



OPTIMIZATION OF COMPLEX TREATMENT OF GUM EPULIS BY MEANS OF MAGNETIC-INFRA-RED-LASER RADIATION

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✓ *Resume*

Epulis is a tumor-like formation of the gums, observed during teething, occurs equally often in both adults and children. In the female, epulis is observed several times more often than in the male. It is characterized by frequent localization mainly in the area of teeth such as incisors and premolars. The article provides a detailed description of the complex treatment of epulis of various sizes by means of magnetic-infrared-laser radiation.

Keywords: epulis, supra-gingival formation, prevention, complex treatment, magnetic infrared laser radiation.

ОПТИМИЗАЦИЯ КОМПЛЕКСНОГО ЛЕЧЕНИЯ ЭПУЛИСА ДЕСНЫ ПОСРЕДСТВОМ МАГНИТНО-ИНФРАКРАСНО- ЛАЗЕРНОГО ИЗЛУЧЕНИЯ

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✓ *Резюме*

Эпулис представляет собой опухолевидное образование десён, отмечающееся в период прорезывания зубов, встречается одинаково часто как у взрослых, так и у детей. У представителей женского пола эпулис наблюдается в несколько раз чаще, чем у мужского. Характеризуется частой локализацией преимущественно в области таких зубов, как резцы и премоляры. В статье приведено подробное описание комплексного лечения эпулиса различных размеров посредством магнитно-инфракрасно-лазерного излучения.

Ключевые слова: эпулис, наддесневое образование, профилактика, комплексная лечения, магнитно-инфракрасно-лазерного излучения.

MAGNIT-INFRAQIZIL-LAZER NURLANISHYORDAMIDA MILK EPULISINI MAJMUAVIY DAVOLASHNI OPTIMALLASHTIRISH

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Epulis milklarning o'smasimon hosilasi bo'lib, tishlarning yorib chiqish davrida qayd etiladi, kattalar va bolalarda ham bir xil kuzatiladi. Ayol vakillarida epulis erkaklarga qaraganda bir necha marta tez-tez uchraydi. Asosan, qoziq va premolar tishlar sohasida uchrashi bilan tavsiflanadi. Maqolada turli o'lchamdagi epulisni magnit-infraqizil-lazer nurlanishi orqali majmuaviy davolashning batafsil tavsifi keltirilgan.

Kalit so'zlar: epulis, milk usti hosilasi, oldini olish, majmuaviy davolash, magnit-infraqizil-lazer nurlanish.

Relevance

Epulis in the practice of a dentist-surgeon are very common. More often, epulis is localized in the area of small molars, but this tumor can occur at the level of all teeth of the upper and lower jaws [3, 9, 12, 13, 17]. Benign tumors of the maxillofacial region are divided into non-ontogenic and odontogenic, i.e. genetically and structurally related to teeth or their follicles [7, 14, 20]. The source of epulis growth is usually the periodontium, so they practically do not develop on the toothless jaw.

The predisposing factor for the growth of epulis is, as a rule, chronic trauma: prolonged irritation of the alveolar process by the sharp edge of the filling, the sharp edge of the tooth, an inferior prosthesis [1, 6, 16, 19]. Apparently, there are other reasons, since the occurrence of epulis cannot always be explained by the above circumstances. This tumor does not cause pain if it is not traumatized by teeth antagonists.

Clinically, epulis is a mushroom-like growth on a more or less pronounced pedicle. The color of the epulis is somewhat different from the surrounding mucous membrane: in some cases it is reddish-brown, in others cyanosis prevails. The size of the epulis increases gradually. Extremely rarely there is a rapid growth of the tumor, which can lead to a violation of the functions of chewing, swallowing [4, 10, 15, 20].

Many years of experience show that influences are recorded in 60% of cases after surgical removal of epulis. Therefore, there is a need to look for new modern methods in the treatment of epulis, magnetic infrared laser radiation increases the effectiveness of treatment of epulis [2, 8, 18, 20]. This method is a no medicamentoz method. It has hemostatic, anti-inflate properties, improves metabolism and blood circulation in the tissues, which encourages the widespread use of this method in surgical dentistry [5, 11, 15, 20].

