

RYAN MARTE LLORIN, MD



Consultant, Infectious Diseases, St. Luke's Medical Center - BGC, St. Luke's Medical Center - QC and Cardinal Santos Medical Center, May 2015 - Present
 Head, Infection Control Committee, St. Luke's Medical Center - QC
 Resident Physician / Registrar, Institute of Infectious Diseases & Epidemiology, Tan Tock Seng Hospital, Singapore, October 2007 - October 2014
 Antimicrobial Stewardship Training, Singapore, October 2017
 Medical Management Training, Asian Institute of Management, March 2017
 APSIC Infection Control Course, Singapore, August 2016
 Diplomate, Phil Society of Infectious Diseases and Microbiology (PSMID), PSMID Certification Examination - Passed, Manila, Philippines, November 2013
 Diploma in Infectious Diseases, Tan Tock Seng Hospital, Academy of Medicine Singapore, October 2011
 Fellow, Philippine College of Physicians, 2005
 Doctor of Medicine, UERM College of Medicine, Quezon City, Philippines, 1994 - 1998
 Bachelor of Science in Biology, De La Salle University, Manila, Philippines, 1991 - 1994
 Travel Health, International Society of Travel Medicine, 2012
 Member, Philippine Society of Infectious Diseases and Microbiology
 Member, Philippine College of Physicians

Presentation Date: Tuesday 8 May 2018 9:00 AM - 10:00 AM & 2:30 PM - 3:30 PM

Venue SMX CONVENTION CENTER MANILA Function Room 1 & 2

Presentation Title: IMPLICATIONS OF HIV / AIDS ON ORAL HEALTH

HIV infection weakens its host's antimicrobial defences by infecting and incapacitating certain cells of the immune system including those at the mucosal sites. Dysregulation of the oral microbiome compromises the mucosal immunity which predisposes to numerous oral mucosal and periodontal diseases. While oral health problems are common in the general population, some oral diseases are more common and severe for persons living with HIV such as dental caries, aphthous stomatitis, oral candidiasis, herpes simplex and varicella zoster. Oral conditions primarily associated with HIV include oral hairy leukoplakia, Kaposi's sarcoma and non-Hodgkin's lymphoma. Oral manifestations of HIV has long been recognised as crucial in the diagnosis of this infection and staging of the degree of immunosuppression. In addition, periodontal diseases may contribute to the state of persistent and chronic inflammation present during HIV infection. This may lead to cardiovascular and cerebrovascular diseases. Hence, early identification and treatment of both HIV and its associated oral diseases are of paramount importance.