

Facultatea de Stomatologie

Departamentul Medicină Dentară

Nume si Prenume: .....Corlan Ion Virgil .....

## LISTA DE LUCRĂRI

### 1. Teza de doctorat

Studii experimentale si statistice privind patologia orala maligna si rolul profilactic al igienei orale, UMF Timisoara , 16.12.2021, sub indrumarea Doamnei Profesor Dr. Popovici Ramona Amina

### 2. Publicatii

#### A. Cărți publicate, îndrumare/culegeri publicate

1. Parodontologie, Vasile Goldis University Press , Arad ( autori -Doina Onisei , Dan Onisei . coautor -Corlan Ion Virgil )
- 2.

### 3.Articole/studii publicate

#### A. In reviste de specialitate de circulație internațională recunoscute cotate ISI sau indexate în baze de date internaționale specifice domeniului, care fac un proces de selecție a revistelor pe baza unor criterii de performanta

1. "Characterization of Healthy and Tumor Oral Cell Lines of Human Origin-The preliminary stage in the assessment of relevant chemical compounds with impact on dentistry" I.V.Corlan, A.Cheveresan , D.Berceanu-Vaduva, C.Nica, A.Faur, R.C.Rumel, R.A.Popovici,- , Victor Babes University of Medicine and Pharmacy , Faculty of Dentistry , 2 Eftimie Murgu, 300041, Timisoara , Romania (Revista de Chimie , Bucuresti , Nr. 10, 2018)
2. Use of Questionnaires in Assessing the Level of Knowledge of Oral Hygiene and its Importance", I.V.Corlan, A.Tanase, A.Erimescu,R.Cosoroaba, R.A.Popovici, -,Victor Babes University of Medicine and Pharmacy, Faculty of Dentistry, 2 Eftimie Murgu, Timisoara , Romania ( RESEARCH AND CLINICAL MEDICINE JOURNAL, The European Journal of Innovative , Integrative and Translational Medicine , Volume IV , Issue 4 , 2020)
3. „The Influence of Some Synthesis Compounds on Healthy and Tumoral Oral Cell Lines : PGK, HGF and SCC4 “, R.Susan, I.V.Corlan, D.Berceanu-Vaduva , R.A.Popovici, M.Radulescu, M.Susan, A.Faur, A.Cheveresan, -,Victor Babes University of Medicine and Pharmacy, Faculty of Dentistry , 2 Eftimie Murgu 300041, Timisoara , Romania (Revista de Chimie , Bucuresti, Nr. 10, 2018)
4. REVIEW –„Vegetal Compounds as Sources of Phrophylactic and Therapeutic Agents in Dentistry” – R.A.Milutinovici, D.Chiorean, R.Buzatu, I.Macasoi, R.Susan, R.Chioibas, I.V.Corlan, A.Tanase , H.Calniceanu, R.A.Popovici, S.Dinu, C.Dehelean, A.Scurtu, I.Pinzaru, C.Stoica (PLANTS, Basel, 2021, Octombrie 10)

#### B. In reviste de specialitate de circulație internațională recunoscute cotate ISI PROCEEDINGS

- 1.
- 2.

#### C. In reviste din țară recunoscute C.N.C.S.I.S. , indexate BDI

1. Effects of non-surgical mechanical therapy on periodontal pathogens.

Corlan Virgil Ion, Onisei Dan, Pogan Andreea-Adriana , Onisei Doina

Pagina / - Curriculum vitae al  
Corlan Ion Virgil

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Medicine in Evolution, vol.XXI, Nr.2, 2015, pag.305-309, ISSN 2065-376X

2. Bacterial repopulation of periodontal pockets in the absence of supportive maintenance therapy.

Andreea A. Pogan, Roxana Buzatu, Ion V. Corlan, Dan Onisei, Doina Onisei

Medicine in Evolution, vol.XXI, Nr.3, 2015, pag.477-482, ISSN 2065-376X

3. Up to date concepts in the therapy of aggressive periodontitis. A systematic review.

Corlan Ion Virgil, Doina Onisei Pogan Andreea-Adriana, Dan Onisei,.

