

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

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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 zygomatic 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 posible.

- Oral Presentation 63

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

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Primary Sjögren's syndrome (pSS) is a systemic chronic autoimmune disease that is characterized by lymphocytic 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 gB 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

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Introduction: The migration of dental implant to the maxillary sinus is an increasingly frequent complication in implantology, this occurs at the time of implant placement or at the first subsequent months, but there is also risk of impulsion to the antrum of Highmore of the implant in the process of explantation.

Case Report: A 75 years old woman came to the Oral Surgery and Implantology department at the Hospital Virgen de la Paloma, without any transcendent medical history, presenting symptoms consistent with chronic sinusitis. In the intraoral examination is discovered the presence of an oro-antral fistula on the alveolar ridge at the location of the right first molar. The patient reported that an explant have taken place in the same location a month ago in a dental clinic. In the radiographic examination with CT and panoramic radiograph is seen the presence of a dental implant in the right maxillary sinus, along with a full occupation of it.

Through a Cadwell-Luc approach it was accessed within the maxillary sinus. All granulation tissue and the implant inside was removed, then we proceeded to carry out disinfection of it with profuse irrigation with 0.2% chlorhexidine. Finally the edges of the orasinual fistula were cleaned and the surgical wound was sutured which was removed two weeks later.

Conclusions: There were no intra or postoperative complications. Nowadays, one year after the intervention, a complete sinus health can be seen without the presence of any kind of oro-antral communication.

- Oral Presentation 65

TITLE: Menière's syndrome. A case report

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Introduction: Menière's syndrome is characterized by vertigo, hearing loss, hearing fullness, tinnitus; being the disenchanting factor a endolymphatic edema. The etiology is unknown, it is associated with high salt intake, HSV infection, blocked drainage and in recent years is believed that may have close relationship with the intraosseous pathology of maxilla and mandible. The diagnosis is by exclusion and there is no resolute treatment.

The purpose of this communication is to present a case

in which a clinical examination is carried out to study whether the disenchanting factor of vertigo can be an intraosseous dental pathology.

Clinical Case: Woman 65 years after NMR studies audiometric tests and was diagnosed by an otolaryngologist Sd. Menière 9 years ago. Patient under daily treatment with diuretics and nightly lingual apparatus "Bonnet". The patient presents as constant tinnitus symptoms. Given the possibility that the etiology could be a odontogenic lesion and a clinical examination was performed to study it.

The examination consisted of intra and extraoral exam, radiological tests with panoramic radiography and periapical radiography of the incisors previously endodontized, adding a functional study due to malocclusion of the patient.

The tests were negative, there was no presence of dental pathologies, through radiological tests there were no signs of pathology, whereas in the functional study atypical swallowing was observed malocclusion, negative scan ATM.

Conclusion: In recent years maxillofacial pathology is considered a possible etiologic cause of Menière's syndrome.

- Oral Presentation 66

TITLE: Warthin's tumour: description of a case report

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Introduction: Warthin's tumour (WT) is a benign tumour of the major salivary glands, restricted to the parotid gland.

It is a soft, irregular, slow-growing tumour, generally painless and unlikely to become malignant.

Clinical suspicion is based on test such as ultrasounds, NMRs and FNABs, whereas a definitive diagnosis will be determined with tumour resection accompanied by superficial parotidectomy. The treatment of WTs is surgical, consisting in the full resection of the tumour.

This paper focuses on a case report relative to female patient, including an analysis of the clinical manifestations and diagnostic management of this pathological process.