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ANALGETIK ANTI INFLAMASI CEPAT & KUAT

NOVARTIS

TIMNAS 6
STRUM XVII
UNIVERSITAS AIRLANGGA

ROGRAM BOOK
ND ABSTRACT

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PROVING HOLISTIC HEALTH
UGH THE NEW PARADIGM:
TAL MEDICINE"

The 6th Scientific Meeting in Dentistry
Faculty of Dentistry Airlangga University
Celebrating The 85th Anniversary
of Dental Education in Indonesia

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ABSTRACT MAIN LECTURE

DETECTION OF OSTEOPOROSIS USING PANORAMIC RADIOGRAPH

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ABSTRACT
Osteoporosis is a systemic bone disease characterized by low bone density, decrease in bone structure causing increased risk of fracture. WHO classification of osteoporosis based on bone mass density (BMD). DXA (dual-energy x-ray absorptiometry) is the gold standard for measuring BMD. Several studies have been conducted to look for alternative methods to detect osteoporosis through panoramic radiograph and highlighting the role of the dentist in the early diagnosis of this disease. Method and material : This search is the study of literature, which will be discussed the use of panoramic radiographs for detection of osteoporosis. Result : There is several methodes for detection osteoporosis through panoramic radiography. Conclusion : Panoramic radiography can be used to detect osteoporosis.

Key words : panoramic radiography, detection, osteoporosis

NEUROBIOLOGY AND NEUROCHEMISTRY OF THE TASTE

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ABSTRACT
The sense of taste is mediated by receptor mechanisms that are distributed on modified epithelial cells within structures called taste buds, which are located on the tongue and other parts of the oral cavity. These receptor cells are innervated by branches of one of three cranial nerves, including the chorda tympani and greater superficial petrosal branches of VII, the lingual-tonsillar branch of IX, and the superior laryngeal branch of X. These nerves project into the rostral portion of the nucleus of the solitary tract (NST) of the medulla. Gustatory information is carried from there to oral motor circuits within the brainstem and to the parabrachial nuclei of the pons, from which pathways arise to thalamus and insular cortex and also into areas of the limbic forebrain, including the lateral hypothalamus (LH), central nucleus of the amygdala (CeA), that make someone like or dislike some meal and the bed nucleus of the stria terminalis (BST). Taste buds contain cells that can be classified into types on ultrastructural grounds and these in turn have been shown to exhibit expression of a wide array of molecules, many of which are characteristic of a particular cell type. The transduction of chemical stimuli by taste receptor cells is mediated by several different mechanisms. Salts and acids interact directly with ion channels to depolarize receptor cells, whereas sweet- and bitter-tasting stimuli and amino acids interact with G-protein-coupled receptors of the T1R and T2R families, linked to second-messenger pathways. Although some of these receptors appear to be segregated into different cells, the electrophysiological and calcium imaging show that taste bud cells are often responsive to stimuli of more than one quality. This multiple sensitivity is evident to an even greater degree in first-order nerve fibers and in central gustatory neurons, due to convergence of afferent input onto higher-order neurons. Afferent input into the NST appears to be mediated by glutamate and most second-order neurons are maintained under tonic GABAergic. Some of the neurons in the NST are excited by substance P and some are inhibited by met-enkephalin. Areas of the forebrain that receive gustatory input, including the insular cortex, LH, CeA, and BST, provide descending modulatory control over taste neurons in both the NST and PbN.

Keywords: Taste, Calcium, Parabrachial nuclei, GABAnergic