Medicine in Evolution, vol.XXI, Nr.3, 2015, pag.483-487, ISSN 2065-376X

#### **D. In alte reviste de specialitate de circulație națională cu (ISBN, ISSN)**

1.

#### **4. Cercetare Granturi – Proiecte**

1.

#### **5. Articole/studii publicate**

##### **A. In volumele unor manifestări științifice: (se precizeaza daca este cazul -cotate ISI sau indexate în baze de date internaționale-BDI)**

Comunicări orale cu rezumat tipărit în volum special sau revistă:

Comunicări științifice

„Zilele Academice Arădene”, ediția a-XXI-a, 13-17 mai, 2015, Arad

1.

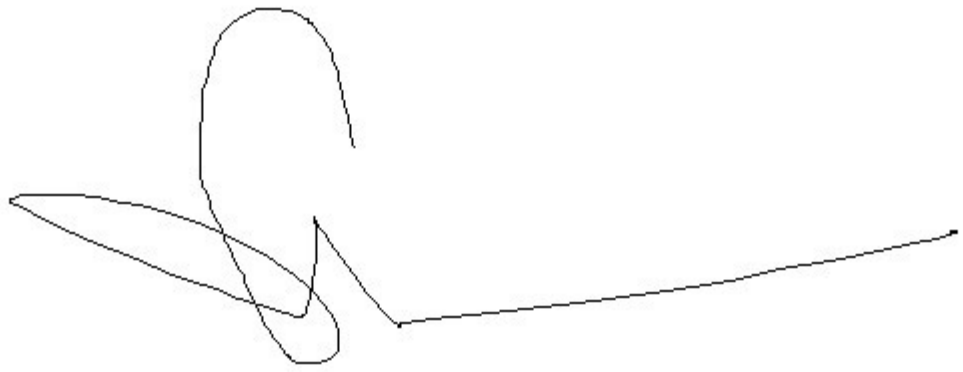
Ioana Ilyes, Tiberiu Hosszu, Paul Freiman, Ion Corlan, Ioana Lile, Roxana Radu, Otilia Stana, Diana Marian „Vasile Goldis” Western University of Arad Abstract: Periodontal disease is considered to be one of the most common inflammatory conditions in the oral cavity, inflammation occurs in the tooth support tissues, destroying the periodontal ligament and the alveolar bone in response to the presence of specific microorganisms. The periodontal disease sums up all the pathological manifestations that are relevant to the periodontium pocket, having a plurifactorial etiology, having a chronic evolution, requiring complex and longterm treatment. Systemic factors have the role of decreasing the resistance of periodontal tissues and of causing tissue response, increasing their predisposition to disease in the presence of local factors. Of these, the most notable are: smoking, diabetes, cardiovascular diseases, obesity, medication (antihypertensive, sedative, antihistamine, some tranquillizers, contraceptives, bisphosphonates), stress, osteoporosis, diet and immunodeficiency. It is important to understand the etiology of these factors to recognize their role in periodontal disease

Initial Periodontal Therapy in Patients with Periodontitis Ioana Ilyes, Paul Freiman, Tiberiu Hosszu, Ion Corlan, Ioana Lile, Roxana Radu, Teodora Lupulescu, Mihaela Adomnicai „Vasile Goldis” Western University of Arad Abstract: The treatment for the periodontal disease follows the elimination of the factors causing, maintaining and increasing the gingival inflammation and

speeding the resorption of the deep structures of the periodontium. If the patient presents systemic factors also, then these have to be taken into consideration. The inceptive therapy is the therapeutic stage that tracks the patient's education and training in plaque control (as this is the main cause of the periodontal disease), diet supervision, emergency treatment, cavities and endodontic lesions treatment, Scaling and Root Planing, elimination of the inappropriate prosthetic works and their temporary replacement, minor orthodontic treatment, mobile teeth contention, preliminary occlusal polishing and reevaluation of the periodontal status in order to determine the appropriate future treatment measures.

