

**CARIES AND STATISTICAL INDICATORS IN CHILDREN WITH CEREBRAL
PALSY**

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ABSTRACT

This paper makes analyses of the investigation on caries and statistical indicators in children with cerebral palsy. Therefore, various points of the author have been compared with other scholars' points as the whole. In various points, analyses of the theoretical points were compared with methodological points as the whole.

Keywords : Caries, statistical, indicators, children, cerebral palsy, medical points

INTRODUCTION

Despite the care and treatment of children with cerebral palsy, the active work of medical workers and parents, the number of patients diagnosed with cerebral palsy is increasing every year.

Studies show that tooth decay is more common in children with cerebral palsy [1,2,3]. Solyanin (2005) shows that the average age of children with a diagnosis of cerebral palsy is 11.5 years [3]. In children with cerebral palsy, the age of a permanent bite begins at 12 years old, and in children poor oral hygiene. It is important to take measures to prevent and treat oral diseases in sick children.

Cardiovascular diseases in children with cerebral palsy are associated with the presence of major diseases that have been investigated for impaired vital functions (movement, psyche, speech) . Children do not have self-care skills due to poor oral hygiene. All this is accompanied by a lack of parental attention . In these children, caries indicates a high prevalence. Children with cerebral palsy need dental care, and the problem of prevention and treatment of caries is especially relevant for these children. The development and application of therapeutic and preventive measures in children with cerebral palsy, cerebral palsy, is aimed at improving the state of oral hygiene . The features of neuromuscular pathology in children with cerebral palsy were considered. As far as possible, work with disabled children, diagnosis and treatment of children in a wide range of parents and specialists in the field of diseases of the oral mucosa is carried out according to special rules. should be effective .Due to the existing somatic pathology in patients with cerebral palsy, it is difficult to use the traditional treatment regimen for certain dental diseases, which requires the search for new approaches to solve this problem.

The basis for the selection of chewing phytocomplexes that we offer for the comprehensive prevention and treatment of caries in children with cerebral palsy are: lack of toxicity; easy to use; long-term actions; macro- and microelements and natural components with biologically active substances to improve local immunity and microcirculation in the periodontium; Hemostatic, wound healing, anti-inflammatory, antioxidant, cleansing, absorbing and soothing properties were identified .The obtained static data and the condition of the teeth, laboratory tests of children with cerebral palsy made it possible to increase the effectiveness of treatment and prophylactic measures for this group of children.

Local factors contributing to the development of carcinogenic conditions in the oral cavity include poor oral hygiene, a violation of the composition and quality of saliva. Studies in Russia showed the results of a survey and oral examination of 12-year-olds (Kazarina L.N., Pursinova A.E., 2015). This, in turn, requires the development of a number of dental procedures. American scientists have provided data on the degree of

demineralization of tooth enamel using fluorescence (QLF). In the available literature, various hygiene products are used to prevent caries in children.

Thai authors present the results of a clinical study of toothpaste with conventional toothbrushing in children to remineralize the caries process. With CPP-ACP fluoride toothpaste, it is recommended that you brush your teeth after school lunch under the supervision of a teacher. A group of Russian scientists proposed an infiltration method that allows you to "save" the caries process in one visit to preserve the pseudo-intact enamel. French scientists share 20 years of experience in minimizing dental caries with the ability to provide effective recovery and preventive treatment [Holmgren C.J., Roux D., Doméjean S. 2013].

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