

(<120 µm). The automated metal carcassing system is more precise than the classic technique, which motivate us to switch to automated dental prostheses.

Key words: SLM, milling, casting

344. SEPTICEMIA AS A COMPLICATION OF DIFFUSE PHLEGMON OF THE MOUTH FLOOR

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Introduction. Despite all the steps made in recent decades in the knowledge of pathogenesis, in improving diagnosis and therapy of septicemia, this disease, regardless of the age at which it occurs, is a complex medical problem. We need a multidisciplinary team to solve it, which besides the infectious disease doctor, microbiologist, biochemist, and radiologist, often requires specialists in intensive surgery and surgeons of various profiles. Bacteriology of septic shock records: Gram-negative germs 50-60%, Gram-positive germs 6-24%.

Aim of the study. The assessment of clinical and paraclinical picture in patients with phlegmon of the mouth floor, complicated with sepsis.

Materials and methods. Analysis of 50 patients who suffered from phlegmon of the mouth floor, who were hospitalized in the Oral and Maxillo-facial Surgery department of IMSP IMU Chisinau between the 2016 and 2017 years. Patients were clinically and paraclinically investigated. Literature analysis of 17 articles, 5 PhD thesis, 3 books.

Results. 6 % of all patients examined with phlegmon of the mouth floor were diagnosed with sepsis. Approximately two patients diagnosed with oral phlegmon and complications of this disease die each year in the Republic of Moldova, which accounts for approximately 7% of all patients with this diagnosis. The untreated septic shock lasts for several hours to 1-2 days, with a fatal outcome in 30-60% of cases. According to M. Baş, septicemia occurs in people with a reasonable defense capacity, which is strong enough to fight, develop a local and general inflammatory process, but insufficient to stop the infection from the beginning. In people with collapsed defense, the clinical picture of septicemia is not developed, the infection leads to septic shock violently.

Conclusions. 1. There is an imbalance between pro-inflammatory vs anti-inflammatory, coagulation vs. anti-coagulation, oxidative vs anti-oxidative, apoptotic vs. anti-apoptotic systems in patients with severe sepsis. 2. Signs and general symptoms of sepsis are fever higher than 38.3 degrees Celsius; hypothermia lower than 36 degrees Celsius; heart rate higher than 90 beats/minute; tachypnea, hyperglycemia 7.7 mmol/l. 3. The cause of over 90% of the deaths of patients with inflammatory processes in the Oral and Maxillo-facial department is the septic shock resulting in polyorganic insufficiency.

Key words: phlegmon, septicemia, oral and maxillo-facial surgery

345. PLATELET-RICH PLASMA UTILIZATION IN DENTAL AND ORAL SURGERY

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Introduction. Indications for the use of platelet-rich plasma (PRP) in modern medicine are expanding every year, thanks to the high success of this technology. This article provides answers to questions: the essence of the method and its safety.

Aim of the study. To analyze the efficacy of using platelet-enriched plasma in surgical treatment (sinus lifting, dental extraction, implantology), as well as in the treatment of the diseases associated to periodontal tissues (gingivitis, periodontitis) of the oral cavity.

Material and methods. In accordance with the proposed purpose and objectives, we analyzed medical records and photographic data base of 20 patients and the sulcus bleeding index (SBI) before and after the treatment, this way we demonstrated the ability of healing and tissues regenerations. The method represents application the injection form of plasma which is obtained from the patients own blood and containing platelets which is accomplished by centrifugation using tubes and the separation gel. They contain growth factors which affect conjunctive, osseous and epithelial tissues and initiate their regeneration also they stimulate the formation and activation of fibroblasts producing collagen, hyaluronic acid and elastin, synthesizing a young tissue that normalizes tissue respiration and balances metabolic processes.

Results. At the end of the study with the two groups of patients, we determined the reduction of the papillary bleeding index (SBI) after the complex treatment of platelet-rich-plasma (PRP) by MeaPlasma method, for the patients who have been treated with an implant treatment and for patients with diseases of periodontal tissues.

Conclusions. Activating all components of natural regeneration processes, platelet-rich plasma represents a convenient and safe biological remedy that accelerates regenerative processes and for improvement of hygienic and periodontal indices, reduction of gingival bleeding, edema, reduction of dental mobility, normalization of gingival shape and color.

Key words: platelet-rich plasma (PRP), platelet , growth factors , injection method , stimulation of regeneration processes

346. EFFECT OF DECOMPRESSION USING CAD/CAM TECHNOLOGY VS. ANALOGUE METHODS FOR PATIENTS WITH VARIOUS JAW CYSTS

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Introduction. Various odontogenic and nonodontogenic cysts can occur either in the upper or lower jaw, these entities are an important chapter of the oral and maxillo-facial pathology. Treatment methods for cystic lesions depends on the size, location, patient age, as well as proximity to vital structures such as teeth, inferior alveolar canal, and maxillary sinus. Radical treatment may be associated with numerous complications, such as facial deformity, missing teeth, infection of bone graft, and numbness if during surgery the nerve is harmed. Conservative treatment, such as decompression is recommended in case of large cysts or when it contains vital structures.

Aim of the study. The aim of this study is to assess the effectiveness of decompression using the CAD/CAM technology in comparison to traditional analogue methods by measuring cystic lesion volume changes using computed tomography.

Materials and methods. This study was axed on 4 patients, 2 of them had undergone traditional decompression for a cystic lesion of the jaw at the Department of Oral and Maxillofacial Surgery, and in 2 cases a CAD/CAM decompression device was fabricated at the SRL. „OMNI DENT”, study was conducted between 2015 and 2017. CT scans were taken in all patients before and after decompression at 3 and 6 months. Each scan was analyzed to evaluate the volume