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30 abstracts presented at the XXV JOCAPE (Jornada Odontológica do CAPE), held on November 28, 2025, at the University of São Paulo.

1. INCLUSIVE DENTAL CARE IN PARAGUAY: PRELIMINARY RESULTS FROM THE MSPYBS CLINICS.

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Introduction: In 2025, the Ministry of Public Health and Social Welfare inaugurated 16 inclusive dental clinics in Paraguay, aiming to ensure equitable access to dental care for people with disabilities (PwD). **Objective**: To describe the characteristics of the population treated in inclusive dental clinics, dental procedures performed, and difficulties reported by professionals when providing care to PwD. **Methods**: A descriptive, quantitative, and cross-sectional study was carried out based on previously validated 6-item questionnaire. The sample included 107 patient records. **Results**: Of the total, 69% were male and 53% were between 3 and 7 years old. The most frequent diagnosis was autism spectrum disorder (63.6%), followed by cerebral palsy (11.1%), trisomy 21 (10.1%), and others (15.2%). The most commonly performed treatments were glass ionomer restorations (33%), prophylaxis (27%), extractions, and oral evaluations (13%). In 78% of the cases, the consultations took place in inclusive clinics, whereas 22% required a surgical setting. The main difficulties reported were negative behavior during the consultation (63%), whereas 33% presented no complications. **Conclusion**: The findings show that inclusive clinics have expanded access to oral health care for PwD in Paraguay, thus highlighting the need to strengthen professional training in behavioral management and communication as well as to optimize human and material resources for consolidation of this inclusive model in public health.

2. DEMOGRAPHIC, DENTAL-CLINICAL PROFILE, AND ORAL HEALTH-RELATED QUALITY OF LIFE OF CARDIO-ONCOLOGY PATIENTS

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Objective: To identify the demographic and dental-clinical profile as well as the oral health-related quality of life of patients treated at the Cardio-Oncology Department of the Heart Institute of *HCFMUSP*. **Methods**: This study was approved by the local research ethics committee under CAAE number 82456624.1.0000.0068. Patients with a history of cancer and cardiovascular disease were included. The instruments used were: Oral Health Impact Profile (OHIP-14), Decayed, Missing, and Filled Teeth Index (DMFT), Simplified Oral Hygiene Index (OHI-S), Community Periodontal Index (CPI), and an oral health profile questionnaire. **Results**: Thirty patients were consecutively evaluated, with a predominance of males, mean age of 66 years, and low educational levels. Heart failure (66.7%) was the most prevalent cardiovascular disease, breast cancer (26.7%) was the most common oncological diagnosis, and chemotherapy (26.7%) was the most frequent oncological treatment. The mean DMFT index was 24.2, OHI-S was 1.8, and CPI was 2.7. Oral hygiene was classified as unsatisfactory in 71% of the patients, with oral health-related quality of life having a low impact on the overall quality of life across all seven domains. **Conclusion**: The study population consisted of elderly individuals with low educational levels, predominantly diagnosed with breast cancer and heart failure. Despite their unsatisfactory oral conditions based on the evaluated indices, oral health-related quality of life had a low impact on the patients' daily lives.

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3. RADIOMORPHOMETRIC INDICES AND FRACTAL DIMENSION IN SICKLE-CELL DISEASE: A SYSTEMATIC REVIEW

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Introduction: Sickle-cell disease (SCD) is a prevalent hereditary haemoglobinopathy associated with systemic and orofacial manifestations, in which radiographic analysis through radiomorphometric indices (RMI) and fractal dimension analysis (FDA) is a useful alternative for assessing bone mineral density loss, although a consolidated synthesis of these findings is still lacking. **Objective**: To investigate the association between SCD and reduced bone mineral density (BMD) by using RMI and FDA on dental radiographic images through a systematic review. **Methods**: Observational studies evaluating BMD in individuals with SCD by using RMI or FDA were included. A comprehensive search was conducted across six databases and grey literature in March 2025. Risk of bias was assessed by using the Joanna Briggs Institute Critical Appraisal Tool for cross-sectional studies, and certainty of evidence was evaluated with the GRADE approach. **Results**: Five cross-sectional studies published between 2008 and 2024, conducted in Turkey and Brazil respectively, were included. A total of 199 individuals with SCD were evaluated, with variation in SCD genotype. The RMIs assessed were mandibular cortical index, cortical width, panoramic mandibular index (PMI), and mental index, whereas FDA was applied to three studies. All studies showed a risk of bias above 25%, indicating low methodological quality. **Conclusion**: PMI and FDA are among the most used methods for assessing BMD changes in SCD patients. However, methodological heterogeneity and high risk of bias limit the reliability and consistency of the findings, thus resulting in very low certainty of evidence.

4. SALIVARY IgA IN CEREBRAL PALSY INDIVIDUALS WITH CHRONIC PERIODONTAL INFLAMMATION

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Introduction: Gingival inflammation is commonly observed in individuals with cerebral palsy (CP). Secretory immunoglobulin A (IgA), produced by the salivary glands, represents the main effector function of the mucosal immune system. Elevated IgA levels are associated with immune system activation in response to chronic periodontal inflammation. **Objective**: This study aimed to evaluate salivary IgA levels associated with chronic periodontal inflammation in individuals with and without spastic CP. **Methods**: Twenty-nine participants with CP were included and grouped according to their clinical subtypes: G1- hemiplegic (n=3), G2- diplegic (n=14), and G3 - tetraplegic (n=12). Ten individuals without CP served as control group (G4), matched for gender and age. Unstimulated whole saliva was collected for IgA quantification by using ELISA. Statistical analysis was performed with Student's t-test and ANOVA at a 5% significance level. **Results**: Salivary IgA concentration was 2.28 times higher in the CP group (11.93±6.7) compared to controls (5.21±2.66; $p<0.05$). With regard to clinical subtypes, the diplegic group (G2) showed significantly higher salivary IgA levels (12.29±7.82) compared to controls (G4) (5.21±2.66). No significant differences were observed in the other clinical subtypes. **Conclusion**: Higher salivary IgA concentrations in individuals with diplegic CP may suggest an amplified humoral immune response, thus reinforcing the need for tailored strategies to control inflammation and biofilm in this population.

