Material and Method: A retrospective, longitudinal, observational, single-center study was conducted by reviewing the medical records of 653 patients and 1208 implants.

Results: Patients over 65 accounted for 15.50% (101) patients and 203 implants were placed (16,80%). There were 17 complications (8.62%), 9 (4.56%) corresponded to the suture dehiscence, 3 (1.52%) infections, 2 (1.01%) to fracture or fenestration of the the cortical bone and lost 3 (1.52%) implants. 11 sinus lift (11.82%) were performed and there was piercing the membrane of Schneider in a case. Conclusions: 1-The main complication we can find is suture dehiscence. 2-Most complications were caused by external factors to patients. The 3-Most complications do not involve the failure of the implants. 4- 3 implants were lost, representing 1.47% of the implants.

- Oral Presentation 52

TITLE: Oral care in geriatric patients with reduced mobility

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SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S21.

* doi:10.4317/medoral.17644046 http://dx.doi.org/10.4317/medoral.17644046

Aims: To identify existing barriers regarding oral care of elderly patients who, due to neurodegenerative, musculoskeletal or other conditions, have their mobility decreased, as well as to describe said barriers when treating them, in order to overcome these obstacles and provide them with proper dental care, integrating disabled patients into the healthcare system.

Material and Methods: A bibliographic search was carried out, in both medical, legal and arquitectural journals to draw up some basic recommendations to allow these patients to receive dental treatment.

Results: Dental surgeries must be specifically designed to be able to adapt to the disabled patient's needs, furthermore, their condition should not pose an obstacle to receive any kind of dental care.

Conclusions: The clinician must be aware and prepared to comply with special necessities, which extends also to the design of the dental surgery.

- Oral Presentation 53

TITLE: Therapeutic irrigation of periodontal pockets

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SOURCE: Med Oral Patol Oral Cir Bucal. 2016 December 15;21(Supplement1):S21.

* doi:10.4317/medoral.17644047 http://dx.doi.org/10.4317/medoral.17644047

Introduction: The existing literature is inconsistent regarding whether there is any additional effect of irrigation as an adjunctive to scaling and root planing, and, if there is an effect, what its size is.

Purpose: The aim of this study is to observe the influence of clorhexidine, povidone-iodine and metronidazole in decreasing probing depth compared to control group and to determine which cases will reach probing depths less than or equal to 3 mm.

Methods: Fourty adult patients with generalized chronic periodontitis were enrolled. During scaling and root planing, a subgingival irrigation was performed in four different groups: group I being the control group without any additional irrigation agent; group II with 0,2% clorhexidine digluconate; group III with povidone-iodine; and group IV, with 4% metronidazole.

Results: In the control group a progressive decrease in probing depths was observed. In the chlorhexidine group, the best results were observed at 7 days. In the group of povidone-iodine, the decrease of probing depths was more progressive than the other groups. In the group of metronidazole, the decrease of probing depths was greater during the first week in incisors and canines.

Conclusions: Clorhexidine digluconate adjunctive to mechanical debridement were more effective than the control group showing better results than the other antimicrobial agents employed in the present study.

- Oral Presentation 54

TITLE: Delayed effects of bisphosphonates in dental implants treatment: A case report

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