Methods and Materials In our clinic the preferred donor sites for the secondary grafting of alveolar clefts defect are: iliac crest, symphysis and mandibular ramus. In the period from 2011-2015, 30 bone grafting procedures were done to 25 patients with lip and palate cleft by the age 15-25. In 8 operations was used iliac crest bone graft, in 14 cases from symphysis and in 6 from mandibular ramus. By our protocol the bone was divided in to cortical mini-plates, the rest was crashed by the bone-cruncher and mixed 1:1 with xenocollagen and hydroxyapatite granules. The grafted bone side was covered with a collagen membrane only in the cases of periosteum deficiency. To evaluate the bone volume CBCT 3-D examination was performed pre-operative and 6 month post-operative .

Results According to CBCT 3-D results the necessary bone volume was present in 25 patients and implants were successfully installed. But in 5 cases after 6 month additional bone grafting was needed, because of the complications: graft exposure -2 patients, oro-nasal fistula -2 patients, insufficient formation of bone -1 patient.

Conclusion. Bone grafts from iliac crest, mandibular ramus and symphysis can be used with success in osteoplasty of alveolar congenital defects. There were no significant difference between this three graft sites, important is the recipient bone place. To gain more relevant conclusion in time the study is continuing.

Key Words cleft lip and palate, secondary bone grafting

326. IMPROVEMENT OF PERIODONTAL STATUS BY ADMINISTRATION OF LACTOBACILLUS REUTERI

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Introduction. Dental caries and periodontitis are the most common infectious diseases in humans. Recently, there has been increasing interest in probiotic control against these oral infections and a number of clinical trials have been conducted to elucidate the possible impact on oral health. The aim of this study was to evaluate the effects of Lactobacillus reuteri-containing probiotic tablets as an adjunct to scaling and root planing.

Materials and methods. Fifty nine chronic periodontitis patients with initial lesions, generally healthy, were recruted and monitored clinically (measures of periodontal pocket depth, clinical attachment level, gingival index, plaque index) and microbiologically (red complex + Aggregatibacter actinomycetemcomitans) at baseline and after 20 days after therapy. All patients received one-stage oral

hygiene session and randomaly devided in two groups: 1st group – at 29 patients was performed scaling and root planing; 2nd group - 30 patients with scaling and root planing + probiotic (1 x 10^8 CFU/day). The tablets were used once a day, in a period of 20 days.

Results.After periodontal therapy, measures indicated significantly reduced clinical and numerical microbiological parameters in scaling and root planing + probiotic.

Conclusions. Oral administration of L. Reuteri could contribute to the beneficial effects of periodontal conditions.

Key-words: probiotics, periodontitis, initial.

POSTERS

327. THE INCIDENCE OF DENTOMAXILAR ANOMALIES IN CHILDRE FROM RURAL ENVIRONMENTS

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Introduction: Anodentomaxilar anomalies are a leading cause for pathologies in the stomatognat system. Because of the frequent manifestation of these pathogens it is important for the oral health of the population to determine their prevalence.

Material and method: The clinical study was carried out on a lot consisting of 144 children between the ages of 7 and 14, in August 2015. These studied at the Primary School no. 1 in the town of Valea Marului, Galati county and were in the mixed dentition period and the begining of the permanent dentition period. For every child there was informed consent from parents/tutors, as well as the consent of the school principal. The parents of the children who were part of the study were assured that the investigation is completely non-invasive. Their oral cavities were inspected for establishing dentar status and examining the occlusion in view of orthodontic clinical diagnostic, a consultation sheet being completed for each child.

Results and discussions: A prevalence of dentomaxilar anomalies of 87.35% was observed in the studied sample. The largest portion is occupied by anomalies of space with crowding (owing, certainly, to precocious loss of the support area through dental cavities and their consequences), the rarest being mandibular protrusion. A greater frequency of unidentar anomalies (which could be clinically diagnosed: regarding shape, position, structure) was observed in comparison with Angle ones. Likewise, many of these were present in children with poor oral hygiene who did not have the possibility of consultation by a stomatologist.

Conclusions: It was considered that the prevalence of dentomaxilar anomalies at school-aged children from the rural environment depends on the socio-economic and environmental conditions from