5. SIMULATION SCENARIO IN DENTISTRY: AN EXPERIENCE REPORT

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Introduction: High-fidelity realistic simulation is emerging as a robust pedagogical tool for promoting education, assessment, and interaction in scenarios that reflect the complexity of professional practice. **Objectives**: This study proposes a system based on clinical simulations and case discussions to enable dentistry students to develop effective reasoning and action in diverse situations in their future practice. **Methods**: A scenario was developed and implemented for sixth-semester students, in which home dental care was developed for a patient diagnosed with Alzheimer's disease who was uncooperative and non-communicative. In this context, two students played the roles of dentists responsible for the initial home visit. The

scenario was designed to foster technical and behavioral skills, such as interpersonal communication, empathy, and decision-making, in contexts similar to those encountered in professional practice. **Results**: The application of this methodology demonstrated that, in addition to technical knowledge, students need to develop resilience and communication skills to adequately manage complex situations in professional practice. **Conclusion**: The use of realistic simulation reinforced the learning process by immersing students in experiences analogous to those of reality, thus significantly contributing to academic education in the context of integration of patient safety. This study highlights the importance of progressively and systematically implementing this methodology in the academic curriculum of undergraduate dentistry programs.

6. EVALUATION OF THE STYLOID PROCESS ON PANORAMIC RADIOGRAPHS OF PATIENTS WITH CHRONIC KIDNEY DISEASE

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Introduction: Chronic kidney disease (CKD) is frequently associated with mineral and bone disorders (CKD-MBD), which may lead to extraosseous calcifications. However, calcification of the stylohyoid complex has not been systematically investigated in this population. **Objective**: To determine the prevalence as well as the elongation and calcification patterns of styloid process (SP) in patients with CKD and to evaluate their potential association with cardiovascular and cerebrovascular events. **Methods**: A multicenter cross-sectional study was conducted with 229 patients with CKD (stages 3–5) and 242 controls matched for age and gender. Panoramic radiographs were assessed for SP length and classified according to Langlais' criteria. Statistical analyses included Chi-square test, Mann–Whitney test, Poisson regression with robust variance, and multinomial and logistic regression models adjusted for age and gender. **Results**: SP elongation was significantly more prevalent in CKD patients compared to controls (67.0% vs. 43.0%, $p<0.001$). Partial calcification pattern predominated in CKD patients, whereas contour type was more frequent in controls. In CKD patients, more advanced stages showed a trend toward higher prevalence of elongation and calcification, although without statistical significance in the overall analysis. **Conclusions**: CKD patients exhibit higher prevalence and distinct patterns of SP calcification, likely reflecting underlying CKD-MBD. However, further longitudinal studies are warranted. **Acknowledgements**: *FAPESP* and *CNPq* according to CAAE numbers 65758022.5.0000.0068 and 65758022.5.3001.0075, respectively.

7. ORAL HEALTH AND BEHAVIORAL PROFILES OF CHILDREN WITH AUTISM SPECTRUM DISORDER: A RETROSPECTIVE STUDY

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CAPE/FOUSP

Introduction: The increasing prevalence of autism spectrum disorder (ASD) has brought increasing challenges to dental care. **Objective**: Understanding the clinical and behavioral profile of these patients is important to ensure treatment adherence. **Methods**: This retrospective study analysed the records of ASD patients treated at CAPE-FOUSP between 2024 and September 2025, being approved by the local human research ethics committee under protocol number 7615082. **Results**: A total of 34 records were analysed, with 76.5% being male (26/34) and mean age of 6 years old. The mean age at ASD diagnosis was 3 years old, with 43% of the patients (10/23) being at support level III, 97% (32/33) being inattentive, 91% (30/33) having a sensory processing disorder, 53% (18/34) taking antipsychotic medication, and 82% (27/33) having some eating disorder. At the first dental visit, 78.5% (22/28) presented with mixed dentition, 67% (22/33) exhibited bruxism, 53.3% (16/30) had good or excellent oral hygiene, 36.7% (11/30) had regular hygiene, and 10% (3/30) had poor hygiene. Among the patients evaluated, 51.85% (14/27) had at least one carious lesion and 36.6% (11/30) had gingivitis. Overall, 82.35% (28/34) received dental treatment. Of the 28 patients treated, eight records lacked information on cooperation, 18 showed resistance to treatment, and only 10% (2/20) fully cooperated during dental visits. **Conclusion**: These findings highlight the high prevalence of behavioral and oral health challenges in ASD patients, thus reinforcing the need for individualized strategies to improve cooperation and ensure effective dental care.

8. DOES THE NEED FOR TOOTH EXTRACTION AFFECT ORAL HEALTH-RELATED QUALITY OF LIFE IN LIVER CIRRHOSIS PATIENTS AWAITING TRANSPLANT?

