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FEATURES OF THE CONDITION OF THE ORAL CAVITY IN CHILDREN WITH CHRONIC PYELONEPHRITIS

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✓ ***Resume***

The connection between the condition of the oral cavity and general somatic diseases is constantly emphasized by dentists. This arouses the constant interest of researchers to study the features of the course of dental pathology against the background of some forms of somatic diseases. In the literature, there is information about the condition of the hard tissues of the teeth, periodontal tissues and the mucous membrane of the oral cavity in children with chronic pyelonephritis. Morphological association of pathological processes in children with chronic pyelonephritis is manifested by kidney and periodontal tissues, lymphocytic infiltration, fibrosis, damage to microvascular vessels. With the development of chronic pyelonephritis, structural and functional changes in periodontal tissues become dystrophic, accompanied by vasoconstriction of microvessels and tissue sclerosis.

Keywords: Chronic pyelonephritis, oral cavity, sick children, chronic renal failure, cytological examination.

ОСОБЕННОСТИ СОСТОЯНИЯ ПОЛОСТИ РТА У ДЕТЕЙ С ХРОНИЧЕСКИМ ПИЕЛОНЕФРИТОМ

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✓ ***Резюме***

На связь состояния полости рта и общесоматических заболеваний постоянно обращают внимание стоматологи. Это вызывает постоянный интерес исследователей к изучению особенностей течения стоматологической патологии на фоне некоторых форм соматических заболеваний. В литературе имеются сведения о состоянии твердых тканей зубов, тканей пародонта и слизистой оболочки полости рта у детей с хроническим пиелонефритом. Морфологическая ассоциация патологических процессов у детей с хроническим пиелонефритом проявляется в тканях почек и пародонта, лимфоцитарной инфильтрации, фиброзе, поражении сосудов микроциркуляторного русла. При развитии хронического пиелонефрита структурно-функциональные изменения в тканях пародонта приобретают дистрофический характер, сопровождающийся вазоконстрикцией микрососудов и склерозом тканей.

Ключевые слова: хронический пиелонефрит, полость рта, больные дети, хроническая почечная недостаточность, цитологическое исследование.

СУРУНКАЛИ ПИЕЛОНЕФРИТ БИЛАН ОҒРИГАН БЕМОР БОЛАЛАРДА ОҒИЗ БЎШЛИҒИ ҲОЛАТИНИНГ ХУСУСИЯТЛАРИ

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✓ ***Резюме***

Оғиз бўшлиғи ҳолати ва умумий соматик касалликлар ўртасидаги боғлиқлик стоматологлар томонидан доимий равишда таъкидланади. Бу тадқиқотчиларнинг соматик касалликларнинг айрим шакллари фонида тиш патологияси курсининг хусусиятларини ўрганишга доимий қизиқиш уйғотади. Адабиётларда сурункали пиелонефрит билан оғриган бемор болаларда тишларнинг қаттиқ тўқималари, периодонтал тўқималар ва оғиз бўшлиғи шиллиқ қаватининг ҳолати тўғрисидаги маълумотлар мавжуд. Патологик жараёнларнинг морфологик ассоциацияси сурункали пиелонефрит билан оғриган бемор болаларда буйрак ва периодонтал тўқималар, улар лимфоцитар инфилтрация, фиброз, микроваскуляр томирларнинг шикастланиши билан намоён бўлади. Сурункали пиелонефритнинг ривожланиши билан периодонтал тўқималарда структуравий ва функционал ўзгаришлар дистрофик бўлиб, микротомирларнинг вазоконстриксияси ва тўқималарнинг склерози билан бирга келади.

Калит сўзлар. Сурункали пиелонефрит, оғиз бўшлиғи, бемор болалар, сурункали буйрак етишмовчилиги, цитологик текширув.

Relevance

In children with chronic pyelonephritis, clinical-functional, biochemical and cytological indicators in the body and clinical symptoms of the main dental diseases in the oral cavity are based on correlation;

In children with chronic pyelonephritis, biophysical changes in oral fluid parameters, level of hygiene in the oral cavity, and inflammatory reaction in the periodontal soft tissues were found to be the main risk factors for the development of dental caries;

In children with chronic pyelonephritis, the high preventive effectiveness of remineralizing therapy with deep fluoridation was found;

Children with chronic pyelonephritis have been proven to have a positive effect of controlled tooth brushing, oral hygiene, selection of hygiene products, and quarterly visits to the dentist, which are part of the complex of treatment and prevention of dental diseases.

The purpose of the study: It consists of studying and evaluating the dental condition of children with chronic pyelonephritis and improving their caries prevention..

Object of research: Children from 1 to 7 years old.

