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## DEVELOPMENT OF DENTAL DISEASES IN PREGNANT WOMEN

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**Relevance of the study.** In most large epidemiological studies, infectious-inflammatory diseases in the oral cavity - carious lesions of the teeth, chronic general periodontitis, increase the risk of developing cardiovascular diseases, diabetes, obesity, respiratory diseases of the upper respiratory tract. Infections, various complications of the gestation period, and negative results in childbirth have been determined.

In particular, the presence of infectious-inflammatory lesions of periodontal tissues during pregnancy in women increases the risk of fetal growth retardation syndrome, premature delivery, low birth weight babies, the formation of preeclampsia, and increased maternal mortality. will appear. At the same time, many scientists have proven that the risk of gestational complications is low in the development of inflammatory-destructive diseases in periodontal tissues.

The conditions for admission of patients to general clinical groups were as follows:

1. A woman's pregnant to be
2. Pregnant women in the 1st trimester of pregnancy advice visit ( 8-12 weeks of pregnancy );
3. Pregnant gynecologist in the 1st trimester of women referral according to to the dentist visit ( 8-12 weeks of pregnancy );

When entering the 1st group teeth of his career there is to be included in the 2nd group light and medium weight level of gum inflammation and / or being a SUP;

2 (13-27 weeks ) and 3 (28-40 weeks ) trimesters dentist to his room visit order according to optional information consent.

Patients clinical from groups out to throw criteria the following it has been:

1. decompensation stage somatic disease availability;
2. stationary in the 2nd and 3rd trimesters of pregnancy treatment demand doer and dentist to his room visit difficulty, decompensation stage gestation complications surface arrival.
3. sharp or the climax received chronic infectious diseases (this including AIDS, hepatitis B and C, wound); autoimmune diseases; sharp allergy reactions; oncological diseases; corticosteroids with long term hormonal therapy; spiritual diseases existence.

Dispensary to the group can to do conditions:

1. of a woman pregnant to be
2. pregnant Gynecologist in the 1st trimester of a woman (8-12 weeks of pregnancy ).

3. pregnant of a woman gynecologist to the referral according to the dentist in the 1st trimester (8-12 weeks of pregnancy).

4. in the teeth caries the process is easy and medium weight level teeth inflammation and / or chronic common periodontitis availability;

5. 2 (13-27 weeks) and 3 (28-40 weeks ) trimesters dentist to his room optional to visit message consent;

6. special hygiene and treatment dental practices to perform big trust and decision

Dispensary from the group out to throw criteria clinical from groups an exception to do to the conditions similar it has been . Clinical and dispensary in groups all from patients them research of transfer purpose and to the rules according to clinical to research attraction to do according to written information consent received.

We women 18-25, 26-28, 29-32, 33-35, 36-40 years old categories we learned them to separate main reason one row the authors by pregnant in women of the organism in the structure important indicators learning was , this studies to the results according to women aged 18-24, 25-28, 29-31, 32-36, 37-40, 41 big young sequence pregnancy individual development during and perinatal outcomes about necessary information get for recommendation done Pregnant patients and clinical group 1 between epidemiological in categories the most a lot occurring age 26 to 28 years , in the 2nd clinical group - from 33 to 35 years old and dispensary in the group - from 29 to 32 years old.

Epidemiological in the group pregnant of women average age  $26.5 \pm 1.5$  years , in the 1st clinical group -  $23.1 \pm 1.5$  years , in the 2nd clinical group -  $31 \pm 1.5$  years and dispensary in the group -  $30.1 \pm 1.5$  years old organize did Groups between young according to probable differences not observed.

Women dental learning level specialized medicine in institutions treatment-prophylactic help organize reach quality level depends , it is suitable respectively of patients city or village in places to live with is determined.

**Conclusion.** by doing to say maybe in the periodontium inflammation there is has been pregnant to patients relatively prevention , treatment and rehabilitation measures improvement of periodontal status in the 3rd trimester of pregnancy calls Doctor-dentist in the inspection pregnant of women dental status monitoring algorithm and different dental in status pregnancy in dynamics pregnant patients take go differential tactics work we went out Of the teeth caries damage and periodontium inflammation diseases there is has been pregnant patients dynamic observation for dispensary the group organize did.

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