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Introduction: Oral health can influence the quality of life in liver cirrhosis patients awaiting transplantation and should be evaluated to guide dental and multidisciplinary care. **Objective**: To assess the oral health-related quality of life (OHRQoL) in cirrhotic transplant candidates and whether the need for tooth extraction affects it. **Methods**: Cross-sectional study conducted at the Clinics Hospital of the University of São Paulo School of Medicine, Brazil, with 267 participants divided into three groups: SG1 (cirrhotic patients needing tooth extraction), SG2 (cirrhotic patients needing no tooth extraction), and CG (controls without cirrhosis). OHRQoL was assessed by using the OHIP-14 questionnaire and analysed according to seven dimensions under a three-factor model. Exploratory factor analysis and Cronbach's alpha evaluated internal consistency, whereas Kruskal-Wallis, Mann-Whitney, and Dwass-Steel-Critchlow-Fligner *post hoc* tests were used for inter-group comparisons. **Results**: Factor analysis confirmed the three-factor model (KMO = 0.888) with satisfactory internal consistency (Cronbach's $\alpha > 0.70$). Cirrhotic patients showed significantly poorer OHRQoL than controls regarding all OHIP-14 factors ($P < 0.001$), mainly in psychological and physical domains. No significant difference emerged between SG1 and SG2, although the former showed worse scores for physical pain and social disability. **Conclusion**: Liver cirrhosis patients awaiting transplantation have their OHRQoL moderately impaired, particularly in psychological and physical dimensions, whereas the need for tooth extraction does not significantly affect their overall perception.

9. ORAL HEALTH AND SALIVARY INFLAMMATORY CYTOKINES IN ADOLESCENTS AND CHILDREN WITH ACUTE LYMPHOBLASTIC LEUKEMIA UNDER CHEMOTHERAPY

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Objective: The aim of this study was to evaluate the oral health of children and adolescents with acute lymphoblastic leukemia (ALL) undergoing chemotherapy and explore the profile of selected salivary inflammatory mediators in comparison to healthy controls. The experimental group (EG) consisted of patients aged 2–17 years, who were subdivided into outpatients (EG1) and inpatients (EG2), whereas the control group (CG) included healthy controls attending the USP dental school. **Methods**: Two calibrated examiners collected demographic and clinical data, including ICDAS, periodontal indices, and soft tissue conditions. Saliva samples were analysed for TNF-α, IL-4, IL-6, IL-8, IL-10, and IFN-γ. **Results**: Caries prevalence was similar between the groups, although advanced lesions were more common in CG. Gingival bleeding affected approximately one quarter of the participants in both groups, and grade 2 mucositis was observed only in three inpatients. Cytokine levels did not differ significantly between EG1 and CG, whereas ICDAS 1-2 scores correlated positively with IFN-γ and IL-8 in EG1. Combined-group analysis identified an association between gingival bleeding and IL-8. **Conclusion**: Overall, children with ALL under chemotherapy showed satisfactory oral health. Elevated levels of IL-8 and IFN-γ in adolescents and children with incipient caries may reflect early dysbiosis. Opportunistic lesions were not detected and the frequency of mucositis was low, likely influenced by the study's selection criteria. The Research Ethics Committee approved the present study according to protocol numbers 5278459 and 5447771. **Funding**: CNPq.

10. PROFILE OF DENTAL CARE FOR PEOPLE WITH DISABILITIES IN A SUS-MG HOSPITAL: A TEMPORAL ANALYSIS FROM 2013–2023

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Introduction: Dental care for people with disabilities in the Brazil's Unified Health System (SUS) is legally guaranteed, but its effective implementation requires continuous monitoring. **Objective**: To analyse the profile of hospital-based dental care provided to 711 people with disabilities. **Methods**: Patient records from a reference hospital serving 53 municipalities were examined from

2013 to 2023. **Results**: Temporal trends reflected the influence of funding policies, with marked declines during the COVID-19 pandemic, mainly in the 2018–2019 period due to the suspension of financial incentives. The highest number of procedures occurred in 2022, likely driven by accumulated demand. Males accounted for 58.9% of the cases, with intellectual disability being the most prevalent (51%), followed by mental/psychiatric and physical disabilities. Most treatments were concentrated in the micro-region of Poços de Caldas, thus indicating regional inequalities. The mean age was 21.3 years. Tooth extractions represented 80% of all procedures, followed by restorations, whereas endodontic and periodontal treatments were less frequently performed. The low correlation between procedures suggests predominance of single interventions, possibly reflecting clinical complexity and behavioral management challenges. **Conclusion**: The findings highlighted the need for ongoing planning and showed improved coordination between managers and clinicians, including expansion of specialized services to strengthen hospital-based dental care for people with disabilities. This study was approved by the Research Ethics Committee of PUC-MG under CAAE number 85856924.6.0000.5137.

11. ASSOCIATION BETWEEN FAMILY BURDEN AND ORAL HEALTH CONDITIONS IN CHILDREN AND ADOLESCENTS WITH DISABILITIES.

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Introduction: The time and dedication required to care for people with disabilities (PWDs) can result in increased fatigue, psychological exhaustion, and loneliness among caregivers. This scenario can impact the oral care for these individuals by reducing it. **Objective**: To verify the association between family burden and oral health in children and adolescents with disabilities in Lagarto, state of Sergipe, Brazil. **Methods**: This is a cross-sectional study with a sample of 61 PWDs aged 3 to 18 years, all accompanied by their caregivers. A socioeconomic and demographic questionnaire and the Pediatric Quality of Life Inventory, Family module, were applied to the caregivers. An intraoral examination was performed on the PWDs to identify the presence of oral health problems. **Results**: The majority (60.7%) of the PWDs had a diagnosis of autism. The most prevalent oral health conditions were caries (77%) and gingival bleeding (57.4%). Families with children presenting oral lesions had worse family relationship scores (PR 1.47; 95% CI: 1.16–1.87). Single caregivers experienced a negative impact on communication (PR 1.94; 95% CI 1.39–2.70), and those without their own home showed negative impact on emotional well-being (PR 1.61; 95% CI 1.26–2.06) and concern (PR 1.87; 95% CI 1.24–2.83). **Conclusions**: Families of people with disabilities experienced a negative impact, mainly in terms of concern, communication, and family relationships. Thus, it is believed that actions aimed at people with disabilities also need to focus on caregivers, addressing not only their physical health, but also their psychosocial well-being.

