E-ISSN NO:-2349-0721



Impact factor: 6.549

DEVELOPMENT OF MODERN PREVENTIVE PROGRAMS IN ORTHODONTIC TREATMENT OF DENTAL CARIES IN CHILDREN ON THE BASIS OF HYGIENIC REQUIREMENTS

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ABSTRACT

In the world of orthodontic treatment, a large-scale scientific study is being carried out to forecast and determine the early symptoms of caries in children, as well as to optimize the effectiveness of diagnostic and therapeutic-prophylactic measures, the existing methods of diagnosis are no longer sufficient, there has been a persistent need for additional methods of research. In this regard, the study of diagnostic and therapeutic measures aimed at increasing the quality indicators of orthodentic care for children is Perspektiv.In the early stages, during orthodentic treatment, it is necessary to diagnose caries and develop the maximum possible concomitant treatment, to obtain a stable aesthetic result in the treatment of orthodentic patients, and to avoid relapses, it is possible.

Keywords. eliminates, mentioning, hygiene index, orthodontic treatment.

Extensive research is being conducted worldwide to predict and detect early signs of caries in children in orthodontic treatment, as well as to optimize the effectiveness of diagnostic and therapeutic measures [1] existing methods of diagnosis are no longer sufficient, [2] there is a strong need for additional research. [3,5] In the early stages, the development of the most intimate approach to the diagnosis and treatment of caries during orthodontic treatment allows to obtain a stable aesthetic result in the treatment of orthodontic patients, and to avoid relapses. [7]

An analysis of the literature and research materials of various authors has led to the following conclusion: caries is associated with dental anomalies in 20-50% of cases, depending on the age and anamnesis of the patient. The risk group includes two age groups - from 12 to 15 years (34.2% of caries cases) and 22-40 years (46.2% of cases). Distal dentition is a predictor of carious injury in orthodontic treatment. Gender does not play a major role in these age groups: carious processes are uniformly expressed when adoptive techniques are used in adolescents and adults of both sexes [2].

According to a number of authors, individual recommendations for nutrition and oral care can increase the effectiveness of orthodontic treatment and reduce the risk of complications in the form of focal enamel demineralization, the development of dental caries and gingivitis when using hardened equipment, tools are available. Toothpastes and floss are the most popular and universal in any situation.

The component of education with the participation of parents and doctors is important in the prevention of caries in children. It is also necessary to take into account the age and psycho-physiological characteristics of children and adolescents.

Thus, a patient with a brace system does not care in what form (written, oral, or video) the primary instruction is given by the physician on oral hygiene, as all of them help to reduce the amount of nominalized vision in the teeth. an individual approach to periodontal disease is required.

It should be noted that it is important to follow an individual prophylaxis regimen, including regular mechanical cleaning of teeth, scaling, patient motivation, flushing with chlorhexidine solution in addition to the initial prophylaxis program, control of hygiene and fluoride prophylaxis according to the initial prophylaxis program only; reduces or eliminates the frequency of demineralization. It is worth mentioning here about the individual choice of toothbrush and toothpaste.

Bekirov F.M. and according to a group of authors, errors and complications can occur in any orthodontic treatment, which can occur at different stages: diagnosis, treatment planning, hardware fixation, and its correction and retention period. [6] Failure to follow the diagnostic algorithm in the early stages of treatment, in particular not to conduct X-ray diagnostics and not to analyze the control-diagnostic model, can lead to errors and complications [5].

There are no data on the use of deep fluoridation in orthodontics. [9] Questions to assess the resistance of tooth enamel and the effectiveness of remineralizing agents using caps in orthodontic treatment are not sufficiently clarified. [7] Therefore, the further development of preventive measures in the process of orthodontic treatment is an urgent task.

THE PURPOSE OF THE STUDY

the development and implementation of a set of preventive measures of hygienic requirements to prevent the development of caries and its complications in the orthodontic treatment of patients.

MATERIALS AND METHODS

120 children aged 7 to 18 years with dental anomalies and deformities were examined in accordance with the tasks set before us. for the first time in orthodontic treatment, the condition of the hard tissue of the teeth around the fixed braces was assessed and the effectiveness of the cappuccino effect was determined using remineralizing agents and light-induced fluorescence;

RESULTS

The proposed set of treatment-and-prophylactic and diagnostic measures, taking into account the risk of dental caries, allows to improve the quality of orthodontic treatment using EOT (removable orthodontic technique) and QOT (fixed orthodontic technique), prevents the development of complications by dental hard tissue and periodontal tissue . professional and individual hygiene of the oral cavity using highly effective means of hygiene, fixed using kapp "R.O.C.S. Exogenous and endogenous prevention of caries with the use of drugs MedicalMinerals, Oligovit, Immunal allowed to reduce the growth of caries in children by 90.2%.

Assessment of manual skills in oral care showed that only 10.4% of children showed proper brushing of teeth at a good price. Satisfactory manual skills in oral care were identified in 19% and unsatisfactory in 69.7% of children.

Prior to initiating orthodontic treatment, a reassessment of manual skills was conducted after demonstration of professional oral hygiene and individual hygienic treatments.

Dental cleaning of unsatisfactory quality was not recorded, satisfactory was detected in 8% of children, good - in 92% of children, which allows them to be considered ready for questions on oral hygiene for orthodontic treatment using soluble techniques. An initial assessment of the hygienic condition of the oral cavity

according to the OHI-S and RNR indices revealed that the hygienic condition of the oral cavity was unsatisfactory in all groups in the study. It was observed that the values of OHI-S and RNR indices decreased convincingly in all groups before fixing the braces, after professional oral hygiene training, after training in individual hygienic procedures, but in the main groups their evaluation criteria were different. If the hygienic condition of the oral cavity on the OHI-S index was defined as good and did not exceed 0.7, the RNR was satisfactory on the hygiene index and was around 1.6.

By assessing the informativeness of the index data, it is possible to record a reliable assessment of quality using the RNR index, which allows the detection of dental views in segments in the cervical and approximal areas of the teeth.

CONCLUSION

It has now been proven that dental bleaching in patients, professional and individual oral hygiene, control of carbohydrate intake, and the use of fluoride compounds are important components of prophylactic programs. However, with the availability of a large number of tools for the prevention of dental caries and periodontal disease, there is a need to evaluate them using certain informative criteria and recommend them based on the individual characteristics of the organism.

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