The purpose of the study. To study the main symptoms of malignant and benign epulis, as well as to develop a treatment regimen by means of magnetic infrared laser radiation with the «Sogdiana» apparatus.

Innovation of work. After complex treatment of epulis, the microbiological condition of the oral cavity improves. When epulis are treated according to a scheme developed by magnetic-infrared-laser irradiation, the reduction time and reduction of complications are achieved.

Materials and methods

The study was conducted by us at the Department of Surgical Dentistry and Maxillofacial Department of the Bukhara State Medical Institute on the basis of the Bukhara Regional Multidisciplinary Medical Center of Bukhara. 44 patients of the department of maxillofacial surgery with epulis of various localization were examined for the period from September 2020 to September 2021. The main inclusion criterion was the presence of the epulis of the jaws and gums. Main dental inspection methods (objective and subjective), methods of microbiological examination.

Results and its discussion

They are a traumatic factor and an etiological moment in the onset of a chronic productive inflammatory process with the formation of granulations, which, as they mature, turn into a mature connective fibrous tissue. Angiomatousepulis occurred in 5 patients in the form of a limited formation on the gum. It differed from the fibromatous one in a brighter color, a relatively soft texture, and mainly bleeding, which occurs not only during injury, but also independently. Microscopically, in angiomatousepulis, a large number of blood vessels were determined against the background of maturing fibrous tissue. One patient was diagnosed with peripheral giant cell granuloma.

According to the clinical picture, it is similar to the epulis described above, however, it has characteristic features: a bluish-brown color, a bumpy surface with areas of ulceration and imprints of antagonist teeth, a dense elastic consistency, its bleeding is noted. Histologically, the lesion is characterized by a large number of multinucleated giant cells. The stroma is abundantly vascularized and rich in cells; strands of fibrous tissue are rare. There are hemosiderin granules. After excision, recurrence often occurs. Malignant is characterized by pain, rapid growth, edema, destruction of the tips of the roots of the tooth, perforation of the cortical plate, a diameter of more than 2 cm.

In the course of an x-ray examination, there is a definition of clear boundaries of the focus of lysis of an oval or rounded shape with trabeculae running transversely. There is thinning of the cortical layer and bone swelling. Differential diagnosis, according to experts, is performed with such ailments: false epulis, or gum polyp; dental pulp polyp; osteoclastoma.

In most cases, the granuloma is localized on the lower jaw anteriorly from the first molar. In the course of our - In 21 patients, epulis was located in this area; - in 9 examined patients in the area of the incisors on the upper jaw; - in 3 patients in the region of the premolars of the upper jaw; - 1 patient was diagnosed with a malignant form, research we found: There are two clinical forms: malignant and benign. The benign form is characterized by slow growth, smaller size, and asymptomatic course.

Taking into account the clinical and morphological features, fibromatous, angiomatous and giant cell epulis are distinguished.

With fibromatous epulis, 5 patients were identified. This form was a dense painless growth of pink, often with a hyperemic edge, irregularly shaped, with clear boundaries on a fairly wide base. Localized, as a rule, on the gum on the vestibular side. In 4 cases, it spread through the interdental gap in the form of a saddle on the intraoral surface. Often, a tooth located in the epulis area had either a poorly stored metal crown or filling, or a carious cavity, or a prosthesis clamp, etc.

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The stroma is abundantly vascularized and rich in cells, strands of fibrous tissue are rare. According to the clinical picture, it is similar to the epulis described above, but it has characteristic features: a bluish-brown color, a bumpy surface with areas of ulceration and imprints of antagonist teeth, a densely elastic consistency, its bleeding is noted. Histologically, the lesion is characterized by a large number of multinucleated giant cells. hemosiderin. After excision, a relapse often occurs.