12. EFFECTIVENESS OF TELEDENTISTRY IN THE DENTAL CARE OF CHILDREN WITH ASD: A PILOT STUDY

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CAPE-FOUSP

Introduction: Autism spectrum disorder (ASD) is a neurodevelopmental disorder with communication deficits, repetitive behaviours and sensory hypersensitivity, making dental care challenging. **Objective**: This study evaluates whether a prior virtual approach reduces anxiety, increases adherence, and improves collaboration. **Methods**: 38 children with ASD (31 boys, 7 girls; mean age of 7 years) were randomized into two groups: Experimental Group (EG, n=19; with anticipatory videos and teleconsultations before the appointment) and Control Group (CG, n=19; in-person appointment only). **Results**: The mean numbers of sessions until achieving collaboration were 2.12 in EG and 2.7 in CG. In EG, four children collaborated in the first session, one in the second, one in the third, and two in the fourth, whereas three required protective stabilization and five were absent. In CG, four children collaborated in the first session, three in the second, one in the fourth, one in the sixth, and one in the seventh, whereas five were absent and four required protective stabilization. The overall mean values of dmft and DMFT were, respectively, 3.63 (moderate, i.e. above the national 2.43) and 0.18 (very low, i.e. below 2.07). Caregiver anxiety scored mean values of 8.27 (EG) and 6.92 (CG), both classified as mildly anxious. When comparing VBRS scores between the groups, the Mann-Whitney test indicated

no statistically significant difference (p=0.467). **Conclusions**: Preliminary results showed no differences between groups regarding caregiver anxiety, adherence, or collaboration. This study was supported by CAPES and approved by the local research ethics committee according to protocol number 6555044.

13. TEACHING–SERVICE INTEGRATION IN DENTAL EDUCATION: FOUSP EXPERIENCE AT THE DARCY VARGAS CHILDREN'S HOSPITAL

Vanessa Novais Soares Silva, Isabelle Elise Squillace Mendes, Milca Morgado Sobreira do Carmo, Bianca Novais Soares Silva, Beatriz Rosa dos Santos Silva, Rafaela de Oliveira Queiroz, Marilia Andrade Figueiredo*
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Introduction: Dental education requires practical training within complex settings (e.g. dental hospital), especially in dentistry for patients with special needs (DPSN). Teaching-service integration enhances learning while expanding care for vulnerable patients. **Objective**: To report a supervised internship experience of undergraduate and graduate students from the University of São Paulo School of Dentistry (*FOUSP*) at the Darcy Vargas Children's Hospital. **Methods**: Activities occurred on Tuesdays and Wednesdays, from 8 a.m. to 12 p.m., with six undergraduates selected from the DPSN and Hospital Dentistry leagues and three graduate students as tutors. Patients were treated by two undergraduates under graduate and faculty supervision. Demographic, diagnostic, and procedure data were recorded. **Results**: A total of 87 appointments involving 74 patients were documented. Females represented 57%, and the main age group was 6–12 years (69%). Frequent diagnoses included Down syndrome (n=7) and autism spectrum disorder (n=5). The most common procedures were prophylaxis, oral hygiene instruction and topical fluoride (n=33), followed by tooth extractions (n=8) and clinical evaluations (n=7). At the end of each shift, debriefings and mini-lectures reinforced the knowledge of syndromes and systemic conditions, thus improving reasoning accuracy. **Conclusion**: This internship allowed integrating undergraduates, graduate tutors, faculty, and public dentists as it provided undergraduates with direct SUS experience, graduates with teaching practice, and faculty with opportunities to consolidate learning, all these strengthening dental education at multiple levels.

14. TEACHING–SERVICE INTEGRATION IN HOSPITAL DENTISTRY: FOUSP EXPERIENCE AT THE DARCY VARGAS CHILDREN'S HOSPITAL.

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Darcy Vargas Hospital

Introduction: Training in hospital dentistry and dentistry for patients with special needs (DPSN) demands practical experience in high-complexity environments. Teaching-service integration strengthens education and expands specialized care within the Brazilian Unified Health System (SUS). **Objective**: To describe a supervised internship experience of FOUSP students at the Darcy Vargas Children's Hospital, focusing on the Wednesday group's clinical activities. **Methods**: Weekly activities (from 8 a.m. to 12 p.m.) involved six undergraduate students selected from the DPSN and Hospital Dentistry leagues and three graduate tutors. Patients were treated by two undergraduates under graduate and faculty supervision. Graduate students recorded non-identifiable data such as age, gender, diagnosis, and procedures for analysis. **Results**: Sixty appointments were documented, showing that 53% of the patients were male and 47% were female, with age ranging from 2 to 18 years (mean age = 10.6). Common conditions included atopic dermatitis (n=7), Down syndrome (n=6), asthma (n=4), autism spectrum disorder (n=4), cardiopathies (n=4), sickle-cell anemia (n=3), and leukemia (n=3). The most frequent procedures were atraumatic restorative treatment (n=30), topical fluoride (n=20), prophylaxis (n=16), clinical exams (n=10), and tooth extractions (n=9). Each session ended with case discussions and mini-lectures, linking theory and practice. **Conclusion**: The internship fostered the undergraduates' clinical competence and their humanized care for syndromic and systemically compromised patients, thus promoting safe treatment, applied learning, and improvement of hospitalized children's oral health.

