

28th BaSS Congress

BaSS

Montenegro, Budva



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Invitation **Letter**



Dear colleagues

It is my great honour and pleasure to invite you on behalf of Montenegrin dentists to participate in the 28th congress of the Balkan Stomatological Society, which will be held from April 25 to 27, 2024 in Budva.

We are very happy that we have been given the opportunity to be the organizers of such a huge and important event in our country for the first time and to show our traditional hospitality. The conference venue is the Avala congress hotel, located at the very heart of the

beautiful Mediterranean city of Budva on the coast of the Adriatic Sea, facing the gates of the Old Town.

During the three congress days, you will have the opportunity to hear exceptional speakers who kindly accepted our invitation, as well as participants of the poster presentations. Also, dealers and manufacturers will have a presentation of the cutting edge technology in dental equipment and materials in the exhibition area.

We are looking forward to sharing knowledge while acquiring new information and professional skills in the beautiful Mediterranean ambience, enjoying our national cuisine and experiencing unforgettable moments in the congress halls and out of them.

Sincerely yours,

Prof. Dr. Zoran Vlahović

President of the 28th BaSS Congress

Invitation **Letter**



Dear colleagues,
I am honored to write this letter to invite you to 28th congress of the Balkan Stomatological Society (BaSS) 25th–27th of April in Budva, Montenegro. With the help of this conference, we successfully bring together the Balkan stomatologists to exchange our knowledge and improve friendships. The efficient dental specialists and executives will be giving their best and discussing the dental science and direction of dental technology and how it can be improved in the future. It will

be no less than an absolute pleasure if you will be present at this conference in Montenegro. We will be happy to hear from you and learn about your views and ideas on several problems that we are facing in dentistry. You have a very different approach when it comes to dental matters and hearing from you on the best advancement ideas and their impact on various dental areas will be fruitful, I am sure. We would also like to hear your personal opinion on these particular problems in Montenegro. I believe we will also get a chance to test the beauty of Montenegro. I am sincerely expecting you and looking forward to seeing you in Budva, Montenegro.

Best regards,

Prof. Dr. Ender Kazazoglu

President Elect of Balkan Stomatological Society (BaSS)

Organizing Committee

President of the 28th BaSS Congress Organizing Committee
Assist. Prof. Dr. Mirko Mikic

Vice president of the 28th BaSS Congress Organizing Committee
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Scientific **Committee**

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- Ass. Prof. Zoran Arsic
- Dr sci. Tamara Boskovic Brkanovic

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Assessment of Stem Cell Utilization in Routine Dental Practice

Katerina Zlatanovska, Mihajlo Petrovski, Natasa Longurova, Pavle Apostoloski, Bruno Nikolovski

Faculty of medical sciences, Goce Delcev University, Stip, North Macedonia

Objectives: This research aims to investigate the feasibility of utilizing stem cells in dental medicine within our country.

Materials and methods: A total of 90 dental practitioners from the Republic of North Macedonia participated in this study. They were surveyed regarding their knowledge and awareness of stem cell usage in dentistry, using a questionnaire administered to all respondents.

Results and discussion: Out of all participants, 64.44% exhibited familiarity with stem cells and their potential applications. Most respondents were acquainted with stem cell isolation techniques, with 46.55% being familiar with extraction from dental follicles and 31.03% with extraction from umbilical cord blood serum. Notably, none of the participants indicated that these procedures were unavailable at their dental practices.

Conclusion: While dental practitioners demonstrate awareness of stem cell usage, they often do not inform patients about this treatment option, primarily due to lack of patient education, patient skepticism, and the associated high costs.

Keywords: stem cells, dental stem cells, dental follicle, dental doctors.

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The minimally invasive management of early occlusal caries

Longurova Natasha, Zlatanovska Katerina, Zarkova Atanasova Julija, Kovachevska Ivona
Faculty of Medical Sciences, Goce Delcev University, Stip, North Macedonia

Dental professionals frequently encounter demineralization in the pits and fissures of the chewing surfaces of back teeth due to caries. Identifying these lesions, determining their activity level, and deciding on the best treatment approach present ongoing challenges. Historically, when an active or potentially active lesion was found, it typically led to the creation of a standard cavity in the affected area, often extending beyond the diseased tissue, followed by the placement of a direct filling material.

Contemporary evidence overwhelmingly supports minimally invasive (MI) operative management when required, with a wide range of equipment, materials, and techniques available to preserve maximum healthy tooth tissue. Microinvasive methods for treating uncavitated carious lesions, such as infiltration with low-viscosity composite resins, have gained attention.

The aim of this paper is to evaluate the effects, advantages, and disadvantages of carious lesion infiltration, specifically in the adult population. Relevant literature from online databases such as PubMed and MedLine is reviewed regarding resin infiltration of initial carious lesions as a method of non-invasive restorative treatment.

Resin infiltration, marketed as Icon®, is a novel technology that bridges the gap between prevention and restoration of carious lesions, camouflaging aesthetically disfiguring white lesions on the buccal surface. Encouraging prevention through infiltration not only ensures good oral health but also saves time, money, and reduces patient stress

associated with conventional methods of preparation and restoration. Therefore, recommending and performing caries infiltration with resin in adult patients when indicated can be highly beneficial.

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Mandibular non-epithelial Cyst – a Case Report

Andrej Jovanovski¹, Trajche Jovanovski²

Faculty of Medicine, University of Ljubljana¹, University Medical Centre Ljubljana, Clinical department of Maxillofacial Surgery²

Introduction: Solitary bone cysts (SBCs) are pseudocysts characterized by a cavity lacking epithelium, with trauma-induced intramedullary bleeding being a commonly accepted etiology. Predominantly observed in the mandible, particularly in molar and premolar regions, SBCs are often incidentally discovered radiolucencies on imaging. Here, we present a case of SBC in a 15-year-old patient identified during orthodontic assessment.

Case Report: A 15-year-old patient presented with incidental radiolucency in the mandibular symphysis and left parasymphysis during orthodontic evaluation. Clinical examination revealed no symptoms, except for one non-vital incisor. Imaging depicted a well-defined unilocular radiolucent lesion with scalloped interradiolar growth, indicative of SBC. Surgical intervention involved intraoral vestibular approach, revealing an empty cystic cavity upon osteotomy. Subsequent curettage and suturing resulted in successful treatment. Follow-up imaging showed significant bone healing with minimal residual radiolucency lingual to the mandibular incisors.

Conclusion: This case illustrates the diagnostic and therapeutic approach to SBCs. Through clinical examination, imaging, and surgical intervention, we effectively managed SBC in the mandible. The absence of recurrence during follow-up suggests the efficacy of the treatment strategy. Further research is needed to elucidate underlying mechanisms and refine management protocols for SBCs.

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Abrasion in frontal region and the usage of nonmetal ceramics – Case report

Vesna Jurukovska Shotarovska¹, Saso Jovanovski¹, Vanco Spirov², Borjan Naumovski³, Suzana Tashevska⁴

University “St. Cyril and Methodius” in Skopje, Faculty of Dentistry – Skopje¹, Faculty of Medical Sciences, Goce Delcev–Stip², JZUKC „St. Pantelejmon” – Skopje³, Private Dental Practice Dr. Tashevska⁴

Introduction: Wasting of hard dental substance during normal functions and parafunctions of the teeth is called abrasion. When there is normal function in the mouth, abrasion is equally spread. But during parafunction abrasion is shared stronger. The strongest mastication force in the front can be from 100N to 1000N.

Objectives: The aim is to show how hard food (walnuts, nuts, pistachios etc.) and the bad habits (chewing finger nails) can affect the abrasion in frontal region.