The patient carried out posterior follow ups showing a positive healing of the bone around the surgical area. Conclusions: radiographic exploration of non erupted third molars is crucial for the early diagnosis of possible pericoronal cystic pathology associated.

- Oral Presentation 62

TITLE: Zygomatic implants rehabilitation for atrophic maxillar age-related

AUTHORS: García Cubero C, Callow Pueyo S, Fernández Cáliz F, Buesa Bárez JM, López-Silva García MJ, Páez Egido V.

Máster en cirugía bucal e implantología. Hospital Virgen de la Paloma. Madrid.

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Objectives: Review the indications, surgical problems, complications and results related to the placement of zygomatic implants in elderly patients and anatomical changes associated with age.

Material and method: A literature review of the literature of the last 10 years consulting sources in medline via pubmed database. Selecting interesting articles that respond to key words: "elder zigomatic implants".

Results: The success of zygomatic implants does not decrease with age, conserving a survival rate above 95%. the negative points of other treatment options are avoided such as donor site morbidity in bone grafts in compromised health patients. However this technique also has risks. The prosthetic part allows functional, aesthetics and soft tissues rehabilitation, in less time for the patient. There are anatomical age-related changes in the maxilla and the zygomatic bone, which affect the placement of these implants.

Conclusions: Zygomatic implants are a recommended but complicated treatment option for the geriatric population in cases of large maxillary atrophy when treatment options by conventional implants are not possible.

- Oral Presentation 63

TITLE: Validity of diagnostic tests of sicca complaints in senile onset primary sjögren's syndrome

AUTHORS: Garnier Rodríguez jJL, Jalil Abumalham Ikbal D, Leco Berrocal I, De dios Cano J, Gutiérrez Sánchez L, Martínez Rodríguez N.

Máster Cirugía Bucal e Implantología. Hospital Virgen de la Paloma. Madrid.

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Primary Sjögren's syndrome (pSS) is a systemic chronic autoinmune disease that is characterized by lynphocytic infiltration of the exocrine glands, which causes dry mucosas, especially mouth and eyes's. SSp prevalence in >70 years patients is 15% and for its diagnosis it's used two main tests: salivary glands scintigraphy (gS) and minor salivary glands biopsy (gB).

Objectives: 1) To report senile onset pSS prevalence in some patients with sicca complaints 2) To describe diagnostic validity of gS and/or gB in sPSS patients 3) To describe affectation patterns in salivary gland scintigraphy.

Patients and Methods: Retrospective observational study of >60 years patients with xerostomia and/or recurrent mayor salivary glands swelling referred for pSS screening in 2006-2012

Results: 57 patients (52 W), mean age 73.3 years + 5.7. Recurrent gland swelling 12.3%; associated comorbidity 75% and with xerostomia causal drugs 42%. Altered scan gS findings: 58% patients, 52% uptake predominantly vs 9% washout and 26% submandibular location. gB was performed in 18 patients: normal 72%; non-specific alterations 21%; focal sialoadenitis 7%. It was diagnosed sPSS in 17 (29.8%), of which just 17.6% had focal sialoadenitis and 23% non-specific alterations. 32% of non-sPSS patients presented non-specific alterations.

Conclusions: 1) 30% patients >60 years with sicca complaint were diagnosed sPSS 2) gS showed salivary function impairment in 58% patients, 3) gS alteration in uptake and submandibular predominance were the most commonly findings in sPSS. 3) 17.6% sPSS patients had focal sialoadenitis and bG was normal in 59%.

- Oral Presentation 64

TITLE: Extraction of a dental implant from the maxillary sinus, migrated during the explantation, in a geriatric patient

AUTHORS: García Moreno S, Gutiérrez Bonet C, Franco Carro B, López-Silva García MJ, Páez Egido V. Máster en Cirugía Bucal e Iimplantología. Hospital Virgen de la Paloma. Madrid.

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