15. RESIN INFILTRANT TREATMENT OF ENAMEL DEFECTS IN A PATIENT WITH CEREBRAL PALSY: A CASE REPORT

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Introduction: Minimally invasive strategies for patients with disabilities require further investigation, particularly regarding their impact on the quality of life of both patients and caregivers. This case aimed to describe a minimally invasive treatment using a resin infiltrant for developmental defects of enamel (DDE) in a patient with cerebral palsy and to report the caregiver's satisfaction after treatment. **Case Report:** A 10-year-old male patient underwent clinical evaluation, which revealed DDE consistent with molar-incisor hypomineralization and fluorosis. Lesion depth was assessed by using transillumination before treatment. With emphasis on tooth structure preservation and esthetic improvement, a minimally invasive approach using a resin infiltrant (Icon®) was chosen, following a protocol of micro-abrasion, acid etching, ethanol desiccation, resin infiltration under artificial light protection, and light-curing. The procedure resulted in immediate esthetic improvement and lesion stabilization. The caregiver's perception of quality-of-life improvement was assessed through a qualitative interview with the patient's mother after treatment, aiming to identify subjective and family impacts. The outcomes included enhanced esthetics, successful masking of DDE, and a positive caregiver report. **Complementary tests**: None. **Final consideration**: This case report highlights the relevance of minimally invasive dentistry as an effective and conservative strategy for patients with disabilities, thus providing functional, esthetic, and psychosocial benefits for both patient and family.

16. MANDIBULAR BONE LESION: THE ROLE OF PANORAMIC RADIOGRAPHY AND ACCURATE DIAGNOSIS

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Introduction: Panoramic radiography is essential in dental practice as a complementary tool for assessing dentoalveolar and maxillofacial structures and detecting bone alterations. **Case Report**: A 24-year-old male (L.T.C.C.), with no comorbidities, sought consultation for third molar extraction. **Complementary tests**: Given the surgical indication, a radiograph was obtained, revealing a circumscribed radiopaque lesion with interspersed radiolucent areas and displaying a heterogeneous pattern in the body and ramus of the left mandible. The lesion involved the roots of ipsilateral molars, displaced tooth #38, and was not associated with pain or other symptoms. Following this finding, computed tomography was performed, which confirmed the presence of a lesion in close proximity to the adjacent cortical bone. An incisional biopsy was subsequently carried out, with histopathological analysis confirming the diagnosis of a complex odontoma with vital bone and dentin fragments, thereby supporting preservation and follow-up of the lesion. **Final considerations**: Based on the lesion's characteristics, the treatment plan included extraction of tooth #38 while maintaining preservation of the surrounding structures. Accurate diagnosis represents the cornerstone of appropriate clinical and surgical management, particularly in cases of extensive pathological bone lesions, as it enables better prognosis, minimizes iatrogenic damage, and improves the patient's quality of life. Furthermore, regular follow-up is essential, as it allows for early detection of alterations, timely interventions, and promotion of favorable clinical and functional outcomes.

17. MINERAL BONE DISORDER IN A PATIENT WITH CHRONIC KIDNEY DISEASE: A CASE REPORT WITH 7-YEAR LONGITUDINAL FOLLOW-UP

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CAPE-FOUSP

Introduction: Mineral and bone disorder (MBD) secondary to chronic kidney disease (CKD) is a systemic complication characterized by alterations in calcium, phosphorus, PTH, and vitamin D metabolism. It leads to disturbances in bone remodeling, vascular calcifications, and impairment of skeletal and cardiovascular health. **Case report**: A 50-year-old male patient has been under dental follow-up for seven years, being diagnosed with stage-5 CKD and undergoing hemodialysis. He presents systemic arterial hypertension, type-1 diabetes mellitus, secondary hyperparathyroidism, and

MBD. Throughout the follow-up period, a progressive worsening of mineral and bone metabolism was observed. Radiographic examinations from 2023 revealed vascular calcifications in the head and neck regions compatible with Monckeberg's sclerosis, which became more pronounced in 2025. These findings suggest compromised local vascularization and altered bone remodeling. The patient also experienced early loss of two dental implants, which was attributed to bone instability related to CKD-MBD, likely influenced by chronic hypophosphatemia, elevated PTH levels (1700 pg/ml), and impaired bone remodeling. **Final considerations**: This case highlights the importance of continuous dental monitoring in patients with CKD, especially in view of the oral manifestations of the disease and its systemic complications, which can compromise osseointegration, successful rehabilitative treatments, and patient's prognosis in the face of adverse cardiovascular events. **Financial support**: CAPES.

18. ORAL MANIFESTATIONS IN A CHILD WITH CHRONIC LIVER DISEASE AFTER LIVER TRANSPLANTATION: A CASE REPORT

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Introduction: Children with chronic liver disease frequently exhibit oral manifestations that mirror the severity of their systemic condition. Early detection is crucial to prevent infectious and systemic complications, particularly in candidates for or recipients of liver transplantation. **Case report**: A 2-year-old male, born extremely premature at 25 weeks of gestation, developed chronic liver disease secondary to prolonged pharmacological therapy during neonatal care. After liver transplantation, he was referred for dental evaluation. Clinical findings included dental calculus, gingivitis with spontaneous bleeding, and green discoloration of primary incisors (the only erupted teeth) associated with bilirubin deposits, as well as delayed tooth eruption. Recurrent oral candidiasis was observed, along with cutaneous lesions consistent with molluscum contagiosum related to immunosuppression. Dental management comprised prophylaxis, caregiver-oriented oral hygiene instruction, plaque control, and supragingival scaling. **Final considerations**: This case illustrates the challenges of managing children with extreme prematurity and chronic liver disease, which emphasizes the influence of oral infections on systemic health. Regular dental follow-up is essential for monitoring oral alterations, minimizing complications, and reducing systemic risks. Interdisciplinary collaboration among pediatric dentists, hepatologists, and pediatricians is fundamental for safe and comprehensive care. Written informed consent was obtained from the patient's guardian.

