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09 and 10, MAY 2014

CHALLENGES & INNOVATION
IN HEALTH

Abstracts

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MAL: INSTRUMENT RATING PARETIC UPPER MEMBER

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Introduction: Stroke is one of the main causes of mortality and morbidity worldwide. In the specific case of Portugal, stroke is still the leading cause of death, being responsible for the high rate of disability and functional dependence of the adult population.

Objective: Analyze the relationship between the side of the brain, the duration of the stroke and the hand-gripping strength with the amount and quality of use of the paretic upper limb.

Methods: We developed a descriptive study with a quantitative approach against non-probabilistic sample. The instruments for collecting data were a socio-demographic survey, the Modified Ashworth Scale, a handgrip dynamometer (dynatest) and MAL-30 Scale.

Results: From our 84 patients sample 66.7% were male, the average age was 66.77 years (SD=11.18). Stroke occurred on average 34.45 months ago ($a=28.96$) and 42.9% have had his dominant hand affected. There was a correlation between the subscales and handgrip strength on the affected side (CCS=0.523, $p=0.000$ for the QL and CCS=0.528, $p=0.000$ for QT). By using the T-Test we concluded that the average value on both scales was different according to whether or not the affected hand is the dominant one.

Conclusions: Based on these results, we believe the MAL-30 is a valid and useful tool for assessing the motor performance of the paretic upper limb of stroke victims.

Descriptors: paretic upper member; Motor activity Log; Rehabilitation.

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DENTAL AND PERIODONTAL COMPLICATIONS ARISING FROM THE USE OF ORAL PIERCINGS – CASES REPORTS

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Introduction: The fear of tooth loss is common between patients, especially when they realize that the loss of the periodontal structures is closely linked to individual aesthetic. Besides the concern for appearance is significant that the missing periodontal structure increases mobility, and tooth hypersensitivity exposure which should encourage patients to seek appropriate treatment. This practice of body art has increased over the years and has been directly related to dental and periodontal injuries.

Objective: These reports describe tree cases in which gingival recession, and dental injuries were caused by oral and peri - oral piercings.

Methods: Tree patients' were evaluated. The clinical evaluation of patient oral health records included periodontal parameters and the presence of tooth injuries.

Results: Clinically where observed in the reporting of these cases an association between the use of oral piercings and dental and gingival trauma. The presence of gingival recession in the anterior lingual mandibular region was associated with the use of piercings, age, male gender and bleeding on probing.

Conclusions: These changes require from the Dentist a detailed clinical evaluation leading to an earlier diagnosis of predictable problems. However, Dentists must be prepared to address their patients' individual needs with the aim of avoiding or intercepting the course of potential complications and removing the causative agent when required. Despite the prognosis be booked there are several areas of dentistry that allow functional restoration and partially or totally aesthetic.

Descriptors: Oral piercing; peri-oral piercing; effects; case report; complications.

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