

COMARATIVE COMPARISON OF RADICAL CYCAS, DIAGNOSTICS AND PREVENTION OF DETERIORATION

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Abstract. This article discusses the issues of radical, follicular and other types of cyst of the upper and lower jaw. The causes of their occurrence, symptoms, as well as diagnosis are disclosed in detail and treatment options are proposed.

Keywords: radical cysts, follicular cysts, symptoms, diagnosis, single-ended jaw cysts.

СРАВНЕНИЕ РАДИКАЛЬНЫХ ЦИКАД, ДИАГНОСТИКА И ПРАФИЛАКТИКА

Аннотация. В данной статье рассмотрены вопросы по радикальной, фолликулярной и других видов кисты верхней и нижней челюсти. Подробно раскрыты причины их возникновения, симптомы, а также диагностика и предложены пути лечения.

Ключевые слова: радикальные кисты, фолликулярные кисты, симптомы, диагностика, одонтогенные кисты челюстей.

INTRODUCTION

Odontogenic cyst band is an odontogenesis (dental development) formed from tissues that are involved in jaw cysts. Odontogenic cysts are closed bags, which are distinguished by the odontogenic epithelium caused by the remnants of the membrane. The air, liquids, or semi-solid material that can include it. Mandible and Mandible components of Mandible and Mandible and Maxilla, because mandible jaws are the most common jaws. Odontogenic Epithelium is very important under normal conditions for the dental development. But epithelial moments can then be the origin of the cystic capacity, but all the mouth cysts are not an odontogenic cyst. For example, the mucous cycling of the colon and eye -ish channel does not occur unencumber.

Also, the appearance of the Pseudocyst jaw (several conditions called as saying; Stafne Static Bone Cyst, such as anatomical options from the anatomical options, an aneurysm-bone cyst to the attacker.

MATERIALS AND METHODS

Odontogenic cysts of jaws.

The cyst is the outer connective tissue layer, mainly a membrane space consisting mainly of layered flat epithelium. The cyst cavity is typically cholesterol crystals, sometimes the availability of gray cottage) has an opalescent yellow liquid due to the availability of gray cottage. Its growth is done due to the presence of intracystic pressures created by the bladder fluid, which leads to the environment in the surrounding bone tissue and an increase in epithelium.

The etiopathogenesis of odontogenic cysts is different. The cyst root (radical), which is called the anti-inflammatory process in periapical tissues, which can be apical (inter-raging) and lateral (lateral). This includes a residual (residue) radical cyst and paradental. Other cysts are the malformation of the odontogenic epithelium. Among them are keratocysts (primary odontocysts), including teeth (follicular) cysts, explosion cysts and gingival cysts.

The frequency of the cyst of the jaw is the first among other odontogenic formation. There are cysts in people of different ages, which are 3 times more often than the lower jaw in the upper jaw. There are many similarities in clinical and radiological manifestations of different odontocysts and treatments. However, each cyst type has its own features, which allows them to distinguish them.

The root (radicular) cyst. The emergence of the root cyst depends on the development of the chronic inflammation process in the periapical tissue of the tooth, which leads to the formation of Apical Granulomas. In this granuloma, the Malassez Cells (Malasse Islands) will increase in the inflammation of the periodontal ligament and first lead to the formation of cytokinins, which fully cover the cavity. Another source of the epithelium in a number of authors (I. G. Lukomsky, Gravitky, Suster) The previous view of the epithelium in the granuloma now lost its meaning.

Odontogenic cyst - why dental cyst

If you check the cyst, it looks like a dense capsule, and it really prevents the dense covering of cysts is the spread of infection. But a harmless view is not simple enough, it is the cause of very dangerous complications, and if the education is not ignored, cyst may become dangerous over time.

RESULTS

Often the cyst of the cyst of previous teeth, the dental molars, which blocks the maxillary sinus channels, are diagnosed with cysts. The UDINOGEN CID on diameter can range from five to five centimeters and less than five mm formation is called the granuloma.

Tooth cysts, marks

The dental cyst is characterized by lack of symptoms during its growth. Of course, it is not difficult to feel that the person carefully watching the health of the oral cavity is the change in the color or tooth cavity move, but cyst, in a sensible way can develop. While it continues to destroy jaw bones with the tooth roots, a certain size is achieved. Only after three centimeters of diameter grows, cyst, expanded lymph nodes, headaches, high body temperature, swelling of the jaw in the cyst. I suggest you to visit the website of the Dentistry Clinic Website, follow the link and read detailed operations on the removal operations. Information is necessary and useful.

With the cyst, the surface of the face is growing, a significant tumor appears where the cyst is formed, constantly with suffering pain. Sometimes swelling decreases, but soon appears again due to the intensification and purification of periosteum, in this case, dentists identify odontogenic periostitis. If you do not ask for help, you can expect the process to develop, it can end with the loss of teeth. Only visits to the dental clinic prevents further complication, which leads to death.

Tooth cysts, complications

Although the dental is protected by a dense membrane that prevents the spreading of the infection, the neglected process, gumboil and periodontitis, osteomyelitis of the jaw, even neck and face formation, loss of teeth, Sepsis can be expected, good and cancer tumors ... should you

think that these complications want these complications - odontogenic cyst - why dental cyst is dangerous.

DISCUSSION

Methods of treatment of dental cycles

Modern dental methods of treatment of cyst allow to retain without removing the descent. Of course, the stage of the disease is of great importance in the treatment of odontogenic cyst and dentists use conservative and surgical methods based on these indicators. In case of a disposable therapy that does not exceeding eight mm, doctors use the method of conservative therapy, which includes thoroughly watering with medication and then cementing it.

The use of surgical methods includes removal of the cyst by cutting to the cutting or capsule of its capsule. This approach allows you to keep the tops of the tooth roots tooth with implants with imports. In this case, the meeting is inevitable. Unfortunately, the resulting process or the eighth mas's root is the dentist appeal to remove the descent with the cyst.

Prevent a tooth cyst

Thus, in this case does not prevent, but followed simple recommendations, you can avoid the disease you can.

Description of clinical condition

Healthy 33-year-old male, sent to the periodontal partition to treat a huge cyst and the lower right third molar affected by it. Panoramic X-rays showed a large and clearly defined light area, which surrounded the crown of the lower right, and also affected the distal root of the neighboring second molar.

The first of the odontogenic cyst was found to conduct a pathological and histological examination for final diagnosis). The affected dump is in the upright position, its root part of its root is very close to the lower limit of the lower jaw and the meal tubercles is close to the distal root of the second molar. CT verification is an anatomical location of molar roots and the cyst's mandibers confirmed the boundary with the channel.

CONCLUSIONS

In addition, the right of the right to the distal root area of the second lower molar had a very small bone, which questioned a long-term forecast of this tooth. Clinical studies showed that the probing depth was 7 mm on the distal side of the tongue of 9 mm and the second molar root was 7 mm. The loss of the alveolar ridge also evaluated, the distance between the limits of the enamel-cement was 16 mm, which confirmed the weight of pathology.

Due to the loss of high-ranking bone, the closeness of the liability of the injuries and the lower jaw nerve of the tooth, as well as to the catchment depth, and teeth ortholialization were selected.

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