19. DENTAL CARE FOR A PATIENT DIAGNOSED WITH CHURG-STRAUSS SYNDROME: A CASE REPORT

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Introduction: Churg-Strauss syndrome or eosinophilic granulomatosis with polyangiitis is a type of vasculitis and considered a rare systemic disease characterized by the clinical triad of asthma, hypereosinophilia, and necrotizing vasculitis. Lung is the most frequently involved organ, but kidney and heart can be affected, with the latter possibly being compromised by myocarditis, pericarditis, coronary artery disease, and arrhythmias. **Case report**: A 36-year-old Caucasian female patient diagnosed with Churg-Strauss syndrome in childhood presented at the CAPE with the chief complaint of a fractured tooth, mobile teeth, and spontaneous bleeding gums. The patient reported active disease and continued use of corticosteroids, antihypertensives, monoclonal antibodies, in addition to undergoing intensive treatment for asthma control. She also presented renal impairment and cardiac involvement, with moderate mitral valve regurgitation and mild tricuspid valve regurgitation. The patient underwent tooth extractions and then periodontal treatment, which eliminated the gingival bleeding, before being subsequently rehabilitated with endodontics and dental reconstruction with post and crown. **Complementary tests**: imaging exams showed pulmonary nodules, non-obstructive right renal micro calculus, and cerebral ischemic involvement (i.e. encephalomalacia and gliosis). **Final considerations**: understanding the syndrome and the involvement of all organs that may be affected is crucial for safe dental management of the patient.

20. COMPLEX PRE-RADIOTHERAPY PREPARATION IN A PATIENT WITH LIP SQUAMOUS CELL CARCINOMA AFTER RADICAL SURGICAL RESECTION

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Introduction: Squamous cell carcinoma (SCC) of the lip, oral cavity, and oropharynx represents a significant global health issue. In South America, the highest incidence rates are observed in Brazil. This report aims to describe a complex case of oral preparation for radiotherapy following radical surgical resection of SCC in the lower lip, and to demonstrate the importance of dentistry in the management of head and neck cancer patients. **Case report**: A 69-year-old male patient, diagnosed with SCC of the lip (stage T4N1) in May 2025, presented to the Center for Patients with Special Needs (*CAPE*) for pre-radiotherapy preparation five months after surgical intervention. On extraoral examination, microstomia with severe mouth opening limitation (5 mm) was observed. Intraoral findings included multiple infectious foci, poor oral hygiene, severe periodontal disease, caries, and fibrosis in the surgical region. The treatment plan consisted of extraction of all teeth. Management began with physiotherapy by using wooden spatulas to gradually increase mouth opening, resulting in a 10-mm improvement. Multiple extractions were performed in two sessions, including alveolar ridge regularization. **Final considerations**: The dentist plays a crucial role in pre-radiotherapy planning, as adequate oral conditioning can prevent complications and interruptions in systemic treatment. The approach was effective for late-stage oral preparation, and the patient is currently scheduled for radiotherapy. This case illustrates the importance of dentistry in the hospital care of elderly oncology patients by optimizing systemic treatment outcomes. CAAE: 92510925.0.0000.0075

21. COMPLEXITY OF DENTAL MANAGEMENT IN A PATIENT WITH RARE UNIVENTRICULAR CONGENITAL HEART DISEASE

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Introduction: Functionally univentricular heart is an extremely rare congenital condition, with an estimated prevalence of 2.6 *per* 10,000 live births. This case report aims to highlight the importance of dental management in patients with complex congenital heart disease. **Case report**: A 20-year-old female patient, with intellectual disability, hypothyroidism and complex congenital cardiopathies, including right ventricular hypoplasia, presented for dental care at the Center for Patients with Special Needs (*CAPE*). During anamnesis, her mother reported the use of Marevan (warfarin) and Puran (levothyroxine). She also described a late postnatal diagnosis, with cardiac defect corrections initiated at 9 days of life and subsequent surgery at age 3, which consisted of total cavopulmonary connection with an extracardiac conduit to compensate for ventricular function. Intraoral examination revealed multiple infectious foci, including poor oral hygiene, caries in all molars, gingivitis, plaque accumulation, and an orthodontic appliance without maintenance for five years. The treatment plan included orthodontic appliance removal, oral hygiene instructions, supragingival scaling, endodontic therapy, tooth extractions, and restorations. Management of invasive procedures involved antibiotic prophylaxis with 2g of amoxicillin and local hemostatic measures. **Final considerations**: This case illustrates the importance of systemic knowledge for the clinical management of patients with complex heart disease and emphasizes the relevance of oral health as a key component of overall health. CAAE: 92510725.0.0000.0075

22. LINGUAL AMYLOIDOSIS IN A PATIENT DIAGNOSED WITH CHRONIC KIDNEY DISEASE: A CASE REPORT

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Introduction: Amyloidosis is a rare disorder marked by progressive, irreversible, extracellular deposition of fibrillar proteins in an amorphous form, which can be localized or systemic. Protein accumulation may cause irreversible damage to the affected organs. In the head and neck region, amyloidosis is uncommon and typically secondary to systemic disease. The most frequently involved sites are the larynx and pharynx, with tongue being the most affected area in the oral cavity. **Case report**: A 63-year-old melanodermic male, non-smoker, non-alcoholic, with chronic kidney disease on hemodialysis for

18 years, presented to the Special Care Dentistry Clinic. His medical history included coronary artery disease, diabetes mellitus, treated hepatitis C, hypothyroidism, and osteoporosis. The chief complaint was an unusual sensation on the lateral border of the tongue for the past eight months, along with dental calculus. The patient denied dysphagia, dysarthria, hoarseness, or airway obstruction. Clinical examination revealed a nodular enlargement of the ventral tongue extending to the lateral borders. **Complementary tests**: An incisional biopsy was performed, and histopathological analysis confirmed amyloidosis. The patient was referred to a nephrologist for systemic evaluation and management. **Final Considerations**: Early identification of oral amyloidosis is critical, as it may indicate systemic involvement and contributes to disease control and prognosis.

