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## RESULTS OF EVALUATION BY THE CLINIC OF THE EFFECTIVENESS OF PREVENTION AND TREATMENT OF ACUTE INFLAMMATORY DISEASES OF THE SALIVARY GLANDS

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✓ ***Resume***

***Salivary glands function in the body, perform a number of complex functions, including taking part in the metabolism, affecting various processes of homeostasis Now the incidence of inflammatory and dystrophic diseases of the salivary glands is increasing and is about 30% of the total number of diseases of the salivary gland. In the practice of surgical dentistry, however, this disease is at a relatively higher level – from 3 to 24% to threeraydi. Among them, the percentage of inflammatory (sialadenitis) and dystrophic (sialadenosis) processes is more than 50%.***

***Keywords: solivary glands, inflammatory diseases, oral mucosa, prevention, treatment.***

## РЕЗУЛЬТАТЫ ОЦЕНИВАНИЯ КЛИНИЧЕСКОЙ ЭФФЕКТИВНОСТИ ПРОФИЛАКТИКИ И ЛЕЧЕНИИ ОСТРЫХ ВОСПАЛИТЕЛЬНЫХ ЗАБОЛЕВАНИЙ СЛЮННЫХ ЖЕЛЕЗ

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✓ ***Резюме***

***Слюнные железы функционируют в организме, выполняют ряд сложных функций, в том числе принимают участие в обмене веществ, влияя на различные процессы гомеостаза В настоящее время заболеваемость воспалительными и дистрофическими заболеваниями слюнных желез увеличивается и составляет около 30% от общего числа заболеваний слюнной железы. В практике хирургической стоматологии, однако, это заболевание находится на относительно более высоком уровне – от 3 до 24% до трех дней. Среди них процент воспалительных (сиаладенит) и дистрофических (сиаладеноз) процессов составляет более 50%.***

***Ключевые слова: слюнные железы, воспалительные заболевания, слизистая оболочка полости рта, профилактика, лечение.***

## SO’LAK BEZLARINING O’TKIR YALLIG’LANISH KASALLIKLARINI OLDINI OLISH VA DAVOLASH SAMARADORLIGINI KLINIK BAHOLASH NATIJALARI

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***So’lak bezlari organizmda bir qator murakkab funktsiyalarni bajaradi, shu jumladan metabolizmda ishtirok etadi, gomeostazning turli jarayonlariga ta’sir qiladi. Xirurgik stomatologiya amaliyotida esa bu kasallik nisbatan yuqori darajada – 3 dan 24% holatlargacha uchraydi. Ular orasida yallig’lanish (sialadenit) va distrofik (sialadenoz) jarayonlarning ulushi 50% dan ortiq.***

***Kalit so’zlar: so’lak bezlari, yallig’lanish kasalliklari, og’iz shilliq qavati, profilaktika, davolash.***

## Relevance

Among dental pathology, diseases of the salivary glands, according to a number of authors, range from 3 to 7%. Of these: salivary stone disease accounts for up to 60%, various forms of chronic sialadenitis and sialadenosis - up to 30%, congenital anomalies - up to 1% and tumors - up to 5% [7, 14, 21 ].

Despite the existence of a large number of different methods for the study of CS (sialography, sialosonography, computed tomography of the salivary glands, etc.), allowing to identify one or another form of pathology, currently there are still difficulties in carrying out differential diagnosis [3, 9, 12, 13, 17].

Of particular importance are the methods of radiation diagnostics, with the help of which it is possible to study both the topography of the organ and its functional capabilities. Nevertheless, there is no unified diagnostic and therapeutic approach to the study of the pathology of the salivary glands [1, 6, 16, 19].

Various methods of diagnosis of diseases of the salivary glands do not fully meet the requirements of doctors for making a final decision on the choice of a method of treatment of various pathology of the salivary glands, as a result of which patients receive untimely or inadequate care. In these cases, the long course of the disease leads to the development of complications, the treatment of which presents significant difficulties [24, 25]. Widely used sialosonography and contrast-free computer sialotomography do not allow us to assess the anatomical features of the ductal system [4, 10, 15, 23].

Recently, in order to diagnose various diseases of the salivary glands, the method of multispiral computed tomographic sialography (MSCT-sialography) has been used, which allows for a high level of differential diagnosis of various pathological processes [2, 8, 18, 20].

There are isolated reports in the literature about the use of MSCT in the diagnosis of diseases of the pancreas. At the same time, it seems advisable to explore the possibilities of MSCT-sialography in order to improve the effectiveness of the diagnosis of LV. Also, one of the important components of MSCT-sialography is the ability to evaluate the information obtained during the analysis of multiplanar and ZB reconstructions. The above facts were the basis for this work [5, 11, 15, 22].

**The purpose of the study.** To conduct a comprehensive clinical and laboratory examination of patients with diseases of the salivary glands.

## Materials and methods

Determine the level of detection and spread of acute inflammatory diseases in the glands; 2. Conduct comprehensive clinical-labator examinations in patients with acute inflammatory diseases of the speech glands; 3. Evaluate the effectiveness of 3D reconstruction and MSKT (multispiral computer tomography) in patients with acute inflammatory diseases of the speech glands; 4. Develop measures to effectively treat the inflammatory process with the help of the modern preparation "Bakstims" in patients with acute inflammatory diseases of the speech glands**.**

**Innovation of work.** To achieve an increase in the indicators of local immune factors in the oral cavity with the help of the drug “Bakstims” in the complex therapy of patients with acute inflammatory diseases of the salivary glands . MSCT (multispiral computed tomography))-to determine the anatomical features of the salivary glands release system based on the methods of sialography and 3D rengenagrafiya examination and provide the basis for the selection of optimal treatment methods.

