

**CONTENT OF IRON IONS IN ORAL LIQUID AT VARIOUS DEGREES OF
ADENTIA**

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ABSTRACT

It is known that dental incidence in countries with preventive programs decreased by 2–4 times. Society realized that it was possible, until old age, to preserve most of the teeth, which significantly improves the quality of life. This is due not only to the aesthetic appearance, but also to the violation of the physiological processes of chewing and digestion with adentia.

Key words: teeth, digestion, enamel, body's resistance.

INTRODUCTION

With the loss of one or more teeth, the remaining teeth are subjected to increased stress. The consequence of this is abrasion and chips of enamel, the appearance of tooth mobility, as well as an increased risk of developing diseases of the gastrointestinal tract, which is a consequence of insufficient mechanical and chemical processing of food in the oral cavity.

Recently, interest in the clinical aspects of the study of free radical oxidation (SRO) of lipids in dentistry has significantly increased. This is largely due to the fact that a defect in the indicated metabolic link can significantly reduce the body's resistance to the effects of adverse environmental factors, as well as create prerequisites for the formation and accelerated development of a number of acute and chronic oral diseases.

The purpose of the study was to study the content of iron ions in the oral fluid at various degrees of secondary adentia.

In the framework of the study, 45 patients (mean age 41.64 ± 2.06 years, of which 12 men, 14 women) with various degrees of secondary adentia and 15 practically healthy people (mean age 30.20 ± 2.03 years, 7 of them are men, 8 women) with intact dentitions.

MAIN PART

Recipients were divided into 4 groups. The first group consisted of patients with partial adentia, in whom no more than 3 teeth were missing ($n = 25$). The second group included patients with partial adentia who lacked 4–10 teeth ($n = 10$). The third group consisted of patients with complete absence of teeth in the upper and lower jaw ($n = 10$). The fourth group ($n = 20$) was comprised of practically healthy people, in whom the integrity of the dentition was preserved.

To determine the content of iron ions in the oral fluid, we used a set of reagents from BioChemMak (Russia).

It is difficult to explain the reason for the sharp shift in the pro / antioxidant balance towards the prooxidant direction by spontaneous or spontaneous oxidation. According to published data, one of the reasons for the violation of the prooxidant-antioxidant balance in the oral cavity with partial adentia may be a sharp increase in the content of metal ions in the oral fluid with variable valency.

Studies have shown that an increase in the content of iron ions was observed in the oral fluid of patients with adentia. In the absence of 1-3 teeth in patients (group I), the content of Fe^{2+} ions in the oral fluid increased on average by 17.1% ($p < 0.05$) compared with the control group.

In clinical groups II and III, the iron content in the oral fluid exceeded this indicator in the group of healthy people by 68.1% ($p < 0.05$) and 98.4% ($p < 0.05$), respectively.

Conclusion

Thus, a sharp increase in the content of iron ions in the oral fluid may be one of the reasons for the disturbance of the prooxidant-antioxidant balance in the oral cavity with adentia.

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