Research methods:

Dental, biochemical, cytological, statistical methods are used

Conclusions on the appropriateness of the study:

In children with chronic pyelonephritis, during the exacerbation of the disease, changes in the functional parameters of the oral cavity fluid are observed: a decrease in the rate of salivation, an increase in the viscosity of the oral fluid, a decrease in its surface tension, mineralization potential, which are more pronounced (Velik L.P., 2000).

Stated in his thesis that the lesions of major and minor salivary glands were detected in children with end-stage chronic renal failure, which in some cases persist without clinical symptoms, 7% of them were diagnosed with sialadenosis accompanied by an increase in salivary glands. Xerostomia was observed in all children with chronic kidney failure, the amount of immunoglobulins of type A, M, G in mixed saliva, as well as the activity of aspartate aminotransferase, glutathione peroxidase, superoxide dismutase enzymes increases, which indicates a change in homeostasis. and the development of inflammatory-dystrophic processes manifested by clear changes in the mucous membranes of the oral cavity and hard tissues of the teeth. States that the severity of periodontal inflammatory processes in children with end-stage chronic renal failure increases with a decrease in bone density and a decrease in the level of oral hygiene, a lot of microcracks appear in the tooth enamel of such patients [11.12.13.14.15.16.17.18.19.20].

Children with end-stage chronic renal failure treated with hemodialysis are characterized by poor oral hygiene, destructive changes in the hard tissues of the teeth (Cengiz ML., Sumer R., 2009), decreased reactivity of the dental pulp, numerous denticles and stones, which complicates the

endodontic treatment outcome. (Orekhov D.E., 2009). Souza S.M. et al. (2008) reported that the majority (55%) of sick children complain of bad breath.

Similar data were obtained by many researchers in the study of the dental condition of children who were on hemodialysis due to chronic kidney failure: a decrease in the amount of saliva, poor oral hygiene, high intensity of dental caries and periodontal diseases. The authors also note the presence of pigmented dental deposits containing iron compounds (Nakhjavani Y.B., 2007; Martins S, 2008).

Takeuchi Y. (2007) and others found an increase in the number of microorganisms in the oral cavity when analyzing the data of oral microbiological studies using Dentocult System tests in children with chronic kidney disease.

Data on the prevalence of dental caries in children with chronic pyelonephritis are contradictory and, according to different authors, range from 69.8% (Kuchma S.N., 2008) to 97% (Belaya T.G., 2005).

A number of authors found that in children with chronic pyelonephritis, the amount of ionized calcium in blood and saliva is 1.5 times higher than in somatically healthy people. During the electrometry of hard dental tissues, a clear tendency to increase the electrical potential in children with chronic inflammatory diseases of the kidneys was found which indicates an increase in microspaces in enamel and dentin [1.2.3.4.5.6.7.8.9.10].

The National Guidelines for Pediatric Therapeutic Dentistry (2010) report the need for oral rehabilitation in more than half (62%) of children with chronic pyelonephritis. The authors suggested that the reactions of periodontal and renal tissues (hematuria, diffuse bleeding from gums) are similar due to high sensitivity to intoxication. In 1/3 of children with chronic pyelonephritis, in addition to changes in the gingival margin, dental deposits are noted in the form of dark brown, soft yellow or white plaque firmly attached to the neck of the teeth. Dark dense plaque can also be found in children without inflammatory changes in the periodontium. Thus, the authors identify a triad of symptoms characteristic of chronic pyelonephritis in the oral cavity: pallor of the mucous membrane, dark pigmentation and carious dentin in the neck of the teeth, trophic disturbance of the epithelial lining of the back of the tongue [21.22.23.24.25.26.27.28].

The study of literature data showed the prevalence of oral pathology in children with chronic kidney disease, but most of the studies are devoted to the terminal stage - chronic kidney failure, and the problem of dental pathology in children and adolescents with chronic pyelonephritis is not addressed.

According to modern concepts, dental caries and periodontal diseases are the main diseases that determine the structure of dental pathology in adults and children (Gadzhiev S.A., 2000; Sayfullina H.M., 2001; Samoylik M.M., 2005; Pogorzelska-Stronczak V, Bubilek-Bogacz A, Szporek W., 2001; Brogardh-Roth S., 2010; Widmer R.P., 2010). In this regard, the causes of these diseases, the risk factors, the nature of the disease, the clinical features of the disease, as well as various approaches to the treatment and prevention of diseases that are very important for humans are being developed.

Dental caries in childhood is a multifactorial disease with many biological (Seow W.K., 1998) risk factors (Reisine S., Douglass J.M., 1998; Vouse W.T., Den Besten P.K., 2010). Also, there are risk factors such as artificial feeding of the child during infancy (Dini EX., Holt R.D., Bedi R., 2000), disruption of the microflora of the oral cavity (Berkowitz R.J., Jones P., 1985), frequent use of easily digestible foods. Carbohydrates (Gordon Y., Reddy J., 1985), poor oral hygiene (Seow W.K., Amaratunge A., 1996), intraurethral and postnatal developmental disorders (Lai P.Y., Seow W.K., 1997; Thitasomakul S., Piwat S., 2009), malnutrition (Psoter W.J., Reid B.C., 2005), low level of parental knowledge of diseases (Marino R.V., Bomze K., 1989) are among them.

