degree and duration of the dystrophic process. To evaluate the morphology of the inferior cortex in panoramic radiographs according to the classification of Klemetti.

Aim of the study. Evaluation of radiological image of maxillary bone morphology in patients with osteoporosis.

Materials and methods.. Study of a group of 32 patients with osteoporosis treated in the "Omni Dent" dental clinic. The age of the patients - from 18 to 71 years. Evaluation of radiographic indices of osteopenia/osteoporosis according to Klemetti, based on radiological examination on OPG and CT 3D correlated with DEXA. The information from OPG and CT 3D was processed on the available equipment software (Sirona Sidexis 4.0). Were analyzed the following radiological aspects of maxillary bone: the appearance of glomerular picture where it was not; thinning of the cortical layer; expansion of the medullar space; spongiosis of the cortical layer; emphasized contours of the bone in severe osteoporosis.

Results. Patients were divided into 3 study groups by age: group I (35-44); group II (45-54); group III (\geq 55 years of age). We have observed a dependence between the age group and the radiological changes of the bone microarchitecture. This phenomenon is confirmed by a strong direct correlation between the age and the degree of osteoporosis (rxy=0.676, p <0.001). By comparing the OPG data with the osteodensitometric data we determined that the Klemetti method has a rate of 82.5 % statistical accuracy.

Conclusions. The examination using the DEXA, OPG and CT 3D allows establishing an accurate, clear and correct diagnosis, as well as choosing a safe treatment plan acceptable in each clinical case. The obtained result allows us to consider the Klemetti classification as a sufficient method for early diagnosis of suspected osteopenia/osteoporosis, and the obtained information can be used in subsequent prosthetic implant rehabilitation planning.

Key words: maxillary bone, osteoporosis, radiological examination

370. **REGENERATIVE THERAPY USING THE PRP TECHNIQUE IN LOWER** WISDOM TEETH POSTEXTRACTIONAL WOUND REGENERATION

Author: Iulia Bunduchi

Scientific adviser: Motelica Gabriela, PhD, University assistant, Department of Oral and Maxillo-facial Surgery Arsenie Gutan, Nicolae Testemitanu State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction. Regenerative therapy is based on the supply of growth factors and bioactive proteins to the damaged sites in order to restore the integrity and function of the tissues, thus improving the patient's health. Postextractional wound healing and maintaining bone tissue level can be accomplished by postextractional defects augmentation, but a method for stimulating regenerative processes of peridental tissues is the injection of thrombocyte autoplasma immediately postextractional. In the contemporary dental-alveolar surgery, the number of patients requiring complex treatment associated with the eruption pathologies of the third molars has increased significantly. The complications caused by the impacted wisdom teeth are of particular importance for the dentist, both through the clinical and therapeutic problems they raise and by the fact that they occur frequently in young people.

Aim of the study. Determining the effectiveness of the PRP in the regeneration of the postextractional socket of the lower third molar.

Materials and methods.. A prospective clinical study was performed on 22 patients (8 women and 14 men). The mean age of the sample was 22.88 ± 5.263 years (range 19-32 years), which were divided into two study groups. , numerically equal. The patients in the study group were treated by the method of injection with thrombocyte autoplasma immediately after the extraction, and in the control group the postoperative standard care was performed.

Results. There were no significant differences between the sexes (P = 0.54) and the age (P = 0.19) in the two groups. T-Student test performed for the degree of mouth opening (P = 0.007), facial edema (P = 0.019), pain scores (VAS) on the third and seventh day after surgery (DAS) and all these variables showed differences statistically significant.

Conclusions. The use of platelet autoplasma has a positive effect on the healing of hard and soft tissues. Moreover, this seems to facilitate tissue regeneration and lessens the risk of complications following surgery. The benefits of using PRP are: simple, inexpensive technique, the possibility of obtaining a large number of autologous membranes, which helps to recover the tissues in a shorter time. Nowadays, according to the studies carried out by the researchers, platelet-enriched autoplasma is a harmless and promising method, with satisfactory clinical results.

Key words: PRP (platelet-enriched plasma), lower molar 3, regenerative therapy, platelets, growth factors.

371. ALVEOLAR BONE RECONSTRUCTION WITH AUTOGENOUS INTRAORAL GRAFTS IN THE CONTEXT OF POSTTRAUMATIC REHABILITATION

Author: Luminita Bacota

Co-authors: Stanislav Strisca, Dumitru Nuca

Scientific adviser: Sîrbu Dumitru, PhD, Associate professor. Department of Oral and Maxillofacial Surgery and Oral Implantology *Arsenie Gutan, Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova

Background. The rehabilitation in conditions of bone loss supposes a bone augmentation surgery. The optimal choice for this kind of performance is the autogenous grafts harvested from the patients own body especially intraoral sites. Khoury introduced a new method for grafting ridge defects in 2007, using thin cortical plates harvested from the ramus, and in a 'sandwich' type manner, interposed these bone plates with cancellous bone harvested from the same site. The principles involved in successful bone grafts include osteoconduction, osteoinduction, and osteogenesis .Osteogenesis only occurs with autograft tissue and cellular bone matrices therefore.

Case report. 21-year-old female presented for the restoration of her missing dentition in her upper jaw due to an early childhood trauma. CBCT revealed a large horizontal and vertical bony deficiency in the region of the upper anterior teeth , The Khoury technique was decided to aply ,using bone fixation screws, the bone plates that were harvested from the ramus were fixed to the buccal defect ,the space between the plate and the existing palatal bone wall was then filled using a combination of autograft bone scrapings and xenograft bone particles. Six months after the initial surgery, the grafted sites were surgically re-entered and showed a marked increase in ridge dimensions from 4,2 to 9,5 mm. The regeneration of the alveolar crests took place in conventional terms without complications , donor site was fully restored without signs of morbidity. The radiological and clinical examinations 6 moths postoperative