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CURRENT TRENDS
AND ADVANCES IN
DENT 1 ST

## ABSTRACT BOOK

## **FIRST EDITION**

\*The second edition with correction of all unintentional, technical errors and deficiencies will be available by 09.09.2023

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# ORAL PRESENTATIONS



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**INTRODUCTION:** Dental fissure sealing is a safe and effective method of decreasing caries incidence, because the occlusal fissure is a much vulnerable site. The most caries-susceptible teeth during an eruption are the first permanent molars. In 2008 North Macedonia Government started a Dental preventive program: Fissure sealing at first permanent molars on 6-year-old school children with GC Fuji Triage, and it's still in use.

**AIM:** The primary objective of this research is to perform a more detailed examination of dental caries, DMFT structure, and to make a comparison among the examines in the urban and rural areas in the Prilep region.

**MATERIAL AND METHODS:** For improving the aim, we obtained 721 participants – school children from Prilep region. All the examined children were born in 2004, and occlusal sites of the first molars were sealed before 6 years for the first time, and that process continued until they were 12 years old.

**RESULTS:** The results show that sealants were highly effective in preventing dental caries in permanent molar teeth. The gained results show a significant statistical difference in the value: DMFT index in urban areas is 2, 43±2.902; decayed 1.03±1.975; extracted teeth 0.14±0.654 and filled teeth 1.25±1.943. DMFT index in rural areas is 2.21±2.668: decayed 0.96±1.743; extracted teeth 0.15±0.657 and filled teeth 1.10±1.877.

**CONCLUSION**: The results show that sealants were highly effective in preventing dental caries in permanent molar teeth and need to be undertaken in control within the child population.

Keywords: dental caries, fissure sealing.

## **OP-113**

## INFLUENCE ON FRACTURE RESISTANCE OF ENDODONTICALLY TREATED TEETH RESTORED WITH NEW FERRULE DESIGN

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**AIM:** This study presents the fracture resistance of ETZ prepared with a new ferrule design with a circular preparation around endodontically treated canals.

**MATERIAL AND METHODS:** Maxillary incisors were divided into 6 groups of 12. We used Y-TZP VALLPOST, Slovenia with retentive coronal shape. The groups were divided according to the diameter ( $\emptyset$ =1.4mm and  $\emptyset$ =1.6mm) of the Y-TZP VALLPOST, Slovenia) and the preparation for internal Ferrule 0 / 1 / 2 mm. Specimens were experimentally and clinically cemented with Multilink, Automix. Two-way analysis of variance (p<0.05) was used for statistical analysis. Fractures of the models were analyzed on a Carl Zeiss Optical Microscope V.8.

**RESULTS:** A 5-year clinical analysis was performed. Our research was providing knowledge about aesthetic reconstructions and the possibility of additional improvement of fracture resistance of frontal teeth prepared with a new ferrule method.

**CONCLUSION:** Within the limitations of this study, it is evident that preparation with an inner ring of 2 mm in all groups contributes to a significant increase in the fracture resistance of the ETZ. The retentive coronal rings of the zirconia post together with 2mm inner ferrule in all groups significantly reduced irreparable root fractures.

#### **OP-114**

## CONTEMPORARY PROSTHETIC TREATMENT FOR CHALLENGING PATIENTS WITH MULTIDISCIPLINARY APPROACH

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**INTRODUCTION:** Challenging patients are in need for complex dental treatment. Sometimes these patients need orthodontic treatment, or pre-prosthetic surgery, or therapy with splints before we proceed contemporary prosthetic treatment.

**AIMS:** To present the contemporary prosthetic treatment for challenging patients with multidisciplinary approach.

**MATERIALS AND METHODS:** Series of patients were treated with different types of prosthetic devises. Before beginning with prosthetic treatment, because these patients were challenging, multidisciplinary approach, was inquired. For young adult patients orthodontic treatment plan (class Angle II) and crown lengthening was performed, after which fixed dental constructions were manufactured. For patients that had temporomandibular dysfunctions and pain in the orofacial area, computed tomography was performed. Then splint was manufactured before the prosthetic rehabilitation, so that the maximum optimal treatment plan was provided.

**RESULTS:** There is no definite contemporary prosthetic treatment plan that can be suitable for every patient. Sometimes other protocols from different specialties must be involved.

**CONCLUSIONS:** With the treatment protocol provided, the deduction is that every patient must be treated individually. This includes the pre-prosthetic treatment, so that the dental prosthetic appliance will be suitable and will be designed on the mutual satisfaction of both the patient and the multidisciplinary dental team.

**Keywords:** contemporary prosthetics, challenging patients, pre-prosthetic treatment, multidisciplinary approach

## OP-115 RARE GENETIC DISORDER - CHERUBISM - case report

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**INTRODUCTION:** Cherubism is defined as a skeletal dysplasia with presence of bilateralsymmetrical fibrosis lesions on mandibullae and maxillae. It is a genetic disorder with autosomal dominant type of inheritance and the cause of the appearance is a mutation of the SH3BP2 gene. The name of cherubism is correlated with a specific facial appearance of the patients "Angelic appearance...

**CASE:** Four year-old female came to our dental office with a specific external appearance. Through the intraoral examination swelling was observed in the area of tuber maxillae and ramus mandibullae. Family history for the presence of cherubism was positive. The diagnosis of cherubism is usually made by X-ray, Cone Beam Computed Tomography (CBCT), biochemical markers, age and genetic examination. We made panoramic x-ray, CBCT, and karyotype genetic examinations. The differential diagnosis could be: masseteric hypertrophy, gigantoform cementoma, gigantocellular granuloma, brown tumor, ameloblastoma, odontogenic, myxoma, aneurysmal bone cyst, craniofacial fibrous dysplasia.

**TREATMENT:** Following the patient x-ray for 6 months, in some cases surgical interventions.

Further approaching treatment: TNF - in the circulatory system contributes to the regression of the disease. **CONCLUSION:** Cherubism is a rare disease where the lesion resolves spontaneously by 12 years of age. Mild forms without facial deformities do not need to be treated, surgical intervention is required if there are functional or aesthetic problems.

Keywords: Cherubism, Genetic disorder

#### **OP-116**

## HOW TO RECOGNISE IF YOUR PATIENT SHOULD BE EQUILIBRATED-CASE REPORT

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