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postmenopausal women with spontaneous vertebral compression (maximum degree) (n = 77). Controls (CG): postmenopausal women with no history of osteoporosis (n = 77). Periodontal examination and a panoramic radiograph to determine the K-MCI was developed. Sample attended to the Virgen del Rocio Hospital (Seville, Spain) and the homogeneity of the same was confirmed by pelvic examination. Statistical method: Chi square test, Pearson test and ANOVA test (post-hoc Bonferroni). Significance p

Results: With the exception of number of teeth (19 MG, 23 CG; p 7, p

Conclusion: No relationship between MG and CG was found related to clinical examination. The degree of osteoporosis can be detected analyzing their panoramic radiograph, using the K-MCI.

Topic: Periodontal systemic interactions

P0088

Periodontal Findings in Haim-Munk Syndrome. Review of the Literature and Report of Two Cases

R.H. Dababneh, A.T. Khouri, A.D. Alshawbkeh, J.S. Kawar, I.F. Oumeish

Amman/Jordan

Aim: Haim-Munk syndrome (HMS) is an extremely rare autosomal recessive disorder similar to Papillion-Lefevre syndrome (PLS). Features that are alike in both PLS and HMS include palmoplantar keratosis and progressive early onset periodontal destruction. There are a number of additional features reported in HMS that include arachnodactyly, acroosteolysis, onychogryphosis, Pes planus, and psoriasiform lesions. Review of the literature with report of two cases will be presented.

Material and Methods: Two cases are presented of generalized advanced periodontal destruction of the permanent and deciduous dentitions in two Jordanian girls with severe HMS who were initially diagnosed as having PLS. The medical diagnosis was made on the basis of the characteristic clinical and radiographic finding.

Results: Periodontal findings include early onset of periodontitis which affected both the primary and permanent dentitions; intense redness and inflammation of the gingiva with rapid periodontal destruction resistant to periodontal therapy.

Conclusion: This report emphasizes the importance of the differential diagnosis of rare genetic disorders in children and adolescence. Additional HMS findings require a multidisciplinary approach involving the dermatologist, rheumatologist and periodontist for the overall care of the patient with HMS. Additional knowledge regarding this rare syndrome with respect to the response to periodontal treatment is lacking.

Topic: Periodontal systemic interactions

P0089

Local inflammatory response of PMN in diabetic patients with periodontitis

S. Sonnenschein, J.M. Herrmann, J. Meyle
Giessen/Germany

Aim: Diabetes mellitus type 2 (DM2) is a worldwide high prevalence disease and recent studies show a bidirectional linkage between DM and periodontitis. Polymorphonuclear neutrophils (PMN) are the primary cells of the innate immune system and the predominant type of leukocytes in gingival crevicular fluid (GCF). The objectives of the study were to develop an in vivo assay for testing individual inflammatory PMN-response and to investigate the kinetics of PMN migration into the gingival crevice of patients with DM2 and chronic periodontitis (DM2+CP) after application of a standardized chemotactic stimulus.

Material and Methods: After IRB approval, 16 individuals participated in this prospective study. Participants received a full periodontal examination and an oral hygiene phase. GCF was sampled minimally invasively (cf. Meyle, 1986) from DM2+CP and healthy controls (C). The anterior teeth of the upper jaw were isolated and gently air-dried. After baseline-washing, either a chemoattractant (2µl casein [2mg/ml]) or a placebo (contralateral tooth), was pipetted into the crevice (PD ≤ 3mm). GCF-sampling continued at 15, 25, 35 and 45 minutes. PMN-counts were calculated employing flow cytometry.

Results: In both groups the number of PMN that migrated into the casein containing crevice was significantly higher compared to the placebo containing crevice (at 15 minutes p<0.01 in DM2+CP and p<0.05 in C; t-test). Furthermore, 15 min after casein application PMN-counts in DM2+CP increased up to 3.7-times compared to C (p<0.01; t-test).

Conclusion: These data suggest an enhanced inflammatory reaction even in healthy sites in patients with DM2+PA compared to C.

