

**Introduction:** Advancement of technologies in implantology permits rehabilitation of edentulous patients restoring esthetics, function and lost comfort, meanwhile, increasing the quality of life for these patients. One of the factors that are considered during implant placement is the area where the surgery should be done. These areas differ in bone quality and quantity, vascularisation degree, presence of adjacent anatomical features, masticatory forces, inclination degree of teeth, etc. Posterior mandibular areas exhibit difficulties for implant placement caused by the presence of mandibular canal, submandibular fossae, poor vascularisation and high masticatory forces.

**The aim** of this study was to evaluate the succes of implant-prosthetic treatment in posterior mandibular areas after one year of functional loading.

**Materials and methods:** The study was based on the literature data and clinical results of 33 two-stage dental implants inserted in the posterior areas of lower jaw in 9 patients (aged between 39-51 years) applying the standard Branemark protocol. Patients had no general and local health problems that could jeopardise the treatment success. Only short edentulous spans have been included in the study from which 4 were single unit spans. Inserted implants were mainly of 3.75-10 mm and were loaded in conventional terms (>2 months) evaluating further the early success (1-3 years) applying the Albreksson succes criteria. The bone-implant resorbtion was evaluated after 12.2 months using the radiological method proposed by Topalo V. and Mostovei A. Soft tissue status was clinically evaluated through probing and determination inflamatory signs arround implants.

**Results:** During the follow-up period there have been noticed no signs of inflammation in soft tissues. Probing showed a firm gingival attachemnt with no exudate. Patients had no sings of pain, discomfort or tooth mobility. Bone resorption during the flolow-up period was  $0,35\pm 0.05$ mm mesially and  $0.22\pm 0.04$  distally.

**Conclusions:** Despite the poor conditions which limits the surgery field in the lateral mandibular areas with poor vascularization in elder patients, implant-prosthetic treatment in this areas however has a predictable and stable result after one year restoring lost function of the masticatory system.

**Key words:** Implant-prosthetic treatment, Albrekttsson implant-succes criteria, bone resorbtion.

## 314. THE TREATMENT OF CHRONIC MARGINAL PERIODONTITIS BY USING SURGICAL-RECONSTRUCTIVE METHOD WITH ADITION MATERIAL "LITAR"

provided by Institutional Repository in Medical Sciences of Nicolae Testemitanu State University of Medicine and Pharmacy

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**Introduction:**Chronic diseases of the marginal periodontium are the most common disorders of the dento-maxillary system.By the age of 40-50 years, 94-96% of the population are already suffering from this condition.Statistics show that periodontal diseases are 5 times more common after tooth extractions than after caries and its complications.Currently there are two well-defined elements in the etiology and pathogenesis of MCP:1.the level of microbial aggression of the subgingival

plaque, 2. susceptibility of the organism to generate an immune response. The plaque is the central factor in the whole chain of events, starting with a healthy periodontal and ending up with an inflammatory process, with the loss of the teeth.

In recent years periodontal surgery has revolutionized the possibilities of selecting methods, tools, technologies, materials that stimulate the regeneration of periodontal tissues (containing collagen, hydroxyapatite, bioceramic-based materials, bone substitutes...), which outlines the fact that the pathology is sufficiently studied, but still there are many differences in patient examination, lack of methods, universal and effective methods of treatment. This has determined us for the study on the issue.

**The purpose** of the clinical investigations was to argue the implementation of surgical-reconstructive method of treatment by using nanostructural addition material "LitAr" for rehabilitation of patients with chronic marginal periodontitis.

**Materials and methods:** Clinical methods of investigation were performed in order to achieve the tasks. The study was performed in the Odontology, periodontology and oral pathology department within SUMP *Nicolae Testemitanu*, based on data obtained from 14 patients with chronic periodontitis aged 41-60 (9 women and 5 men). All patients were divided into two groups: first - experimental, consisting of 8 people (flap surgery with the use of hydroxyapatite LitAr), and the second - control group, consisting of 6 patients under a traditionally conservative treatment.

**Discussions and results:** The results show that surgical methods of treatment of chronic periodontitis marginal, gives better results (98,3%), obtaining from 2 mm to 6 mm of new-formed bone, depending on the localization of the bone defect, while only an improvement of the condition was observed after a conservative treatment (50%). The effectiveness of the surgical methods can be explained by the fact that through this process are solved simultaneously several problems: suppressing periodontal pockets, plastic bone, reconstruction of functional periodontium and removing infection.

**Conclusions:** According to the algorithm developed in the current study, the complex treatment of MCP provides the desired effect faster than the most widely used methods. An improvement can be obtained by applying a 2-step plan: the first includes conservative therapy, mainly aimed on improving the general condition of patients, the second aim is the liquidation of local lesions, realized by surgical methods combined with using of addition material LitAr.

**Key words:** periodontal disease, chronic marginal periodontitis, addition material, guided tissue regeneration.

## 315. MANAGEMENT OF ANKYLOGLOSSIA

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**Introduction:** Ankyloglossia is a condition that affects 2-5% of newborn. It is caused by the short lingual frenulum or the fusion of the ventral surface of the tongue with the floor of the oral cavity.