SEA SCIENCE AND SKILLS

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ABSTRACT BOOK

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Poster **Presentation**

OPT was made six months postoperatively and it showed that the bone defect in the affected area healed completely.
Discussion: PRF in combination with bone substitute materials can be utilised for the treatment of bone defects. Sticky bone provides faster and effective bone healing.

PP–74
Treatment of Neglected Mandibular Ameloblastoma: An Interesting Case Report
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Ameloblastoma is a benign but locally aggressive tumor of the odontogenic epithelium of the mandible and maxilla, that represents 1% of all cysts and tumors of the oral and maxillomandibular region. It occurs with equal frequency in both sexes and the mean age of presentation in whites is 40 years. The tumor is most often found in the posterior body and angle of the mandible but can occur anywhere in the mandible or maxilla. Its pathogenesis remains unclear. This case report details a 50–year–old male who presented in our clinic with a painless tumor lasting for about eleven years, involving the entire right mandible. The skin of his face was normal, except for a scar, sequela of odontogenic cellulitis fistula on the right side of the mandible region. Intraorally, there were no remaining teeth on the involving area. The patient had a history of ameloblastoma which had been surgically treated by resection of the ipsilateral coronoid process. Evaluation results showed that the patient should be treated by segmental mandibulectomy, however the patient could not afford extensive surgery, so it was decided to follow a conservative approach such as enucleation, curettage, and marsupialization. Postoperatively, the patient was monitored and checked at weekly intervals in the office for the first month and monthly at the first 3 months. After 3 months, he referred to our clinic with a cervical fracture of condyle. Pathological fractures are likely to happen in these cases. In conclusion, our case highlights that neglected ameloblastomas may become enormous and cause facial deformities that pose considerable problems in management, such as complicated and expensive treatment.

PP–75
Management of Miller̀s Class II Gingival Recession with PRF Membrane and Subepithelial Connective Tissue Graft Combination: a Case Report
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Coronally advanced flap (CAF) with connective tissue graft (CTG) is the technique with the most reproducible results in root coverage (RC) of gingival recessions (GR) Miller's Class I and II. Platelet–rich fibrin (PRF) has been proposed as a replenishment of the healing, because of slow protein release, circulating immune cells, and angiogenesis through the release of fibroblast growth factor, vascular endothelial growth factor, and

platelet–derived growth factor. The purpose of this report was to present a case of Miller's Class II GR treated with subepithelial connective tissue graft (SCTG) and PRF membrane where the potential of PRF to increase gingival thickness and clinical attachment level, and improve soft–tissue healing and clinical appearance was corroborated.
Keywords: Connective tissue graft, gingival recessions, periodontal tissue regeneration, platelet–rich

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PP–76
Middle Third of the Face Pathologies that Affect the Maxillary Sinus
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Introduction: Maxillary sinus is the largest of the paranasal sinuses. The anatomical position in the middle floor of the face as well as the close relationship with the neighboring structures causes it to be affected by many pathologies, which may be of the sinus in its own or of the neighboring structures. Sinus diseases are classified as inflammatory, cystic, tumoral, pseudotumoral, traumatic, and developmental pathologies.
Purpose: To provide a clinical statistical description of the middle third of the face pathologies affecting maxillary sinus.
Material and Method: This is a clinical statistical study of descriptive nature. For the realization of this study, the charts of n = 400 patients (243 males and 157 females) aged 2–78 years, treated in the O.M.F surgery service, with various middle third of the face pathologies, were used .The period of time January 2011–December 2016. The data collected from clinical charts and hospital records of the hospitalized patients were statistically analyzed with SPPS 19 system.
Results: N = 165 or 41.25% of patients treated with middle–third of the face pathologies have affected the maxillary sinus. Inflammatory pathologies appear to be the middle third of the face pathologies that affect more often the maxillary sinus n = 46 cases (11.5%), followed by traumas n = 35 (8.75%) and maxillary cysts n = 31 (7.75%) .
Conclusions: Based on our study ,the maxillary sinus is highly affected by the middle third of the face pathologies.

PP–77
Treatment of Gingival Recession in the Mandibular Incisor Region with Free gingival Grafting: A Case Report
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Aim: In recent years, clinicians and researchers have shown increasing interest in mucogingival surgery to reconstruct soft tissue around teeth and implants. To increase the width of the attached gingiva, free gingival grafting is an excellent procedure. At the same time, root surface augmentation in areas where there is minimal keratinized tissue in the mandibular incisors is one of the indications where free gingival grafts are