

spreading the information to parents, teachers and the general public to understand the behavior of dogs over the vulnerable persons.

Case report. Patient X, male, 3 years. Diagnosis: Multiple injuries in the head and neck region with tissue defect of 2/3 in the skin part of the head in occipital parietal front with cortical exposure. Treatment: 1. Primary surgical treatment 2. Boring of cortical in the occipital parietal front for stimulating the granulation tissue 3. Revision and extension of the wholes for stimulating the granulation tissue 4. Grafting the granulated wounds of the head with split grafts 5. Excision of skin for grafting 6. Split skin grafts on small granulated zones 7. Excision of skin for grafting 8. Wound dressing 9. Debridement of skin and subcutaneous tissue 10. Treatment in resuscitation / intensive care the evolution of the disease with improvement. No particularities. The patient's condition upon discharge is satisfactory. Internment date: 20th of September 2019 Discharge date: 24th of November 2019

Conclusions. 1. Due to the small stature of the children up to 5 years, most of the injuries resulting from the aggression of the dogs return to the level of the head and neck. The traumatic lesions of the given region represent a surgical emergency due to the localization of organs with vital functions such as the eyes, nose, mouth, ears, etc. but also to the aesthetic aspect of the Maxillofacial region. 2. One of the most effective methods of restoring the massive defects of the scalp after dog bites in children is the exposure of the diploid by multiple trepidation of the scalp. After about 4 weeks the granulation tissue from the holes begins to cover the defect, forming a favorable vascular bed for the skin grafts. 3. Dog bites management should include measures to ensure wound care as close as possible to the accident. These actions should be directed towards identifying and minimizing the risk of infection or other serious complications. Surgical treatment includes general measures of local therapy, as well as anti-infectious prophylaxis. Interdisciplinary collaboration is recommended to ensure the best aesthetic and functional result. 4. Implementing prevention strategies (educating owners and training dogs, monitoring threatening behavior and tackling future safety measures) can be helpful in developing policy that can reduce this type of preventable trauma.

Key words: dog bites, children, head and neck, soft tissue, surgical treatment, infection, prophylaxis, scalp defects, statistics, prevention

DEPARTMENT OF ORTHODONTICS

398. ORTHODONTIC FORCES USED IN PATIENTS WITH PERIODONTAL DISORDERS

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Introduction. Orthodontic treatment of patients with periodontal disease is one of the most difficult tasks in dentistry. In adult patients, the altered periodontal health might result in teeth loss, altered function and compromised aesthetics. Most of these patients present a variety of problems, which include teeth overeruption, migration, traumatic occlusion, irregular interdental spacing, consumed occlusal surfaces, irregular occlusal planes and loss of vertical

dimension. The measures applied must ensure the prophylaxis and interception of periodontal lesions.

Aim of the study. The aim of this study is to evaluate the practical effectiveness of the use of weak and well controlled orthodontic forces.

Materials and methods. For this study were selected 10 patients with many dentomaxillary abnormalities, associated with periodontal aspects. The mean age of the patients was 18 ± 60 years. Patients were selected and are included in the study according to the orthodontic address. Patients underwent orthodontic treatment with modern fixed appliances - polygregated systems pre-fitted with brackets, slot 0.22x0.28. The point of application of the orthodontic force was applied more apically. Some thermo-titanium nickel-titanium springs from the 7th generation, with smaller diameter and cross section, support slot 0.022 were used. Longer use of superelastic springs was also achieved at each stage of treatment.

Results. In 7 patients there was an increase in the periodontal healing level, and in 3 patients there was an increase in the periodontal condition. Post-orthodontic persistence of periodontal inflammation is attributed to non-compliance with oral hygiene, maintaining the cause - bacterial plaque.

Conclusions. Evaluation of the periodontal condition in orthodontic treatment determined clinical variations, depending on the treatment stage, periodontal medication, applied forces, oral hygiene status. In conclusion, a precise calculation of the biomechanics of the orthodontic forces, their points of application, the resistance and the duration of application lead to a favorable result.

Key words: Periodontics, dento-maxillary anomalies, orthodontic forces, complex orthodontic treatment.

399. ANGLE CLASS I MALOCCLUSION. PRINCIPLES OF DIAGNOSIS AND TREATMENT

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Introduction. Nowadays the importance of the smile is being extraordinarily important. The smile influences our mood, self confidence, thoughts and social relationships. Therefore, owners of an aesthetic smile are more prone to smile than those with dento-alveolar disharmonies. Following this aspect, one of the main reasons for the orthodontic treatment is the aesthetical one. Angle class I malocclusions are characterized by dental alignment disharmonies, when skeletal involvement is minor, presenting a normal antero-posterior intermaxillary relationship.

Aim of the study. Etiopathogenic study, correct diagnosis and treatment of Angle class I malocclusion.

Materials and methods.. A study was performed on 12 patients who had different degrees of severity of dento-maxillary crowding. For diagnostical purpose the following investigations were done: panoramic radiography (OPG), cephalometric and model analysis. An individual treatment plan was done for each patient. Two methods of treatment were selected: removable and fixed orthodontic appliances.