In 1998, the International Life Sciences Institute (ILSI) published the monograph "Caries Preventive Strategies" on the etiology, pathogenesis and prevention of dental caries. In this article, the authors identify two groups of factors that should be taken into account when assessing caries risk. The first group includes factors that damage dental tissues - plaque, easily digestible carbohydrates, the composition and functions of saliva. The second group includes characteristics that are related to the development of caries, but not directly involved: socio-economic factors, dental diseases and general somatic diseases.

The current theory of caries etiology and pathogenesis recognizes the primacy of the chemical-parasitic concept. Many researchers have shown the polyetiological nature of periodontal diseases, and the inflammatory reactions caused by the microflora of the oral cavity play a major role in their development (Grigoryan A.S., 2007).

Colonization of tooth surfaces by bacteria is an important etiological factor in the most common diseases of the oral cavity - dental caries and periodontal diseases. In foreign literature, there are many studies showing the leading role of Streptococcus mutans in the occurrence and development of caries in temporary, removable and permanent teeth. Adhesive polysaccharides help bacteria to find their place in plaque and ensure that they adhere to enamel. the connection of enamel apatite surface with bacterial polysaccharides is provided by hydrogen bonds, Sa2+ ions and adhesin proteins. Adhesin proteins include a glycoprotein with a molecular weight of 200 kDa secreted by streptococci [29.30.31.32.33].

Conclusion

The connection between the condition of the oral cavity and general somatic diseases is constantly emphasized by dentists. This arouses the constant interest of researchers to study the features of the course of dental pathology against the background of some forms of somatic diseases. In the literature, there is information about the condition of the hard tissues of the teeth, periodontal tissues and the mucous membrane of the oral cavity in children with chronic pyelonephritis. Morphological association of pathological processes in children with chronic pyelonephritis is manifested by kidney and periodontal tissues, lymphocytic infiltration, fibrosis, damage to microvascular vessels. With the development of chronic pyelonephritis, structural and functional changes in periodontal tissues become dystrophic, accompanied by vasoconstriction of microvessels and tissue sclerosis.

LIST OF REFERENCES:

1. Шадиева Ш., Гиязова М. Сочетанная патология: заболевания пародонта и гастродуоденальной зоны// Stomatologiya, 80-83. 2021
2. Шадиева Ш,Ш. Изменение стоматологического статуса и качества жизни у пациентов с helicobacter pylori- ассоциированнной функциональной диспепсией// Биология и интегративная медицина, 424-426.2021.
3. Шадиева Ш., Гиязова М. Коморбидность болезней пародонта и желудочно-кишечного тракта // Общество и инновации 2 (4/S), 424-428. 2021.
4. Шадиева Ш.Ш. Характеристика системы иммунитета у больных с хроническим генерализованным пародонтитом // Современные инновации, 38-39. 2019.
5. Шадиева Ш.Ш. Цитокиновый статус и система неспецифической защиты полости рта в динамике развития воспалительных заболеваний тканей пародонта // Новый день медицины 4(32)2020 707-709 https://cutt.ly/fz5BToR
6. Shukhratovna S.S., Sadikovich A.A. The role of protective factors of blood and oral fluid in inflammatory periodontal diseases // European science review, 220-224. 2018
7. 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
8. Sharipova Gulnihol Idiyevna. Discussion of results of personal studies in the use ofmil therapy in the treatment of trauma to the oral mucosa // European Journal of Molecular medicineVolume 2, No.2, March 2022 Published by ejournals PVT LTDDOI prefix: 10.52325Issued Bimonthly Requirements for the authors.
9. 9. Шодиева Ш.Ш., Алимов А.С., Хаджиметов А.А. Установление характера изменений белка острой фазы-лактоферрина в слюне при пародонтите различной степени тяжести // Российская стоматология 9 (1), 129-129. 2016.
10. Shadieva S.S., Alimov A.S. The role of protective factors of blood and oral fluid in inflammatory periodontal diseases // European Science Review, 220-224. 2018.
11. Mirsalikhova F.L., Eronov Y.K., Radjabov A.A. Prevention and treatment of caries in children with cerebral palsy //ACADEMICIA: An International Multidisciplinary Research Journal. – 2019. – Т. 9. – №. 12. – С. 68-70.
12. Мирсалихова Ф.Л. Минимально инвазивный метод лечения кариеса зубов у детей //Стоматология детского возраста и профилактика. – 2018. – Т. 17. – №. 1. – С. 28-30.
13. Мирсалихова Ф.Л. Отсроченное пломбирование при кариесе постоянных зубов у детей с несформированными корнями //Клиническая стоматология. – 2018. – №. 1. – С. 4-7.