**ANTIMICROBIAL THERAPY IN AGGRESSIVE PERIODONTITIS** Corlan Ion-Virgil, Dr. Veja Ioana, Berari Adelina, Ciobanu Calin, Hoszu Tiberiu "Vasile Goldiș" Western University of Arad, Faculty of Dental Medicine Aggressive Periodontitis distinguishes itself from the Chronic form of Periodontitis by the age on onset, the rapid rate of disease progression, alternations in the host's immune response and a familial aggregation of diseased individuals. It can present itself in a localized or generalized form. In contrast with Chronic Periodontitis, where Scaling and Root Planning (SRP), along with the instructions of oral hygiene will most likely stabilize the clinical situation (CAL -clinical attachment loss stopped), the high virulence of the *Aggregatibacter actinomycetemcomitans* (most common present with *Porphyromonas gingivalis*) complicates the outcome of a simple mechanical debridement (SRP). There were many clinical cases that illustrate the ability of *Aggregatibacter actinomycetemcomitans* to remain „hidden” in periodontal tissues after mechanical therapy (SRP). Therefore, the use of adjunctive antibiotic treatment frequently results in a more favorable clinical response than conventional therapy alone. It is very important for every clinician to establish and be aware of which antibiotics are most effective for patients with Aggressive Periodontitis (localized or generalized form), which combinations of antibiotics to use, what are the principles of antibiotic doses, is the empirical administration of antibiotics above microbial testing? Nowadays, there are some commonly used antibiotics in periodontal therapy such as: tetracycline, minocycline, doxycycline, erythromycin, clindamycin, ampicillin, amoxicillin and metronidazole. Their clinical use is justified by their pharmacology, mode of action and efficiency when used in specific combinations (combination of metronidazole and amoxicillin (MA) has shown to be an effective antibiotic regime to combat *Aggregatibacter actinomycetemcomitans* and *Porphyromonas gingivalis*-associated periodontal infections

**NECROTIZING ULCERATIVE GINGIVITIS (NUG)** Corlan Ion-Virgil, Veja Ioana, Marian Alina, Elisei Radu, Elisei Gabriela "Vasile Goldiș" Western University of Arad, Faculty of Dental Medicine Necrotizing Ulcerative Gingivitis is a microbial disease of the gingiva characterized by gingival necrosis, bleeding and pain. NUG is diagnosed at the onset of specific clinical signs and symptoms. NUG is different from other periodontal diseases in that it presents with interdental necrosis, "punched out" ulcerated papillae, gingival bleeding and pain. It affects usually young adults (age 18-30), most common symptoms are: intense/excruciating pain, predisposing factors, psychological stress and anxiety, smoking, pre-existing gingivitis and trauma, poor oral hygiene, deficient nutrition, HIV-positive. All the factors above lead to immunosuppression: depressed polymorphonuclear leukocytes, antibody response, and lymphocyte mitogenesis. All the oral lesions are extremely sensitive to touch and the patient often complains of a constant radiating, gnawing pain that can be intensified by eating spicy or hot foods. Without periodontal treatment this form of gingivitis is followed by bone loss. (necrotizing ulcerative periodontitis NUP) Periodontal therapy must include: debridement under local anesthesia, removing of the pseudomembrane using cotton pellet dipped in chlorhexidine, providing the patient with specific oral hygiene instructions to use a prescription antibacterial mouthwash: chlorhexidine 0.12% twice daily, control pain with analgesics: ibuprofen 400-600 mg 3 times daily. When systemic involvement is present, any clinician should recommend use of antibiotics such as a combination of Amoxicillin and/or Metronidazole with a rigorous dosing (250 mg 3 x daily for 7 days)

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Semnatura ,