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Novel techniques to repair defective labial plate of bone and deficient alveolar ridge

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Immediate implant placement in fresh extraction sockets offers several advantages which include patient comfort, immediate aesthetics; as well as decreased treatment time. The labial plate of bone plays a major key that influences the fate and prognosis of such procedure; other additional factors that involve: tissue biotype, type of implant loading, diameter of implant used, etc. The understanding of the nature of the labial plate of bone and the detection, maintenance, and preservation of the labial plate of bone becomes then valuable, also the ability of the clinician to repair the defective labial plate of bone at surgery or after becomes valuable to the final treatment outcome, this presentation will highlight in details novel techniques of the labial plate of bone at the time of tooth extraction: The use of fitted autogenous bone lumineers and the use of a new socket repair assorted PDLLA kit. These all novel techniques help to simplify the treatment complexity while increasing treatment predictably in order to provide an outstanding clinical outcome.

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Systematic evaluation on the use of acellular dermis matrix graft in prevention Frey syndrome after parotid neoplasm surgery

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Objective: To study the effectiveness and safety of acellular dermal matrix (ADM) graft in preventing Frey syndrome after parotid neoplasm surgery, we reviewed foreign reported clinical randomized controlled trials systematically. Based on this review, we aimed to assess the effectiveness of ADM graft and provide reliable evidence for clinical application.

Methods: We reviewed foreign-language databases, such as MEDLINE, applied meta-analysis with Rev. Man 5 and drew forest plots with odds ratio as effect size.

Results: Three trials were recruited. The morbidity of Frey syndrome in experimental group was significantly lower than that in control on both subjective index and objective index, with odds ratios at 0.03 (95% confidence interval, 0.01Y0.11) and 0.03 (95% confidence interval, 0.01Y0.12), respectively. There was no significant difference between ADM group and blank control in total adverse reactions and complication incidence, whereas results differed for a kind of specific adverse reaction or complication.

Conclusions: Based on existing research data, implanting ADM could effectively prevent Frey syndrome, and its poor prognosis effects did not significantly increase, which suggested that its total safety was reliable. Nevertheless, further investigations about the difference on a specific adverse reaction or complication were still needed.

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