Malignant is characterized by pain, rapid growth, edema, destruction of the tops of the roots of the tooth, perforation of the cortical plate, a diameter of more than 2 cm.

In the course of X-ray examination, clear restrictions of the focus of lysis of an oval or rounded shape with trabeculae going transversely are determined. There is a thinning of the cortical layer and bone swelling. Differential diagnosis, according to experts, is performed with such ailments: false epulis, or g The diagnosis is made on the basis of a specialist examination and histological examination. The method of differential diagnosis is used, which excludes the presence of hypertrophic gingivitis in the patient. It has similar symptoms to epulis. An X-ray is also used for diagnosis. um polyp; dental pulp polyp; osteoblastoclastoma.

In the course of X-ray examination, clear restrictions of the focus of lysis of an oval or rounded shape with trabeculae going transversely are determined. There is a thinning of the cortical layer and bone swelling. Differential diagnosis, according to experts, is performed with such ailments: false epulis, or gum polyp; dental pulp polyp; osteoblastoclastoma.

Treatment of benign epulis is carried out by removing the neoplasm. An incision is made at a short distance from the epulis, after which it is removed together with the periosteum. Treatment of fibromatous and angiomatous epulis does not always require surgical intervention.

The first and main is the elimination of traumatic factors in the form of removing the bridge prosthesis, correcting the filling, treating carious teeth, removing roots, normalizing the bite. As an electrode, it is better to use a "wire loop" or a "small knife" available in the set to the device. During coagulation, the surgical field is isolated from saliva and dried. In the process of coagulation, the film of the coagulant formed on the electrode is periodically removed.

After the measures taken, usually after 2-3 weeks, there is a sharp decrease in the size of the formation on the gums, and in some cases its disappearance. . If there is no complete regression of the epulis (this occurs more often with large granulomas localized in the region of several teeth), then it thickens, contracts, becomes indistinguishable in color from the surrounding mucous membrane, and you should not rush to remove it, since the process of reverse development can last several months. If prosthetics are necessary, it is possible to remove the epulis. An incision is made at a short distance from the epulis, after which it is removed along with the periosteum.

Conclusion

Based on the studies carried out to optimize the treatment of jaw epulis using magnetic infrared laser beams, the following conclusions can be drawn: in the course of our research, we found that the malignant form of epulis is extremely rare. The most common form is fibromatous epulis. It should be noted that when eliminating the traumatic factors that provoked its appearance, surgical removal is not required. The scheme of complex treatment of patients with epulis by means of magnetic infrared laser radiation enhances the therapeutic effect and leads to a statistically significant reduction in the duration of treatment by 1.5 times; a decrease in the frequency of relapses by 5 times; an increase in the effectiveness of treatment by 3.2 times.

LIST OF REFERENCES:

1. Камалова М.К. Атавуллаев М.Ж. Оптимизация профилактики и лечения кариеса зубов у детей дошкольного возраста на основе комплексного медико-социального анализа // «Biomeditsina va amaliyot jurnali» - Ташкент, 2020. -Специальный выпуск. - С. 719-725.
2. Камалова М.К. Оценка результатов внедрения программ профилактики кариеса зубов у детей дошкольного возраста // «Журнал Медицина и инновации» - Ташкент, 2021. - № 4. - С. 680-684.
3. Камалова М.К., Джураева А.А. Improvement of methods of treatment and prevention of candidiasis in young children // «Образование и наука в XXI веке» Международный научно-образовательный электронный журнал. - Россия, 2020. - № 9. - Т. 3. - С. 160-162.
4. Kamalova M. K., Sharipova G. I. Traumatic injuries of the oral mucosa in young children //New Day in Medicine 3(35)2021 117-121 <https://cutt.ly/pQ6g6EG>
5. Камалова М.К. Результаты оценивания клинико-экономической эффективности программ профилактики кариеса зубов у дошкольников // Доктор ахборотномаси. - Самарканд, 2021. - №1 (98). - С. 49-58.
6. Камиллов Х.П., Камалова М.К. Повышение эффективности комплексного лечения острого герпетического стоматита у детей // «Norwegian journal of the international science» Международный научный журнал. - Норвегия, 2017. -№10. - С. 35-37.
7. Камиллов Х.П., Камалова М.К. Современные подходы в лечении хронического рецидивирующего герпетического стоматита у детей // «Достижения науки и образования» Международный научный журнал. - Москва, 2018. - №3 (25). - С. 46-48.
8. Маслак Е.Е., Камалова М.К. Проблемы организации стоматологической помощи детям дошкольного возраста // Biomeditsina va amaliyot jurnali. - Ташкент, 2020. - № 1. - С. 26-32.
9. Eronov Yo.Q., Kamalova M.Q. Evaluation of caries prevalence in children with cerebral palsy // Academia: An International Multidisciplinary Research Jurnal. - India, 2020. - Vol. 10. - P. 85-87.
10. Kamalova M.K., Rakhimov Z.K., Pulatova Sh.K. Optimization of prevention and treatment of dental caries in children preschool age // «New Day in Medicine» is a scientific, scientific and spiritual journal. - Bukhara, 2019. - № 4 (28). - С.166-168.
11. Kamalova M.Q., Fomenko I.V., Dmitrienko D.S., Matvienko N.V., Arjenovskaya E.N., Gevorkyan A.G., Nikitina K.V., Maslak E.E. Reasons for 1-17-year-old children to visit a dentist during the Covid-19 pandemic // European Journal of Molecular & Clinical Medicine. - England, 2020. - Vol. 7. - Issue 7. - P. 546-558.
12. Kamalova M.K., Sharipova G.I. Features of treatment and prevention of traumatic injuries of the oral mucosa in preschoolers // World Bulletin of Public Health. - Germany, 2021. - Vol. 4. - P. 69-72.
13. Kamalova M.K., Sharipova G.I. Results of screening of traumatic injuries of the oral cavity of preschool children // Asian Journal of Multidimensional Research. - India, 2021. - Vol 10, - Issue 8. - P. 32-36.
14. Kamalova M.K., Sharipova G.I. The main function and histological structure of the oral mucosa // Asian journal of Pharmaceutical and biological research. - India, 2021. - Vol. 10. - Issue 3. - P. 190-199.
15. Kamilov X.P., Kamalova M.Q. Use of lazer therapy in the treatment of chronic recurrent herpetic stomatitis for children // «European science review» Scientific journal. - Vienna, 2018. - № 7-8. - С. 120-121.
16. Maslak E.E., Fomenko I.V., Kasatkina A.L., Kamennova T.N., Khmizova T.G., Nikitina K.V., Kamalova M.Q. Reasons for primary teeth extraction in children aged 1-14 years: a retrospective study // Palarch's journal of archaeology of egypt. - Netherlands, 2020. - Vol. 17. - №6. - P. 13947-13964.
17. Maslak E.E., Naumova V., Kamalova M.Q. Relationship between General and Oral Diseases: Literature Review // American Journal of Medicine and Medical Sciences. - America, 2020. - Vol. 10. - №9. - P. 690-696.
18. Raximov Z.Q., Kamalova M.Q., Features of the immune status and possibility immunocorrection at post-traumatic inflammatory complications at patients with jaw fractures // Asian Journal of Multidimensional Research, - India, 2020. Vol 9, Issue 4. - P. 19-22.
19. Vokhidov U.G., Kamalova M.Q. The use of various techniques in the treatment of traumatic injuries of the oral mucosa in children // European Journal of Molecular & Clinical Medicine. - England, 2020. - Vol. 7. Issue 7. - P. 3743-3748.
20. Kamalova M.Q. Evaluation of economic effectiveness of prevention and treatment of dental caries in preschool children // Биология ва тиббиёт муаммолари, "Women's health - the health of the nation" Collection of materials International Scientific and practical conference. - Samarkand, 2021. - №1,1 (126). - P. 475.

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