Topic: Periodontal systemic interactions

P0090

Body Mass Index as a predictor of preterm birth in pregnant periodontitis women

K. Mega, F. Dragidella, M. Disha, Z. Sllamniku- Dalipi, V. Hoxha
Prishtina, Kosovo/Albania

Aim: The aim of this investigation is to assess the predictability of Body Mass Index (BMI) for preterm birth and low birth weight in women with established periodontal disease.

Material and Methods: Two-hundred parturients were periodontally examined after they gave birth in OB/GYN Department of University Clinical Center of Kosovo. Their BMI was calculated according to the collected data of weight (kg) and height (cm) on their first prenatal visit. Periodontal status was evaluated using probing depth (PD), clinical attachment level (CAL) and bleeding on probing (BoP). Women with established periodontitis were selected if they had two or more sites with PD 4 mm or more, one or more sites with CAL 3 mm or more, and BoP higher than 10%. Obstetrical data were obtained from the delivery records, whereas preterm birth was defined as birth before 37th week of gestation, and low birth weight was defined as birth-weight less than 2500 grams.

Results: Analyzed data were adjusted for BMI and obstetrical outcomes were compared between periodontitis and healthy subjects. It was found that there is significant statistical difference of gestational age (P=0.0046) between periodontitis subjects with normal BMI compared with overweight BMI. Other comparisons of BMI categories for gestational didn't show any statistical difference. There was no significant difference of birth-weight of periodontitis subjects between BMI categories.

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Conclusion: It may be suggested that periodontal health and proper BMI of women who plan to get pregnant may be important to avoid the adverse outcomes of delivery.

Topic: Periodontal systemic interactions

P0091

Non- surgical periodontal treatment of patients with periodontitis decreases high- sensitivity C - reactive protein levels

Z. Sllamniku- Dalipi, H. Mehmeti, F. Dragidella, M. Disha, K. Meqa, G. Begolli

Prishtina, Kosovo/Albania

Aim: Periodontal disease as a chronic infection has been associated with many chronic inflammatory systemic diseases. Recent studies have suggested that periodontitis may induce elevated serum C - reactive protein levels. The aim of this study was to compare high- sensitivity C - reactive protein levels (hs-CRP) in control individuals and patients with periodontal disease and observed whether non- surgical periodontal therapy affected hs- CRP levels after 3 months.

Material and Methods: Serum of 35 healthy controls and 75 patients with periodontal disease admitted in the Department of Periodontology and Oral Medicine, University Clinical Dental Center, Prishtina, Kosovo, were obtained prior to and 3 months after non- surgical periodontal therapy. Periodontal parameters included gingival index Loc- Sillness(0-3), dental plaque index Sillness- Lou(0-3), probing depth (mm), clinical attachment level (mm), bleeding index and tooth mobility index. Serum hs- CRP levels were assessed using Enzyme linked immunoassay. The significance between groups was determined using T-test, χ^2 test and Mann- Whitney test.

Results: Concentrations of hs- CRP were lower in the control group at baseline compared to the periodontal disease group (0.5 ± 0.6 vs. 2.5 ± 2.6). Non -surgical periodontal therapy decrease hs- CRP concentrations observed 3 months after therapy with statistical significance ($p < 0.05$).

Conclusion: Periodontal disease is associated with increased circulating concentrations of hs- CRP which decreased after non-surgical periodontal therapy.

Topic: Periodontal systemic interactions

P0092

Effect of Nonsurgical Periodontal Therapy on Serum and Gingival Crevicular Fluid Cytokine Levels During Pregnancy and Pospartum

T. Fiorini¹, J.M. Rocha¹, P. Weidlich¹, C.H. Cunha Moreira¹, M.L. Musskopf¹, P. Vianna¹, J.A. Bogo Chies¹, C.K. Rösing¹, C. Susin², R.V. Oppermann¹

¹Porto Alegre/Brazil, ²Augusta/United States of America

Aim: Background: A low-grade systemic inflammatory status originated from periodontal infection has been proposed to explain the association between periodontal disease and systemic

conditions including adverse obstetric outcomes. The aim of this study was to evaluate the effect of periodontal therapy during pregnancy on gingival crevicular fluid (GCF) and serum levels of six cytokines associated with periodontal disease and preterm birth

Material and Methods: A subsample of 58 women (18-35 years-old) up to 20 gestational weeks previously enrolled in a larger randomized clinical trial was used. Participants were randomly allocated to receive comprehensive nonsurgical periodontal therapy before 24 gestational weeks (n=28, test group) or only one appointment of supragingival calculus removal (n=30, control group). Clinical data, blood and GCF samples were collected at baseline, 26-28 gestational weeks and 30 days after delivery. IL-1b, IL-6, IL-8, IL-10, IL-12p70 and TNF- α levels were analyzed by flow cytometry.

