITLE:** Verrucous Carcinoma, a case report

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**Introduction:** Verrucous Carcinoma (CV) is a variant of Squamous Cell Carcinoma, the most common site is the oral cavity. Clinically it presented as a well-circumscribed, slow-growing, locally aggressive exophytic lesion. Of unknown etiology, it has been linked to consumption of alcohol, tobacco and the Human Papilloma Virus (HPV).

**Clinical case:** Female patient 67 years old who attends H.U.M.-Montepríncipe for evaluation of an injury to the right side edge of the tongue, of 6 months of evolution, painless, progressive growth and no other associated symptoms. In the intraoral examination revealed a leukoplakic, exophytic, verrucous appearance and about 15 mm in diameter injury was evident. Cervical lymphadenopathy pathological examination detected. With

the diagnosis of suspected CV, incisional biopsy is performed and cervicofacial MRI is requested. Histopathological results were de CV and MRI ruled out cervical lymphadenopathy pathological, reason why it decides to intervene to the patient to complete surgical excision of the lesion, with pathological results CARCINOMA warty with free surgical margins (pT1 pN0 pM0).

**Conclusion:** the CV is a relatively common malignant lesion in the oral mucosa, whose prognosis will be conditioned by appropriate surgical treatment and diagnosis of the lesion in its early stages. The role of the dentist is essential in the early detection of these injuries through proper physical examination and incisional biopsy, must know the characteristics of this type of tumor characteristics.

**- Poster 38**

**TITLE:** Submental extraoral fistula related to implants

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**Introduction:** Implants are, now a days, the most chosen technic when it comes to rehab, both to patients or professionals. According to literature, implants have a survival rate about 98%. Nevertheless, there may be complications due either to surgical techniques or prosthetic restoration that can commit implants life. An accurate treatment diagnosis and planning will reduce complications in a big proportion.

**Clinical case:** Female, 73 years old, toothless, carries a inferior overdenture over two implants. Patient attends the doctor due to the appearance of a submental area extraoral fistula. After exploring, bucal mucosa had a normal aspect and implants were stable, with no movement and asymptomatic to percussion. We proceed to make a orthopantomography and a TC, where we impress a mild radiolucence image in the implant that corresponds to the fistula area.

The chosen treatment was the full surgical removal of the fistula and remove the implant in the same surgery.

**Conclusions:** We consider the chosen treatment the most suitable in order to remove the infection and the main origin that brought the fistula formation because is the one that has low percentage of non recurrence and so later be able to put another implant.

It is expected that in future, number of incidents and peri-implantar pathologies will increase due to the growth of implants collocations in the recent past years

## - Poster 39

### TITLE: Free bone graft in rebuilding mandibular

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**Introduction:** The aim of the bone reconstruction is to restore function and facial aesthetics after wide extirpation of tumor lesions. Mandibular reconstruction can be performed immediately or in several surgeries.

Reconstructive techniques include the use of free grafts mainly in small defects; and microvascularized flaps in major defects.

Free iliac crest graft is a therapeutic option for defects under 3 centimeters, because it is obtain a considerable amounts of cortico-medullary bone. In higher reconstructions to 5 centimeters is considered better option microvascularized grafts as the fibula, the scapular or iliac crest.

**Clinical case:** 63 year old patient presents ulcerated area on the right retromolar trigone that does not subside after conservative treatment. The biopsy is performed, and histopathological exam are compatible with epidermoid carcinoma considering T4N0Mx. TC requested where it can be seen affection mandibular bone.

Supraomohyoid neck hollowing is performed, excision with a safety margin with hemimandibulectomy. It is reconstructed with iliac crest graft 3,5x2cm, osteosynthesis with plate reconstruction. The patient develops properly and follow-up after 3 years, there are not signs of recurrence.

**Conclusion:** Free hip bone graft represents a therapeutic option for defects produced in oncologic resections after hemimandibulectomy, when the length is less than 3 centimeters.

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### TITLE: Surgical removal treatment for pleomorphic adenoma based on 2 cases

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**Introduction:** Pleomorphic adenoma is the most common benign tumour in the salivary glands.

It's most usual location is at the parotid gland, although it can also be found in the minor salivary glands, being the palate the most common affection.

The lesions are usually round and firm, with an asymptomatic and slow growth.

Diagnose is done utilizing TC, RMN, PAFF or biopsy, taking the sample from the central part of the lesion to avoid its extension.

**Clinical cases:** Case No 1: 55 years old male attends for consultation at HM Hospital due to exophytic lesion circumscribed to posterior lateral left region. After hystopathological exam the diagnosis results were pleomorphic adenoma.

A complete surgical removal is programmed as well as a palate reconstruction with a myomucosal flap taken from the buccinators muscle. No recurrence was detected over a year monitoring.

Case No 2: 66 years old woman with nodular lesion of a smaller size, firm consistency and limited borders in posterior central palate region. Complete surgical removal is programed allowed to heal by second intention. No recurrence was detected over a year monitoring.

**Conclusions:** The recommended treatment will be a complete surgical removal of the lesion with a 2-3mm safety margin on the healthy tissue for recurrence avoidance.

The closing technique may vary depending on size and bone erosion, being the options a reconstruction using buccinators flap or whole thickness palatal flap for moderate defects to direct closure or secondary intention healing.

Some cases with mayor magnitude have been reported requiring partial maxillectomy.

## - Poster 41

### TITLE: Mandibular fracture. Case report

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