23. DENTAL MANAGEMENT IN A PATIENT WITH PERISYLVIAN SYNDROME: A CASE REPORT

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Introduction: Perisylvian syndrome is a cortical developmental malformation commonly associated with polymicrogyria of the Sylvian fissures, leading to epilepsy, intellectual disability, and oromotor dysfunctions, thus affecting sucking, chewing, swallowing, and speech. CT and MRI imaging confirmed bilateral perisylvian polymicrogyria, a characteristic finding that guided multidisciplinary therapeutic planning. **Case report**: A 14-year-old male patient with history of bronchial aspiration in the first month of life, global developmental delay, and epileptic seizures since age four, currently controlled with lamotrigine and levetiracetam for symptomatic management and quality-of-life goals. Functional assessment revealed chronic mouth breathing, previous sialorrhea, limited tongue mobility, and fine motor incoordination, compatible with a pseudobulbar phenotype and orofacial motor impairment typically described in this syndrome. Despite these limitations, oral health was satisfactory under maternal supervision, emphasizing the caregiver's essential role in prevention. Dental management focused on preventive and adaptive strategies: short appointments, sialorrhea control, safe suctioning, optimized patient positioning, and individualized protocols coordinated with speech-language pathology, neurology, and occupational therapy. **Final considerations**: This case highlights the importance of patient-centered care and interdisciplinary collaboration to enhance clinical safety and functional outcomes in individuals with rare neurological disorders.

24. DENTAL MANAGEMENT OF A PATIENT WITH CONGENITAL ANALGESIA: A CASE REPORT

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Introduction: Pain is an essential biological mechanism with a protective role, alerting individuals to injuries, infections, and adverse situations. Congenital analgesia is a rare condition affecting the peripheral nervous system, classified among autonomic neuropathies, usually with autosomal recessive inheritance. Patients often require constant monitoring due to frequent unnoticed injuries, self-mutilations, and infections. This report aims to describe the dental management of a patient with congenital analgesia. **Case report**: A 24-year-old Caucasian male, born in São Paulo (SP), premature at birth, and diagnosed with congenital analgesia, attended the CAPE-FOUSP for dental treatment. The patient presented with a traumatic ulcer on the lateral border of the tongue, darkened teeth, multiple carious lesions, and limited mouth opening. **Complementary tests**: Panoramic radiography revealed a fractured condyle and temporomandibular joint ankylosis. Dental management included polishing and rounding of incisal edges, oral environment conditioning, and extraction of residual roots. The patient was referred to a public oral-maxillofacial surgery service for condylar prosthesis placement. **Final considerations**: Patients with congenital analgesia require careful clinical monitoring given the absence of pain perception and the associated risks of unnoticed trauma and infection.

25. CLINICAL CHALLENGE IN THE DENTAL MANAGEMENT OF ULCERATED ORAL LESIONS IN A PEDIATRIC PATIENT WITH CIRRHOSIS IN ICU

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Introduction: Liver failure in pediatric patients leads to immunosuppression and coagulopathy that increase susceptibility to infections, bleeding, and risk of morbidity and mortality. **Case report**: Male patient, 2 years and 10 months old, Indigenous background, previously healthy, with prior hospitalization for parasitosis, under investigation for acid sphingomyelinase deficiency (ASMD). He developed cirrhosis of unclear etiology (differential: Caroli disease, Alagille syndrome, ASMD), presenting with icteric-hemorrhagic syndrome. He had jaundice with intermittent abdominal pain and distension, without follow-up. In the current admission, upper endoscopy showed small esophageal varices without active bleeding; however, after the procedure he developed severe epistaxis requiring intensive care, intubation, continuous sedation, and hemocomponent infusion. He later presented extensive friable ulcerated lesions of the oral mucosa, tongue, lips, and perioral region, with recurrent bleeding. Swab confirmed viral etiology (HSV, HHV-6, EBV). Management included systemic antiviral therapy, oral hygiene with 0.12% chlorhexidine twice a day, seven photobiomodulation sessions, and compressive dressing with tranexamic acid paste, achieving full resolution in 14 days. **Final considerations**: This case demonstrates the complexity of multiprofessional care for a pediatric patient with acute-on-chronic liver failure and highlights the relevance of diagnosing and treating oral lesions in ICU patients. Conservative dental measures contributed to clinical improvement and reduced the risk of hypovolemic shock.

26. MANDIBULAR OSTEOMYELITIS ASSOCIATED WITH PATHOLOGICAL FRACTURE IN A PATIENT WITH PYCNODYSOSTOSIS: A CASE REPORT

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Introduction: Pycnodysostosis (PYCD) is a rare autosomal recessive skeletal dysplasia resulting from mutations in the CTSK gene (1q21), with an estimated incidence of 1 to 5 cases *per* 1,000,000 live births. It is characterized by generalized osteosclerosis, short stature, craniofacial anomalies, acro-osteolysis of the phalanges, and increased susceptibility to infections and fractures due to impaired bone remodeling and reduced vascularization. **Case report**: A 31-year-old male with PYCD presented to the University of São Paulo Clinics Hospital with a history of tooth extraction two years earlier, followed by delayed healing, bone exposure, and persistent infection. Clinical examination revealed typical craniofacial dysmorphisms, anterior crossbite, and short stature, whereas radiographic evaluation demonstrated a hypoplastic and sclerotic mandible, absence of gonial angle, micrognathia, mid-face deficiency, and open cranial sutures. The patient developed mandibular osteomyelitis complicated by a pathological fracture in the region of tooth #37, which was managed with surgical debridement under antibiotic therapy and osteosynthesis by using titanium plates and screws. Clinical and radiographic follow-up over 18 months revealed satisfactory healing without infection recurrence. **Final considerations**: This case highlights the complexity of dental management in PYCD patients, where deficient bone remodeling and compromised vascularization hinder healing and challenge surgical outcomes, thus underscoring the importance of recognizing systemic and oral manifestations to enable safer, individualized care.

