P3-5

MESENCHYMAL STEM CELLS: A PROMISING THERAPY FOR DENTAL IMPLANTS OSSEOINTEGRATION IN DIABETICS MODEL

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BACKGROUND

Diabetics can leads to lack and delayed osseointegration in dental implant due to hyperglycemic. Thus, it has always been a challenge for prosthodontist as there is still no therapy for these conditions. Human umbilical cord mesenchymal stem cells (hUCMSCs) was a very well developed stem cells among researchers around the world because of its ability in improving bone microenvironment and its osteogenic potentials.



To examine the effect of hUCMSCs on dental implant osseointegration in hyperglicemic condition.

MATERIALS AND METHOD

28 Wistar rats were injected intraperitoneally with Streptozotocin 20mg/kg BW 5 days in a row to make diabetic model. The treatment was carried out after fasting blood sugar levels > 300 mg/dl and waiting 5 days for the glycation period. The source of stem cells is human umbilical cord which has been isolated and cultured until passage 6. The experimental animals were divided into 4 groups, namely the 2-week implant group (K1), the 4-week implant group (K2), the 2-week implant + hUCMSCs group (P1) and the 4-week implant + hUCMSCs group (P2). The variables examined were osterix expression, BIC, and BIV (Bone Implant Volume). The data were analyzed statistically using ANOVA and Mann-Whitney Test.



differences in Osterix, BIC, and BIV level in treatment groups compared with control groups. BIC and BIV level in treatment groups continue to increases significantly to maintain osseointegration. While Osterix, an essential m a r k e r f o r b o n e maturation, is decreasing as homeostasis occured.



hUCMSCs accelerate and increase dental implant osseointegaration in diabetics model.

REFERENCES

CONCLUSION

Bernhardt, Ricardo, Eberhard Kuhlisch, Matthias C. Schulz, Uwe Eckelt, and Bernd Stadlinger. 2012. Comparison of Bone-Implant Contact and Bone-Implant Volume between 2D-Histological Sections and 3D-SRµCT Slices. European Cells and Materials. Volume 23 (April). pp. 237–48.
Javed, Fawad, Hameeda Bashir Ahmed, Roberto Crespi, and Georgios E. Romanos. 2013. Role of Primary Stability for Successful Osseointegration of Dental Implants: Factors of Influence and Evaluation. Interventional Medicine and Applied Science. Volume 5 (4). pp 162–7.
Zhang, Jing, Mai Shirai, Ryuji Yamamoto, Yasuo Yamakoshi, Shinichiro Oida, Chikahiro Ohkubo, and Jianyu Zeng. 2016. Effect of Nerve Growth Factor on Osseointegration of Titanium Implants in Type 2 Diabetic Rats. The International Journal of Oral & Maxillofacial Implants. pp. 1189–94.