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#### OP70

Model of thermal and optical effects in dental pulp during the neodymium and diode lasers irradiation.

# Farhart, P.B.A.; Tanji, E.Y.; Farhat, R.P.; Zezell, D.M.; Miyakawa, W.; Nogueira, G.E.C.

Mestre em Laser em Odontologia pelo IPEN e FOUSP/SP. Applications of high intensity lasers in the enamel and dentine can produce adverse thermal effects into the pulp. Since the evaluation thermal effects into the intact pulp is not a solved problem, extracted teeth models have been used frequently. Current models, however, simulate only tooth thermal properties, not taking the remaining radiation in the pulp chamber into account. The aim of this study was to verify if the remaining radiation from neodymium and diode lasers that reach the pulp chamber, at the models using extracted bovine teeth, can causes local thermal effects. For this purpose, two models were developed using extracted bovine teeth with their pulp chambers filled with: water (model 1) and with an optical absorbent (model 2). Models were radiated with 1 W. The obtained results show that, for both lasers, the temperature rise in model 2 pulp chamber is: i) up to 11% higher than in the model 1 when the enamel is radiated and ii) up to 37% higher than in the model 1 when dentine is radiated (1 mm from the pulp). Thus, remaining radiation into the pulp is relevant for the above mentioned lasers and doses.

#### OP71

### Carbon dioxide laser or cold scalpel on the removal of gingival melanin pigmentation -Comparative Study.

**Kogler**, V.L. ; Maio, M.; Lage-Marques, J.L.; Zezell, D.M.. Melanin pigmentation is the result of melanin granules produced by melanocytes present in the basal layer of the oral epithelium. Gingival physiological melanin pigmentation is symmetric and persistent, may cause esthetic problems especially in individuals with a gummy smile. Various techniques have been described for the removal of melanin pigmentation from the gingival epithelium and partial thin connective tissue, as chemical agents, cryosurgery, surgery and gingival grafts. Recently, lasers systems have been used to coagulate and vaporize cells, promoting controlled gingival ablation. This study compares clinical efficiency to removal gingival melanin pigmentation in 20 patients with dioxide carbon laser, and 20 patients with cold scalpel during 30 days after surgery. A dioxide carbon laser (output = 5W; superpulse = 0.5s; spot size = 2.5mm defocused; focal distance = 5.5cm, Intensity = 102 W/cm2) was irradiated on gingival mucosal surface. Both techniques presented epithelialization in 15 days. Both systems are considered effective for removal melanin pigments. Patient's evaluation with postoperative pain found the carbon dioxide laser technique superior to the cold scalpel one. After 30 days, the repigmentation occured in 45% of the dioxide carbon laser patients, and 80% of the cold scalpel patients.

#### OP72

Bacterial reduction in class II furcation after root debridment with or without Nd:YAG laser irradiation.

Andrade, A.K.P.; Feist, I.S.; Cai, S.; Pannuti, C.; Zezell, D.M.; De Micheli, G..

The use of Nd: Yag laser for bacterial reduction as an adjuvant to nonsurgical periodontal treatment has been approached in several studies. Furcation complex anatomy is responsible for comprised treatment results in this areas due to the lack of proper access for instrumentation showing the persistence of a pathogenic microbial flora. The purpose of this clinical trial, randomized, double-blinded was to evaluated the bacterial reduction achieved with the Nd:YAG associated to conventional treatment on furcation sites of patients with chronic periodontitis. In a split mouth design study, 34 class II furcations that were selected from 17 patients with chronic periodontitis. They received previous full mouth periodontal treatment, except for the experimental sites. The 17 furcations of the Control group underwent twice manual and ultrasonic root debridment in weekly intervals. The Test group received the same treatment as the Control group followed by the Nd:YAG laser application (100mJ/pulse; 1.5W; 15Hz; 60sec). The microbiological parameters total numbers of anaerobic Colony Forming Units(CFU); Black pigmented CFU and the level of Actinobacillus actinomycetemcomitans(Aa), Porphyromonas gingivalis (Pg) and Prevotella intermedia(Pi) were determined at baseline, immediatly and one month after the treatment. The results showed a significant reduction of total CFU for both groups immediately after the treatment, but it was better for the Test group. After one month the total CFU average increased but