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THE EFFECT OF DENTAL TREATMENT-PROFILACTICS ON THE CONDITION OF ORAL CAVITY ORGANS IN CHILDREN WITH TRAUMATIC STOMATITIS

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✓ *Resume*

The study of the condition of the oral cavity in children with traumatic stomatitis revealed a number of clinical-pathological changes and a number of marked complex pathological processes. Thus, with the development of caries complications in an early and aggressive, very short period of time, high caries of the teeth with caries, almost asymptomatic development of pulpitis and periodontitis, several carious cavities on the chewing surface of permanent teeth were identified. Pathological changes in periodontal tissues become more pronounced and prevalent during the period of exacerbation of the underlying disease. Low and very low levels of oral hygiene are identified, and the lack of knowledge of children and their parents about the rules of oral care exacerbates the situation.

Keywords: Traumatic stomatitis, young child, inflammation, oral mucosa, prevention, treatment.

ВЛИЯНИЕ СТОМАТОЛОГИЧЕСКОГО ЛЕЧЕБНО-ПРОФИЛАКТИЧЕСКОГО КОМПЛЕКСА НА СОСТОЯНИЕ ОРГАНОВ РОТОВОЙ ПОЛОСТИ У ДЕТЕЙ С ТРАВМАТИЧЕСКИМ СТОМАТИТОМ

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✓ *Резюме*

Изучение статуса полостей рта у детей с травматическим стоматитом выявило клинические и патологические изменения и ряд подписанных патологических процессов. Таким образом, ранний и агрессивный, развитие осложнений автомобилей кариетов, поверхность кафедры и периодонтита почти установлена на поверхности постоянных зубов, поверхность постоянных зубов отмечена. Патологические изменения в периодической ткани более представлены и распределены в период заболевания при отягчающих обстоятельствах. Низкий и низкий уровень гигиены полости рта, отсутствие знаний о правилах полости рта у детей и их родителей углубляет ситуацию.

Ключевые слова: Травматический стоматит, маленький ребенок, воспаление, слизистая оболочка полости рта, лечение.

ТРАВМАТИК СТОМАТИТ БИЛАН ОҒРИГАН БОЛАЛАРДА ОҒИЗ БЎШЛИҒИ АЪЗОЛАРИНИНГ ҲОЛАТИГА СТОМАТОЛОГИК ДАВОЛАШ-ПРОФИЛАКТИКА КОМПЛЕКСИНИНГ ТАЪСИРИ

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Травматик стоматит билан оғриган болаларда оғиз бўшлиғи аъзоларининг ҳолатини ўрганиш қатор клиник-патологик ўзгаришлар ва қатор белгили комплекс патологик жараёнларни аниқлаб берди. Шундай қилиб, эрта ва агрессив кечувчи, жуда қисқа вақт оралиғида кариес асоратларининг ривожланиши билан тишларнинг кариес билан юқори зарарланиши, пуллит ва периодонтитнинг деярли аломатсиз ривожланиши, доимий тишларнинг чайнов юзасида бир нечта кариоз бўшлиқлари белгиланган. Пародонт тўқималарида патологик ўзгаришлар асосий касаллик кескинлашган даврда кўпроқ ифодаланган ва тарқалган бўлади. Оғиз бўшлиғининг паст ва жуда паст гигиена даражаси аниқланиб, болалар ва уларнинг ота-оналарида оғиз бўшлиғини парваришлаш қоидалари бўйича билимлар йўқлиги вазиятни чуқурлаштиради.

Калит сўзлар: Травматик стоматит, ёш бола, яллиғланиш, оғиз бўшлиғи шиллиқ қавати, олдини олиш, даволаш.

Relevance

The purpose of the study: Elimination of etiological risk factors for traumatic stomatitis in young children. Evaluation of the clinical features of traumatic stomatitis in young children. Evaluation of histological examination of the oral mucosa in traumatic stomatitis.

Object of research: Bukhara regional "Children's Dental Clinic" Children aged 1-5 years.

Research materials: ESD organs, oral fluid (saliva), blood, oral cavity exfoliation.

Research methods:

1. Dental (visual, instrumental, instrumental dental examination).
2. Microbiological methods of studying samples of oral fluid from the oral cavity (microscopic examination, local examination).

