Possible haemorrhagic, infectious and neurological complications were detected and the presence of possible swelling and trismus was analyzed through objective oral and facial measurements at 3, 7 and 21 days. All the patients underwent antibiotic prophylaxis. Furthermore, the measurement of pain and postoperative discomfort was observed at 1h, 2h, 6h, 12h, 24h, 48h, 72h and at 5 and 7 days using a Visual Analogue Scale as a measurement method. The number of analgesic drugs taken by the patient and the time elapsed after each intake was recorded.

**Results:** In the initial group of 13 patients the facial measurements recorded have registered an average increase of 1,63 mm at 7 days and of 1,32mm after 21 days. It was observed a decrease of mouth opening of 7 mm on average at 7 days , returning to normality within 21 days. Postoperative pain was evaluated moderate at 12h, mild at 3 days, absent at 7 and 21 days. The incidence of hematomata was 20%, and the incidence of edema was 30%, they returned to base line values after 3 days. Alveolitis was evaluated in 10% of cases, no case of hemorrhage was reported. In one case a temporary paraesthesia was observed.

**Conclusion:** The initial results obtained don’t show significative differences with data reported in the literature. In fact, meanwhile a larger patient sample will be available, the study confirms that it’s possible to have a favorable management of postoperative complications and pain using standard surgical and pharmacological procedures aimed at a more conservative and less traumatic approach.

---

**Osteonecrosis of the jaw prevention in oncological patients: preliminary results from a teledentistry sicilian project**

R. Mauceri1,2, V. Panzarella1,2, C. Arena4, G. Troiano4, G. Oteri1, F. Canepa1, O. Di Fede4, G. Campisi4

1Department DiChirOnS, University of Palermo, Palermo, Italy  
2Oral Medicine and Dentistry for patients with special needs, AUOP “P. Giaccone” of Palermo, Palermo, Italy  
3Department BIOMORF, University of Messina, Messina, Italy.  
4Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

**Aim:** Teledentistry (TD) has the potential to identify high-risk populations, facilitate patients’ referrals to a dental consultant and support locally-based treatment, enhancing oral health in the populations, particularly for the prevention and management of uncommon oral diseases such as osteonecrosis of the jaw (ONJ). The aim of this study is to describe our experience by means TD platform, named OloHealth®, particularly dedicated to prevention and management of ONJ in Sicilian oncological patients.

**Methods:** OloHealth was created in 2018 within the University of Palermo, thanks to the PSN project named “Network per la medicina orale nel paziente anziano (oncologico e fragile)”. It is based on a HUB and SPEKE model network; the HUB is our Sector of Oral Medicine (AOUP “P. Giaccone” of Palermo), which is connected to several oncological Sicilian units (SPOKES), in order to carry out teleconsultations regarding the management of patients at risk of ONJ. In details, every SPOKE can upload the patient’s anamnestic data, clinical and radiographical images on the platform. Subsequently, teleconsultation ends up with a HUB’s temporary diagnosis, medical therapy prescription and, if necessary for demanding case, the planning of a visit at the HUB center.

**Results:** The HUB is actually connected with 4 Oncological Units, so dislocated: 2 in the suburbs of Palermo and 2 in different Sicilian western city (i.e. Trapani and Agrigento). In six months, 21 teleconsultations for oncological patients at risks of ONJ have been requested and performed from the HUB, All the teleconsultations are performed within 48 hours from the request by the SPOKES. The 48% (10/21) of enrolled patients were females; the mean age of the study group was of 67±11,4 years. The 43% (9/21) of patients declared to be non-smokers, 19% (4/21) where ex-smokers while 38% (8/21) were smokers. The most frequent cancers were the following: breast (n°7); prostatic (n°7) and lung cancer (N°3). The dental status of enrolled patients was low, the mean of DMFT score was 16,7±8,1. The 91% (19/21) of teleconsultations regarded the primary prevention measures of patients about to initiate ONJ-related treatment for cancer therapy. Mostly of indicated measures were conservative treatments, that have been performed by the patient’s family dentist of their hometown. The remaining 9% (2/21) of teleconsultations regarded suspected ONJ, computed topographies were requested to confirm it and medical therapy has been prescribed. The two patients were subsequently visited and surgically treated at the HUB center.

**Conclusion:** This study is related to an extensive project of the University Hospital of Palermo and several hospitals in Sicily. Due to the reliability exhibited by the process, TD could be equal to a face-to-face oral screening. The use of TD by non-dental practitioner for consultations, referral and disease management has the potential to improve oral health outcomes among the populations; especially for the management of singular diseases such as ONJ.

---

**Globulomaxillary cysts**

D. Menditti4, A.E.di Lauro1, S. Melito1, M. D’Agostino1