Results: After treatment, a major reduction in periodontal inflammation was observed in the test group with bleeding on probing decreasing from 49.62% to 11.66% of sites ($p < 0.001$). Periodontal therapy significantly reduced GCF levels of IL-1b and IL-8 ($p < 0.001$). However, no significant effect of periodontal treatment was observed on serum cytokine levels. After delivery, GCF levels of IL-1b in test group were significantly lower than in control group ($p < 0.001$), but there were no significant differences between test and control groups regarding serum cytokine levels

Conclusion: Although periodontal therapy during pregnancy successfully reduced periodontal inflammation and GFC cytokine levels, it did not have a significant impact on serum biomarkers.

Topic: Periodontal systemic interactions

P0093

Gingival Hyperplasia Associated with Juvenile Hyaline Fibromatosis: A case report

I.N. Saygun, M.V. Bal, C.Z. Koyuncuoglu, U.V. Bengi, A. Güven, T.H. Sanal, O. Gunhan

Ankara/Turkey

Aim: Juvenile Hyaline Fibromatosis (JHF) is a rare autosomal dominant systemic disease; characterized by multiple cutaneous hyaline fibromas, papules on the skin, joint contractures and gingival fibromatosis. Less than 80 cases of JHF have been reported, mostly in children. In this text, we describe the clinical manifestations and management of a patient with JHF who presented gingival overgrowth.

Material and Methods: 11-year-old female patient was referred to Gulhane Military Hospital, Department of Periodontology. Skin nodules were palpable on her back, nape and forehead region was seen. Apart from these lesions, a fibroxanthoma was observed on her tibia with its typical appearance on X-ray, CT and MR images. Generalized fibrotic and diffuse gingival enlargement observed in intra-oral examination. Surgical excision of subcutaneous nodules and a full-mouth gingivectomy was made under general anesthesia. These procedures led to a significant improvement of her orofacial appearance, esthetic status and function in her ability to eat and speak. Histopathologic examination of the excised lesions showed hypocellular regions, with abundant, homogenous hyaline deposits. Based on the clinical and histopathological findings, a diagnosis of JHF was made. Maintenance therapy, including oral hygiene instructions and scaling was performed every 3 months to support oral hygiene

bevelled incision and the oral and buccal gingival flaps were united with sutures. The healing was uneventful and during the follow up patients compliance and oral hygiene was superb. The third case is a 23 years old young women with excessive symmetric tuberal fibrosis interfering with her berthing and swelling. The fibrotic tissue was removed with conventional gingivectomy technique but the profound bleeding from the palatal veins needed several mattress sutures to strangulate the veins. Discussion and conclusion : Today the more conservative internal bevelled incision is preferred over the conventional gingivectomy in the most cases because it provides a more predictable healing and better esthetics. The recurrence of the drug related gingival hyperplasia can be anticipated by meticulous postoperative individual oral hygiene and regular supportive therapy.

Material and Methods: Case report: The first case is a very severe antihypertensive drug related gingival overgrowth in a 62 years old man interfering with the closure of his lip corrected with a combination of conventional gingivectomy and internal reverse bevelled incision . The second case is a drug related gingival overgrowth in a young kidney transplant women who took both Cyclosporina-a and Ca-channel blockers. The excessive mass of fibrotic tissue was removed by a series of internal bevelled incision and the oral and buccal gingival flaps were united with sutures. The healing was uneventful and during the follow up patients compliance and oral hygiene was superb. The third case is a 23 years old young women with excessive symmetric tuberal fibrosis interfering with her berthing and swelling. The fibrotic tissue was removed with conventional gingivectomy technique but the profound bleeding from the palatal veins needed several mattress sutures to strangulate the veins.

