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Complex Prevention of Children's Tooth-Jaw Anomalies and Deformations

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Relevance of the study. Among the pathologies of the periodontal system, inflammatory diseases of the periodontal tissue are widespread. According to the World Health Organization, gingivitis and periodontitis occur in 64-98% of the population aged 35 to 44 years. In addition, dysbacteriosis can be observed, which is a change in the microflora of the oral cavity, with an increase in pathogenic and conditionally pathogenic microorganisms. It has been found that during orthodontic treatment, the composition of the microflora of the oral cavity changes, and an increase in the number of *Streptococcus mutans*, *Candida albicans*, *Lactobacillus* spp., *Enterobacteriaceae* leads to dental caries and inflammatory diseases of the periodontal tissue. Several factors contribute to the course of periodontal diseases, which reduce the reactivity of the body and lead to a decrease in secondary immunity. Modern views have proven that the main role in the etiopathogenesis of periodontal diseases is played by a decrease in the immune system and the resistance of the periodontal tissue to bacteria.

Results and analyses. During the examination of the teeth, we paid attention to their color, size, location, the presence of cracked and broken teeth, increased or decreased sensitivity, and mobility. During the examination of the organs and tissues of the oral cavity, we examined the teeth and tooth rows, the bite, and the periodontal condition, and paid attention to the presence of dental fillings, dentures, and their condition. When examining the mucous membrane of the oral cavity, lips, and periodontal tissue, we examined the presence of bleeding, itching, and soreness of the gums, ulcers, and ulcers on the lip margin. The condition of the temporomandibular joint was assessed by palpation, auscultation, and X-ray examination.

Prevention and treatment of defects in the bite and occlusal surface were carried out in stages. Before the treatment according to clinical indications, the following were performed: cleaning of the oral cavity and measures for the prevention of caries, plastic surgery of the upper lip and lingual frenulum if they are short, removal of milk and permanent teeth according to orthodontic indications, myogymnastics exercises and elimination of bad habits, normalization of nasal

breathing . After the orthodontic appliances were installed , recommendations were given on hygienic care of the oral cavity, professional hygiene and dispensary observation periods were established. The treatment period included the use of orthodontic appliances that equalize the shape of the dental arches, correction of the condition of the upper and lower jaw teeth, normalization of the width of the tooth rows, correction of occlusal smoothness, restoration of lost permanent teeth with acetal micro prostheses. Orthodontic treatment of patients included the use of advanced techniques based on the brace system of foreign manufacturers. During the retention period, final alignment of the upper and lower jaws was performed, and the results were stabilized by achieving tight fissure contact using non-removable retainers, retention appliances, and elastoplocators.

Conclusion. The results of clinical and immunobiological examination of periodontal pathologies in children with dental and maxillofacial anomalies and deformations showed that in diffuse catarrhal gingivitis resulting from orthodontic treatment of anomalies and deformations of the dental and maxillofacial system, the amount of activated humoral immunogenesis in oral fluid increased by 3 times compared to the norm by 0.23 ± 0.11 . The effectiveness of the use of "Stomatohex" ointment and pomegranate seed oil in diffuse catarrhal gingivitis gave better results than traditional treatment, the treatment effectiveness was 94%. After complex treatment, the amount of -IgG was 0.12 ± 0.02 ; IgA was 0.14 ± 0.08 mg/l, which was close to the results of the control group.

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