## Results and its discussion

50 patients of different ages and genders with acute inflammatory disease of the speech glands have been studied. The results obtained show that for 2020-2022 years, a total of 50 patients with diseases of the salivary gland were treated , of which 7 (14%) were under the age of 18 and 80 (86%) were under the age of 18-75 (Table 1).

Table 1

Distribution of patients by age and gender

| Age groups | men | | women | | overall | |
|---|---|---|---|---|---|---|
| | абс | % | абс | % | абс | % |
| school age | 3 | 6 | 4 | 8 | 7 | 14 |
| middle-aged | 7 | 14 | 10 | 20 | 17 | 34 |
| Adults (51 and older) | 10 | 20 | 16 | 32 | 26 | 52 |
| Total | 20 | 40 | 30 | 60 | 50 | 100 |

In all age groups, there is a high incidence of salivary gland disease among men. The disease was encountered by more between the ages of 20 and 40 years old, that is, among those who are worthy of Labor. In particular, 18-30 years old – 17(34%), 31< years old-26 (52%) encountered, more observed among men as noted above. These diseases can be attributed to a number of factors that predispose more to mature age and primarily the intensity of metabolism at this age. It is worth noting that in this case, more frequent encounters of the population in the period when the cocktail activity is the highest, acquires not only medical, but also social significance.

When analyzed by nosological forms of diseases of the salivary gland, acute sialodenitis among men and women was found in high percentages (Table 2). In total, 66 (60%) cases were diagnosed with acute sialodenitis, while men were 40 and women were 26, that is, men were 1.5 times more likely to get sick than women.

2 table

Distribution of diseases of the salivary gland by gender of patients

| | | men | | women | | overall | |
|---|---|---|---|---|---|---|---|
| | | абс | % | абс | % | абс | % |
| Ear-picked up salivary glands | Acute sialodenitis | 10 | 50 | 15 | 50 | 25 | 50 |
| | Chronic sialodenitis | 1 | 5 | 1 | 3.3 | 2 | 4 |
| | Calculous sialoadenitis | 2 | 10 | 2 | 6.6 | 4 | 8 |
| War fought salivary glands | Acute sialodenitis | 5 | 25 | 10 | 33 | 15 | 30 |
| | Chronic sialodenitis | 1 | 5 | 1 | 3.3 | 2 | 4 |
| | Calculous sialoadenitis | 1 | 5 | 1 | 3.3 | 2 | 4 |
| Total | | 20 | 40 | 30 | 60 | 50 | 100 |

In addition, inflammatory disease of the salivary glands – acute parotitis accounted for a total of 25 (50%), chronic parotitis-2 (4%). It is known that in dental practice, saliva-stone disease is relatively common, up to 30% is observed according to literature data. In our clinic, the calculation was performed using sialodent in 3 (6%) of men and 3 (6%) of women. Patients aged 51 years and older may be associated with dysmetabolic, endocrine disorders against the background of general somatic diseases of the body.

It is known that the largest salivary glands are listened to , the jaw and tongue belong to the subcutaneous salivary gland, the secretory separating from them is involved in the formation of food bite, the initial digestion of food and other processes.

In the literature, more lesions of the salivary gland of the jaw are shown, both in our studies have thus been confirmed (Table 3). As can be seen from the results, in patients – 19 (38%) had jaw salivary gland injuries. When patients were looked at by gender, men were 7 (14%), and women were 12 (24%). One of the other major salivary glands – the ear-took damage to the salivary gland , that is, it accounted for 31 (62%) of the total, while males accounted for 13 (26%) and females for 18 (36%).

3 table

Diseases of the salivary glands in relation to sex

| | men (n=20) | | women (n=30) | | overall (n=50) | |
|---|---|---|---|---|---|---|
| | абс | % | абс | % | абс | % |
| Ear-picked up salivary glands | 13 | 41,9 | 18 | 58,1 | 31 | 49 |
| War fought salivary glands | 7 | 36,8 | 12 | 63,2 | 19 | 51 |

Thus, The conducted retrospektiv analysis showed that the ax of salivary gland diseases met more in men, at a cocktail-worthy age. Relatively frequent acute forms of the disease require timely early diagnosis and treatment of these patients. Scientific research carried out abroad and in our country on the detection of pathogenetics of the disease and improvement of methods of treatment of patients shows that this problem is relevant.

## Conclusions

MSCT - sialography is a highly informative method of diagnosing various diseases of the large salivary glands. MSCT - sialography allows us to establish anatomical and topographic features of the development of the ductal system and the parenchyma of the salivary glands, among which additional lobules predominate 46.0%. The informative value of MSCT sialography in the detection of salivary gland diseases is: sensitivity - 97.8%; specificity - 95.9%; accuracy - 95.4%; prognosticality of a positive result - 90.2%; prognosticality of a negative result - 96.6%. Most diseases of the salivary glands have a characteristic MSCT sialographic picture, allowing for their differential diagnosis. Diagnostic information obtained with MSCT - sialography allows you to adequately plan the stage of surgical and conservative treatment of diseases of the salivary glands, which improves the quality of treatment and reduces the number of complications.

## Practical recommendations

1. To diagnose diseases of the salivary glands, a comprehensive clinical and radiation examination is required, with the leading role of MSCT sialography to assess the ductal system.
2. MSCT sialography should be performed according to a two-stage method, with primary active scanning and subsequent sialography using the Romacheva method.
3. In the diagnosis of LV neoplasms, in order to clarify the nature of parenchymal changes, including the assessment of vascularization of the process, MSCT sialography should be supplemented with ultrasound with color Doppler mapping.

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