Scientific novelty of the research:

The effectiveness of histological examination methods for the detection of morphological disorders of the oral cavity in children with traumatic stomatitis has been proven.

Scientific significance of the research results:

- The study allows to substantiate the frequency of traumatic stomatitis in children;
- Individual treatment regimens are used in patients with traumatic STIs;
- Improved methods of clinical, microbiological, immunological and histological research of traumatic stomatitis.

Practical significance of the research results:

- diagnostic methods and complex treatment regimen reduce the time and duration of treatment of the disease, reduce patient visits due to complications that occur after trauma to the oral mucosa;
- to use them as a new source for practical use by our dentists.

Conclusions on the appropriateness of the study:

The results of the study expanded the current understanding of the developmental mechanisms and modern approaches to the treatment of iatrogenic traumatic areas of OCD in patients with traumatic stomatitis.

The complex of dental treatment-prophylaxis carried out against the background of treatment of the underlying disease in children with traumatic stomatitis had different effects on the complex changes detected in the condition of the oral organs of sick children [3,2].

A study of the dynamics of changes in the indicators studied in mixed saliva in children with traumatic stomatitis revealed a number of positive changes under the influence of the course of the dental treatment-prevention complex. In the saliva of children in the main group, SST increased from the initial value of 0.33 ± 0.02 after 30 days of treatment to 0.37 ± 0.02 in the small group, which is 1.1 times higher than the initial value and generally 6 months after treatment remains [4,6].

In subgroup 2, this indicator increased from the initial 0.32 ± 0.01 to 0.38 ± 0.02 after the course of treatment, which is 1.2 times higher than the initial level, and remains at the level achieved after 3 months of treatment. decreases, but is maintained above the initial values. In the additional group, SST increased to 0.36 ± 0.01 degrees in subgroup 1, which is 1.2 times higher than the initial level, and gradually decreases after 3 and 6 months, but remains higher than the initial level. The dynamics of change of this indicator in mixed saliva in subgroup 2 has such a character (Table 4.3). In the next

study, the viscosity of the mixed saliva decreased from 4.10 ± 0.28 to 3.75 ± 0.28 in the 1st subgroup in the main group, which is 1.1 times lower than the initial value, and in the 2nd subgroup it was 1.2 times.

After 3 and 6 months, the rates remain lower than initially and continue to decline slightly compared with post-treatment data. The study of acid-base balance in the oral fluid of sick children showed the following dynamics of changes in pH.

In subgroup 1, in the form of the main group, this indicator rises from the initial 6.50 ± 0.06 to 6.75 ± 0.29 degrees after a course of dental complex, which is more than 1 time higher, in subgroup 2 - the viscosity of the oral fluid in the first 6, It rises from 50 ± 0.10 to 6.79 ± 0.29 degrees, which is almost 1.1 times higher. After 3 and 6 months of follow-up, it continued to rise significantly compared to the level achieved, but was maintained above the initial data. In the additional group, the viscosity of the mixed saliva after the course of treatment increased to a sufficiently significant value from the initial 6.40 ± 0.22 to 6.75 ± 0.63 , which is 1.1 times higher than the initial value, and in the 2nd subgroup 1.5 times higher. During the 3- and 6-month follow-up period, the pH of the oral fluid was generally maintained at the level achieved after treatment, but decreased significantly [8,9].

In the study groups of children with traumatic stomatitis, all of the studied saliva parameters varied slightly, but remained largely at the initial data level. Comparison of the dynamics of changes in the above and mixed saliva parameters in the group of patients undergoing standard treatment in the form of treatment subgroups and oral cavity sanitation shows a sufficiently high effectiveness of the proposed dental treatment-prophylactic complex in children with traumatic stomatitis, provided that all rules of oral hygiene are followed [1,2,4].

Naturally, the frequency of encounters was significantly reduced when was used, with an improvement in the inflammatory response of periodontal tissue and an increase in oral hygiene. Thus, if in the main group in the 1st and 2nd subgroups in the initial data the incidence of was 65.7%, 78.6%, respectively, decreased to 51.4% and 55.3%, in the additional group - 72.73%. and 87.10%, significantly decreased after the course of treatment, to 54.6% and 62.3%, respectively [5,9,10].