14. Мирсалихова Ф.Л. Минимально щадящий подход к лечению кариеса зубов у детей //Актуальные вопросы стоматологии. – 2017. – С. 238-241.
15. Mirsalikhova F.L. Efficiency of the micropreperation method in treatment of children caries // Scientific researches for development future: medicine and natural science San Francisco, USA 15may. – 2018.
16. Mirsalikhova F.L. The importanceof biophysical properties and mineralizing function of salives in children during cutting of constant teeth period //International Conference Science, Research, development Philology, Sociology and culturologyBerlin30-31.05. – 2018.
17. Lukmonovna M.F. Upgraded approach and methods of use of modern theory comprehensive prevention programs dental caries in children //European science review. – 2016. – №. 9-10. – С. 110-112.
18. 18.Мирсалихова Ф.Л. Особенности биофизических свойств и минерализующей функции слюны у детей в период прорезывания постоянных зубов //Клиническая стоматология. – 2016. – №. 4. – С. 4-6.
19. Mirsalikhova F.L. Indications for the Comprehensive Prevention and Treatment of Dental Caries in Children with Cerebral Palsy Eronov Yo. K //Annals of RSCB. – 2021. – Т. 25. – №. 1. – С. 5705-5713.
20. 20.Мирсалихова Ф., Хамидов И. Характеристика микробиоценоза мягких тканей пародонта у школьников // Stomatologiya. – 2019. – Т. 1. – №. 4 (77). – С. 40-42.
21. Mirsalikhova F.L. et al. Implementation of Comprehensive Prevention of Dental Caries in Children with Cerebral Palsy //International Journal of Human Computing Studies. – Т. 2. – №. 6. – С. 22-24.
22. Мирсалихова Ф. Современные методы диагностики кариеса зубов у детей //Stomatologiya. – 2016. – Т. 1. – №. 4 (65). – С. 115-121.
23. Эронов Ю.К., Анализ для определения особенностей лошлы-ющенко-краснагорского у детей церебральной перспективы с характеристиками штаммового состава//Новый день в медицине 2(30)2020 267-269 https://cutt.ly/PvstDrh
24. Эронов Ю.К., Раджабов А.А. Оценка распространенности кариеса у детей с ДЦП//Новый день в медицине 2(30)2020 625-626 https://cutt.ly/KvPlZlc
25. Eronov Y. Q., Mirsalixova F. L. Treatment of chronic catarrhal gingivitis in children with disabilities improvement //World Bulletin of Social Sciences. – 2021. – Т. 3. – №. 10. – С. 71-74.
26. Eronov Y. Q., Mirsalixova F. L. Diagnosis, prophylaxis and treatment of chronic catarrhal gingivitis in children with disabilities improvement //World Bulletin of Social Sciences. – 2021. – Т. 3. – №. 10. – С. 67-70.
27. Eronov Y. Q., Mirsalixova F. L. Dynamics of the prevalence of diabetes and the study of dental status in children of the bukhara region //International Journal of Applied Research. – 2019. – Т. 5. – С. 151.
28. Eronov Y. K., Mirsalikhova F. L. Indications for the comprehensive prevention and treatment of dental caries in children with cerebral palsy //Annals of the Romanian Society for Cell Biology. – 2021. – Т. 25. – №. 1. – С. 5705-5713.
29. Eronov Y. Q., Kamalova M. Q. Evaluation of caries prevalence in children with cerebral palsy //Academicia: an international multidisciplinary research journal. – 2020. – Т. 10. – С. 85-87.
30. 30.Эронов Ё., Мирсалихова Ф. Имконияти чекланган болаларда суринкали катарал гингивитларни замонавий даволаш усуллари //Медицина и инновации. – 2021. – Т. 1. – №. 4. – С. 681-685.
31. 31.Раджабов А.А., Раджабов А.Б., Темирова Н.Р., Камалова Ш.М. Оценка результатов первичной хейлопластики у детей с врожденной двусторонней расщелиной верхней губы и нёба// Электронный научный журнал «Биология и интегративная медицина». - 2017. - № 5. - С. 36-46.
32. Axtamovich R. A. Improvement of Treatment and Prevention of Fluorosis in Children of School Age //Middle European Scientific Bulletin. – 2022. – Т. 22. – С. 170-172.
33. Axtamovich R. A. Evaluation of the Results of Primary Cheiloplasty in Children with Congenital Bilateral Cleft Lip and Palate //Middle European Scientific Bulletin. – 2022. – Т. 22. – С. 173-177.

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