27. DENTAL MANAGEMENT OF A PATIENT WITH EEC SYNDROME: A CASE REPORT

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CAPE - FOUSP

Introduction: EEC syndrome is a rare genetic disorder associated with TP63 gene mutations, characterized by the triad ectrodactyly, ectodermal dysplasia, and cleft lip/palate. Dental management in these patients is often challenging due to systemic comorbidities and multiple dental anomalies. This case emphasizes the relevance of differential diagnosis and tailored dental care in rare syndromes. **Case report**: A 15-year-old female patient was referred to the CAPE with an initial suspicion of fetal alcohol syndrome. However, the presence of ectodermal abnormalities, orofacial malformations, and systemic features raised suspicion of a TP63-related condition. After specialized evaluation, a final diagnosis of EEC syndrome was established. The patient presented intellectual and motor deficits, hearing and visual impairments, sleep disorder, and was under risperidone therapy. **Complementary tests**: Clinical and radiographic examinations revealed dental malformations, enamel hypoplasia, multiple carious lesions,

residual roots, palatal cleft, gingival hypertrophy, and periapical lesions. **Final considerations**: Dental management included oral hygiene instruction, prophylaxis, restorative procedures, extractions, preventive strategies, and planning for maxillary overdenture, in conjunction with multidisciplinary care. This case reinforces the importance of accurate diagnosis and individualized treatment planning for patients with rare genetic syndromes.

28. TONGUE LACERATION: A CASE REPORT OF A COMPLICATION FOLLOWING TRANSESOPHAGEAL ECHOCARDIOGRAPHY

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Introduction: Congenital heart diseases are structural and/or functional alterations of the cardiovascular system, often requiring surgical intervention. Transesophageal echocardiography (TEE) is a commonly used intraoperative monitoring procedure, which involves the insertion of a probe through the esophagus to evaluate cardiac structures. However, potential complications may occur, with oral mucosal injuries being among the most frequent. **Case report**: A 9-year-old male patient developed intense pain in the left posterior region of the tongue following bidirectional Glenn surgery with TEE, which impaired oral intake. Therefore, the dental team was requested for suspicion of bite injury. On dental evaluation, a laceration measuring approximately 5 cm in length and 1 cm in depth was observed, with regular margins, yellowish tissue covering the lesion, and mild spontaneous bleeding. The characteristics of the injury were not compatible with a bite wound, but were instead suggestive of trauma related to the TEE procedure. Dental treatment was performed in the operating room under general anesthesia, consisting of wound suturing with 4.0 Vicryl. The patient responded well to the treatment, resuming oral feeding on the first postoperative day and remaining asymptomatic. **Final Considerations**: This case highlights the importance of the dentist's role in the multidisciplinary team as this professional is prepared to manage such complications, thereby reducing hospital stay and improving the patient's quality of life.

29. PARANEOPLASTIC PEMPHIGUS ASSOCIATED WITH MONOCLONAL GAMMOPATHY OF UNDETERMINED SIGNIFICANCE (MGUS): A CASE REPORT

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UFSC

Introduction: Paraneoplastic pemphigus (PNP) is an autoimmune disease characterized by the production of autoantibodies by neoplastic tumor cells, typically presenting as vesiculobullous lesions on the skin and mucous membranes. Given its possible association with neoplasms, prompt clinical and laboratory investigation is essential. **Case report**: An 85-year-old female patient presented to the emergency department with severe, generalized pain, accompanied by blisters and skin ulcerations, hemorrhagic crusts on the lips, and mucosal lesions impairing oral intake. Symptoms began after a recent episode of pharyngotonsillitis treated with antibiotics. Her medical history included controlled hypertension and hypothyroidism. The stomatology team had initially raised the suspicious of multiform erythema or PNP. Lip and skin biopsies were performed, along with low-level laser therapy sessions for pain relief and biostimulation. The patient was diagnosed with monoclonal gammopathy of undetermined significance (MGUS), a rare asymptomatic premalignant hematological condition involving monoclonal plasma cell proliferation. **Complementary tests**: Histopathological analysis with hematoxylin–eosin staining and direct immunofluorescence confirmed pemphigus, with subtype to be determined. Further clinical and laboratory investigations established the final diagnosis of paraneoplastic pemphigus associated with MGUS. **Final considerations**: The patient remains stable under appropriate treatment, with mucocutaneous lesions under control. Study was approved by the local research ethics committee (UFSC) under approval number 7.663.721.

30. DENTAL MANAGEMENT IN A PATIENT WITH FACIAL CLEFT: A CASE REPORT

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FOUSP

Introduction: Patients with facial cleft (FC) often require corrective surgical approaches to improve orofacial function and quality of life. The bilateral form, though less common, is more complex and associated with difficulties in speech, chewing, swallowing, breathing, hearing, and aesthetics. Conditions such as mandibular micrognathia, absence of soft palate, and lack of communication between auditory canal and oral cavity demand special dental care. Proper chair positioning is essential to avoid bronchoaspiration, along with strict irrigation control, use of high-power suction with isolation techniques, and avoidance of excess water to ensure patient safety. **Case report**: This case describes a 16-year-old female patient with multiple oral alterations and bilateral FC, referred for pre-surgical evaluation for mandibular distraction. Clinical exam revealed caries, calculus, generalized plaque, missing teeth, absence of soft palate, and bilateral oral-auditory communication. Dental treatment included ultrasonic scaling, caries removal, atraumatic restorative treatment, and topical fluoride, always with strict irrigation control and the patient seated to avoid choking and potential auditory damage. Imaging and 3D reconstructions confirmed mandibular deficiency. **Final considerations**: Dental management of bilateral FC cases requires an individualized approach, enhanced safety, and multidisciplinary collaboration. The hospital-based dentist plays a key role in preventing complications, eliminating infectious foci, promoting oral health, and optimizing clinical and surgical outcomes.