This decrease is evidenced by the improvement of periodontal tissue condition in sick children and the high efficacy of the proposed complex. Subsequent observations confirm the positive values obtained after 3 and 6 months after treatment, although they are somewhat imperceptible, but are reliably kept below the initial data. Thus, the intensity and frequency of periodontal tissue injury in the additional group is higher compared to the value in the main group, but also the results obtained after the proposed are significantly better in all manifestations of traumatic stomatitis, the significance of the results in subgroup 2.

The high effectiveness of the use of in children with in the mandatory adherence to individual and professional hygiene in the oral cavity according to the proposed scheme in children with.

In a number of foreign studies, scientists have shown an improvement in the condition of patients with traumatic stomatitis from stomatitis in the treatment of diseases of the oral cavity, as well as a decrease in inflammatory laboratory parameters of traumatic activity. Patients with traumatic stomatitis and its variants have been shown to have decreased immunity and low levels of immunoglobulins compared to a healthy child. Treatment of patients with multiple stomatitis often begins with the use of topical steroids, analgesics, and antimicrobials in addition to strict adherence to oral hygiene and appropriate use of medications. Today there is a decrease in local immunity in the oral cavity, dysfunction of the salivary glands, enlargement of lymph nodes [2,5].

Traumatic stomatitis can occur more at home, in work, in sports. Injuries to the organs of the oral cavity with iodine bodies and are caused by bad habits (constant biting of the lips, cheeks, constantly putting something in the mouth of the child). In such patients, first of all, it is necessary to quickly organize dental care and take the necessary measures. First of all, it is necessary to eliminate the situation that causes trauma, that is, to get rid of bad habits. In young children, this process is painful [1,2].

Conclusion

To do this, we first treat the oral cavity with antiseptic using modern mouthwashes. Then for these we use flavonoid-based drugs, which is a modern method.

LIST OF REFERENCES:

1. Sharipova G. I. Paediatric Lazer Dentistry // International Journal of Culture and Modernity ISSN: 2697-2131., Volume 12 (Jan 2022). -P. 33-379.
2. RS SH, SG Sharopov, & NN Kazakova. Forecasting the width of the soft tissue in the dental implantation area// European Journal of Research Development and Sustainability. – 2021. №5(2). – P. 145-147.
3. Sharipova G. I. Light and laser radiation in medicine // European journal of modern medicine and practice Vol. 2 No. 1 (2022) EJMMP ISSN: 2795-921X.-P. 31-36
4. Sharipova Gulnihol Idiyevna. The effectiveness of the use of magnetic-infrared-laser therapy in traumatic injuries of oral tissues in preschool children//Academic leadership. ISSN 1533-7812 Vol:21 Issue 1
5. Sharipova Gulnihol Idiyevna. Discussion of results of personal studies in the use of mil therapy in the treatment of trauma to the oral mucosa// European Journal of Molecular medicine Volume 2, No.2, March 2022 Published by ejournals PVT LTDDOI prefix: 10.52325 Issued Bimonthly Requirements for the authors.
6. Олимова Д.В. Синдром жжения во рту: обзор его диагностического и терапевтического подхода. // the best innovator in science – 2022. – С. 37-43.
7. Olimova D.V. Differential diagnostic methods galvanosa and glossodinia in ambulatory conditions. // galaxy international interdisciplinary research journal (GIIRJ) ISSN (E): 2347-6915 Vol. 10, Issue 1, Jan. (2022). – P. 524-526.
8. Olimova D.V. A complex approach to glossalgia treatment based on the current data on the specificity of its etiopathogenesis. //“BILIG – ILMIY FAOLIYAT” nashri <http://bilig.academiascience.or> - B. 141-146.
9. Olimova D. V. Use of modern methods in the treatment of glossalgia // Journal of Advanced Research and Stability ISSN: 2181-2608. - Special Issue | 2022. P – 197-200.
10. Sharipova Gulnihol Idievna. The use of flavonoid based medications in the treatment of inflammatory diseases in oral mucosa //Asian journal of Pharmaceutical and biological research 2231-2218 SJIF 2022:4.465 Volume 11 Issue 1 JAN-APR 2022. P-98-101

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