

regions, except for 1 case after 5 months from the platelet gel delivery. These promising results shows the safety and effectiveness of platelet gels, as valid therapeutical local treatment in oral ulcers managements related with severe cGVHD manifestations.

Conclusions: Main advantage is the fast resolution of pain with an improvement of quality of patients' life. Probably there's a correlation between clinical conditions and methods for preparation of platelet gel. Topic application of platelet gel is feasible, safe and effective. Despite the limited number of patients, we can assess that is evident how much PRP and platelet gel can be effective in clinical situation to prevent relapses in patients after CSE transplant. For final validation other studies are needed.

Use of systemic and in situ lactoferrin in MRONJ surgical management: proposal for a therapeutic solution

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Aim: Lactoferrin (Lf) is an antimicrobial and iron chelator glycoprotein contained in exocrine secretion, including saliva, and in secondary granules of neutrophil granulocytes. Lf performs its antibacterial and antiviral action through two pathways: the first deprives bacteria of the iron they need for their reproduction and for biofilm formation; the second contributes to restore the inflammatory homeostasis which is essential for tissue health modulating the level of cytokines, like IL-6. The study intends to propose the use of systemic and in situ Lf effectiveness in the healing of oral mucosa and bone tissue affected by medication-related osteonecrosis of the jaw (MRONJ), after surgical excision or spontaneous elimination of necrotic bone.

Methods: We considered 10 patients with clinical and radiological diagnosis of MRONJ according to SICMF-SIPMO classification, of these:

- Stage 1: 3 asymptomatic patients
- Stage 1: 1 symptomatic patient
- Stage 2: 3 asymptomatic patients
- Stage 2: 2 symptomatic patients
- Stage 3: 1 patients

Four of these patients are men, six are women; six patients are non-smokers and four are tobacco smokers also during the treatment. In the run-up to surgery, one patient has taken Bevacizumab; one

has taken Denosumab; 8 have taken Zolendronic Acid. All the patients were subjected to a bone removal by traditional surgical technique or spontaneous sequestrectomy; placement of greasy gauzes with powdered Lf and administration of two Lf tablets a day in the pharmaceutical form of Forhans Gengi-For® right after the surgery. Our protocol has also dictated: seven days of antibiotic therapy (Amoxicillin and Clavulanic Acid 1 gr and Metronidazole 250mg twice a day) before and after the surgery; antiseptic therapy with Chlorhexidine 0.2% rinses; two cycles of 10 days of Lf tablets, with an interruption of 10 days among the cycles. Greasy gauze was removed two days after the surgery instead the sutures were removed after 10 days. Furthermore, post-surgical pain was evaluated through a Numeric Rating Scale (NRS). The average of the collected NRS values is equal to 3.

Results: after forty days from the surgery, out of the ten patients:

- 2 relapsed
- 4 reached the complete healing
- 4 are still recovering

No collateral effects were reported caused by Lf.

Conclusion: Lf can be a valuable aid in MRONJ post surgical management since its antibacterial and anti-inflammatory properties, easy to prescribe and no side effects are reported. The minimal number of patients and the absence of a control group, until today, does not allow us to state that Lf has a key role in healing tissue.

Use of Lixenil® in the management oral lichen planus. A preliminary study

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Aim: Oral lichen planus (OLP) is a relatively common potentially malignant disorder of uncertain etiology with a malignant transformation rate lower than 0.5% per year. Clinical features include reticular white lesions, plaque-like lesions or erosive lesions. Lesions may be asymptomatic or cause pain and burning sensation. The management of the symptomatic forms includes the use of topical corticosteroids or tacrolimus. Other drugs, such as retinoids or cyclosporine have not proved better and they may have adverse effects. The aim of the study is to evaluate the effect of a new local drug, Lixenil®, for the improvement of pain and burning sensation of OLP. In addition we evaluated the reduction in size of the lesions comparing photographs before and after the treatment.