Results: Discussion Today the more conservative internal bevelled incision is preferred over the conventional gingivectomy in the most cases because it provides a more predictable healing and better esthetics. The recurrence of the drug related gingival hyperplasia can be anticipated by meticulous postoperative individual oral hygiene and regular supportive therapy.

Conclusion: The combined conservative and surgical therapy leads to predictable postoperative result

Topic: Clinical tips and cases: Surgical therapy

P0364

Surgical Treatment of severe chronic localized periodontitis in a 17-year-old subject - case presentation

M. Disha¹, F. Dragidella¹, K. Meqa¹, Z. Sllamniku-Dalipi¹, T. Disha², D. Dragidella¹, S. Disha¹

¹Prishtina, Kosovo/Albania, ²Peja Kosovo/Albania

Aim: Localized chronic periodontitis is a disease of the tooth supporting tissues characterized with the presence of the periodontal pockets, increased mobility and pathological migration. The increase of the mobility occurs due to bone loss over longer period of time, with unfavorable prognosis.

Material and Methods: Patient AB, age 17, was treated with antibiotics for inflammatory changes in teeth 11 and 21. The mobility score for tooth 21 was 2 and for tooth 11 was 1, according to Miller's mobility index. After recovery to the chronic stage, modified Widman's flap surgery of this region was performed in the affected region in order to remove the pathological changes.

Results: The postsurgical period showed improvement of periodontal health, including the gingival appearance and tooth mobility. The probing depth has reduced, while the crown height has increased as a result of gingival recession with preserved symmetry in both teeth.

Conclusion: Surgical treatment of the periodontal disease in cases of early onset during adolescence may serve as a beneficial strategy on disease progression slack, as subjects of this age timely become aware of the disease and tend to give more effort on further preventive measures.

Topic: Clinical tips and cases: Surgical therapy

P0365

Hereditary Gingival Fibromatosis - a case report

H.G. Pinto, A.R. Tavares, H. Rebelo

Lisboa/Portugal

Aim: Introduction: Hereditary gingival fibromatosis (HGF) is a rare disease characterized by progressive augmentation of the gingival tissue, with varying degrees of severity. It can occur as an isolated entity or associated with various syndromes and transmission generally adopts an autosomal dominant pattern. This clinical poster aims to discuss the diagnosis and treatment of gingival overgrowth in a young boy due to HGF.

Material and Methods: Case report: A 15-year-old boy was referred due to general overgrowth of gingival tissue. The oral examination revealed the presence of partially covered permanent teeth, retention of deciduous teeth, widespread diastema and malpositioned teeth. Radiographic examination excluded agenesis and confirmed retention of two permanent teeth. Among the family members, the father and a younger brother showed manifestations of the same condition. The treatment consisted on plaque control and surgery with reverse bevel flap incisions, full thickness flaps, osteoplasty and apically positioned flaps in the upper jaw and mandible. The postoperative course was uneventful. Histological examination confirmed the widespread increase of collagen fibers. Follow-up appointments after 6 and 12 months showed no recurrence. The patient was referred to orthodontic treatment.

Results: Discussion: The diagnosis of HGF in this case was done due to the clinical manifestations of gingival overgrowth together with the family history, as described in the literature. The resective treatment was successful through 12 months follow-up and the orthodontic treatment should solve other esthetical and functional complaints.

Conclusion: The diagnosis of HGF and its treatment at an early age can improve patients' quality of life.

Topic: Clinical tips and cases: Surgical therapy

P0366

Successful treatment of a radicular Groove: an endo-perio treatment – a case report

A. Keles, A. Eltas

Malatya/Turkey

Aim: To present the successful endodontic and periodontal

Dr. Gernot Wimmer, Chairman of EuroPerio 7

CERTIFYS:

That the abstract *"Body Mass Index as a predictor of preterm birth in pregnant periodontitis women"* by K. Mega, F. Dragidella, M. Disha, Z. Sllamniku- Dalipi and V. Hoxha has been presented as **Periodontal systemic interactions poster** at EuroPerio 7, 7^o Congress of the European Federation of Periodontology scheduled in Vienna the 6, 7, 8 and 9 June 2012.

Vienna, 11th June 2012



Dr. Gernot Wimmer

Chairman EuroPerio 7- Vienna 2012