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# 24<sup>th</sup> BaSS CONGRESS


May 9-11, 2019 | Tirana, Albania

CONTEMPORARY APPROACHES AND CHALLENGES IN DENTISTRY



**Abstracts Book**

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ABSTRACTS BOOK

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CONTEMPORARY APPROACHES AND CHALLENGES IN DENTISTRY

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the tissue response, postoperative pain and periodontal clinical parameters (PCPs) following the use of diode laser (810 nm, DL) as an adjunct to modified Widman flap (MWF) surgery to that of MWF alone.

**METHODS:** A total of 18 aggressive periodontitis subjects who have been pocket deep  $\geq$  5mm in two contra-lateral quadrants of maxilla after non-surgical periodontal treatment were selected. Control sites were randomly selected to receive a MWF and the contra-lateral test sites a MWF in conjunction with a DL. The DL was used to deepithelialize the inner part of the periodontal flap and photobio-stimulate the surgical area. Pain scale assessment (PS), pain medication consumption (PM), tissue edema (TE), and tissue color (TC) were evaluated one week following surgery. Clinical data were collected at baseline, 3rd months and 6th months after therapy

**RESULTS:** There were no significant differences in PCPs (plaque index, gingival index, probing depth, clinical attachment level, bleeding on probing) between test and control groups at any time of the study ( $P > 0.05$ ). Compared to baseline, there was a statistically significant improvement of all the PCPs for both groups at post-therapy values ( $P < 0.05$ ). Score of gingival TC was higher in control group, which was statistically significant, whereas PS, PM and TE were similar in both groups.

**CONCLUSIONS:** After 6 months of evaluation, the DL has not shown any additional benefits to modified Widman flap surgery in terms of PCPs, PS, PM and TE.

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### INFLUENCE OF SALIVA IN THE DEVELOPMENT OF DENTAL EROSION

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#### Abstract

Saliva, acquired pelliculus, dental structures and their relation to soft tissues in the oral cavity and tongue are in direct contact with the development of dental erosions. During the erosive attack of the saliva, its protective mechanisms such as dilution of erosive agents, neutralization and buffering of acids and slows down the decomposition of the enamel through the common ionic effect of calcium and phosphates.

Saliva offers protective effects that act continuously, and at the same time, and dynamic effects that act during the challenge. Salivary flow and neutralization of acids are important dynamic effects of saliva that prevent demineralization. If these two effects are compared, the acid buffer is the most important because it is associated with improved remineralization. Fluoride in the saliva (from toothpaste and tooth materials and from foods and beverages) can cause remineralization and prevent demineralization.

In a healthy environment, the pH of the inactive saliva is maintained at the limits of 6.7 to 7.4. The bicarbonate system buffer ( $\text{HCO}_3^-$ ) is the largest buffer present in the saliva. Just like in the peripheral blood, the combination of sodium bicarbonate, carbonic acid and gaseous carbon dioxide is an effective way of releasing the protons

(hydrogen ions) from the system. When considering the dynamics of the buffer system, saliva contains a large number of inorganic ions including calcium, phosphates, fluoride, magnesium, sodium, potassium and chloride.

**KEYWORDS:** demineralization, buffer system, inorganic ions.

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### LASER TREATMENT OF DENTURE-INDUCED HYPERPLASIA ( CASE REPORT)

Mirjana Markovska Arsovska, Ljuba Simjanovska, Sofijanka Gerasimova, Vulinet Abazi\*, Natasha Stavreva

PHU Stomatological Clinical Center  
\*PZU SKOMFH Dr. Mirind Selimi

#### Abstract

**INTRODUCTION:** Denture induced hyperplasia otherwise called epulis fissuratum is a hyperplastic condition of the oral mucosa caused by chronic trauma from the dentures that are not fitting very well on the mucosal tissue. The size of the lesion may be as small as a few millimetres to massive lesion involving the entire vestibule. The treatment of this hyperplastic lesions includes elimination of the causative factors and surgical removal of the lesion. The most common techniques used for removing the hyperplastic lesion are surgical scalpel, electrical scalpel, carbon dioxide laser, Erbium: YAG laser, Neodymium: YAG laser, and diode laser.

**AIM:** The aim of this study is to show the benefits of laser treatment of denture-induced hyperplasia.

**MATERIAL AND METHOD:** Two cases were reported with denture-induced hyperplasia. The intervention in the first case was performed by Er YAG Laser- Fotora (Fidelis III). The intervention in the second case was performed by conventional method which include the use of surgical scalpel.

**RESULTS:** Our results show that patients have not pain or bleeding after laser treatment in comparison with classic surgical methods.

**CONCLUSION:** Classical surgical techniques show very good results, but the advantages of laser removed hyperplasia are: less pain, good cutting and coagulation effects, produce rapid wound healing. The patients are more satisfied and feel more comfortable by using the laser-induced approach of removing of hyperplastic tissue than conventional approach.

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### MANAGEMENT OF ENDODONTICALLY TREATED TEETH WITH ENDOCROWN

Gürkan Gür, Gulbike Demirel

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#### Abstract

A common problem encountered by dentists is the restorative