

infiltrates around the duct of the minor salivary gland. Further, the patient's brain single photon emission computed tomography revealed mild reduction of blood flow in the frontal and parietal lobe and posterior cingulate gyrus on the right side. Thus, the patient was diagnosed with SS accompanied with autoimmune encephalitis and was admitted to the internal medicine department. Pulse steroid therapy was initiated and the patient showed improvement in his cognitive impairment, with an increase in the MMSE score to 27 from 25 points.

## Dry mouth in hypertensive patients

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**Introduction:** Dry mouth sensation is common among hypertensive patients due to drug intake.

**Objectives:** To study the prevalence of xerostomia in a group of patients with hypertension and the associated risk factors.

**Material and Methods:** This study was carried out in a group of hypertensive patients belonging to two Health Centers of Community of Madrid (Spain). Patients with diabetes mellitus, thyroid disease, HIV, Sjögren's syndrome and patients who had received head and neck radiotherapy were excluded. Patients underwent a complete medical history, intraoral exploration, quantification of stimulated and unstimulated saliva, and the results of the questionnaires Xerostomy Inventory (XI) and Oral Health Impact Profile (OHIP-14) were collected.

**Results:** We included 97 patients (59 women and 38 men, mean age  $74.08 \pm 9.53$ ). 53.6% of patients suffered from xerostomia. A statistically significant relationship was found between suffering xerostomia and the number of drugs received; patients with xerostomia received  $6.19 \pm 3$  compared to  $4.89 \pm 2.72$  in the group without xerostomia ( $P = 0.028$ ). 87.62% of the patients with arterial hypertension took xerostomizing drugs of which 90.4% reported xerostomia. The total results of XI ( $23.37 \pm 7.46$  vs  $16.67 \pm 4.54$ ,  $P = 0.0001$ ) and OHIP-14 ( $16.92 \pm 4.32$  vs  $14.71 \pm 1.6$ ,  $P = 0.002$ ) were significantly higher in the group of patients with xerostomia.

**Conclusions:** Xerostomia is frequent among patients with arterial hypertension. The sensation of dry mouth in hypertensive patients diminishes the quality of life of the patients who suffer from it.

## Purulent sialoadenitis in patients with primary Sjögren's syndrome, a single center experience

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**Introduction:** Primary Sjögren's syndrome is a progressive autoimmune disease that affects predominantly middle-aged women, typically in the fourth to sixth decennium. The disease manifests most often by xerostomia and xerophthalmia. Oral manifestations are usually the initial symptoms. Beside xerostomia, patients are in increased risk of purulent sialoadenitis.

**Objectives:** To evaluate our experience regarding purulent sialoadenitis associated with Sjögren's syndrome.

**Material and Methods:** We retrospectively analyzed patients with primary Sjögren's syndrome treated at the Department of Dentistry, University Hospital in Hradec Králové. All patients fulfilled diagnostic criteria from 2016. Our study focused on purulent sialoadenitis, diagnosed upon clinical examination. Purulent sialoadenitis was considered healed when there was no fever, pus secretion from the duct and edema of the salivary gland.

**Results:** Seventy-three patients, 67 women (91.8%) and 6 men (8.2%) were included. Patients with hypoechoic changes of salivary glands on sonographic examinations were at increased risk of acute purulent sialoadenitis ( $P = 0.0003$ ). We treated 54 cases of purulent sialoadenitis, only women were affected. The mean therapy length was 8.6 days. Patients age did not play a role in an incidence of purulent sialoadenitis ( $P = 0.23$ ). In 11 cases acute purulent sialoadenitis preceded the diagnosis of primary Sjögren's syndrome.

**Conclusions:** Although purulent sialoadenitis is not in the most cases life threatening complication of primary Sjögren's syndrome, it is a serious disease. On the other hand, purulent sialoadenitis can lead to the diagnosis of an unrecognized primary Sjögren's syndrome as it can be an initial symptom of the disease.

## Topical dry mouth products to treat xerostomia in patients with primary Sjögren's syndrome: A double-blind clinical trial

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**Introduction:** Primary Sjögren's syndrome (pSS) is a rheumatic disease characterized by xerostomia and xerophthalmia.

**Objectives:** To assess the effects of topical dry mouth products (toothpaste and mouthwash) containing olive oil, parsley oil, provitamin B5, betaine and xylitol in pSS patients with xerostomia.

**Material and Methods:** A double-blinded, placebo-controlled, randomized design where patients were randomly assigned at baseline