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# REHABILITATION AND PREVENTIVE MEASURES OF THE LATE COMPLICATIONS OF COMBINED INJURIES OF THE SOFT TISSUE INJURIES OF MAXILLOFACIAL REGION

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**Abstract.** Combined soft tissue injuries of maxillofacial region can lead several early and late complications. Purelant-inflamated, late deformed scarred, defects of the facial organs and tissues are among them. Certain effective measures have to be implemented in the process of diagnostic ant rehabilitation period.

**Keywords:** effective measures rehabilitation, purelant-inflamated, defects of the facial tissues.

### INTRODUCTION

Combined injuries of the soft tissues of the maxillofacial region and their complications have different general features and clinical manifestations, therefore, the complications of such injuries differ from other injuries in particular aspects of examination and treatment methods. Oral and maxillofacial surgeon, otorhinolaryngologist, neurosurgeon, ophthalmologist, surgeon, traumatologist and resuscitators can participate in the examination and diagnosis of soft tissue injuries of the maxillofacial region and their complications [2,3]. In order to analyze the complications observed in patients before hospitalization, the above table did not include the complications of the joint injuries of the soft tissues of the face and jaw area observed during the treatment of patients in the hospital. In the following tables, this group of patients is studied separately. Complications observed during the period of receiving specialized treatment procedures in the maxillofacial surgery departments in the hospital were found in 54 (7.8%) patients. Most of these complications were observed as a result of operations performed for the treatment of injuries caused by fractures of the facial bones. [1,2,4]. Purulent-inflammatory complications were observed in the wound area as a result of surgical procedures, osteosynthesis of bone fragments, mainly due to face-jaw joint injuries. Also, specific complications after surgical procedures, complications of suppuration of postoperative wounds were observed. Also, keloid scars that occur after a facial injury, opening of sutured wounds, non-acceptance of metal constructions by the body. Salivary fistula was observed in a small percentage of patients, caused by damage to the preauricular salivary gland after osteosynthesis in a patient with a mandibular coronoid fracture.

## THE PURPOSE OF THE STUDY

The purpose of the study is to implement the rehabilitation and preventive measures of the late complications of combined injuries of the soft tissue injuries of maxillofacial region

### MATERIALS REVIEW AND METHODS

In period the study, 168 patients were included in inpatient departments of the Samarkand City Medical Centre, and the Samarkand Branch of the Republican Specialized Traumatology and Orthopedic Scientific and Practical Medical Center multidisciplinary clinic of the Tashkent

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Medical Academy, in 2019 and 2023 with early and late complications of maxillofacial injuries. (17 years and older) treated patients were recruited. Patients included in the study were divided into 3 groups:

In the first control group, patients with complications of combined maxillofacial soft tissue injuries were treated traditionally;

in the second main group, the same patients were treated with ozone and low-intensity laser rays;

and the third group included patients who underwent low-intensity laser and ultraphonophoresis with the help of Contraktubex (Contraktubex) anti-scar drug.

## DISCUSSION OF THE STUDY

The duration of surgical treatment of patients with combined injuries of the face-jaw area was carried out in different periods in different patients. This period was carried out in 1 day in 7.4% of patients, in 2-3 days in 24.1% of patients, in 4-5 days in 43.8%, and in 7 days or more in 25.7% of patients. It should be noted that the difference in the period before the operation and the delay of osteosynthesis can be observed in the cases of early immobilization of the fractured jaws, complete fixation of the teeth on the fracture line, continuous cleaning of the oral cavity and adequate antibacterial treatment. Such a high rate of soft tissue complications of the face-jaw area is explained by the fact that soft tissue complications are admitted to the hospital at an early stage of injury complications. Uncomplicated soft tissue injuries of the face were mainly treated on an outpatient basis, sometimes in district conditions in the residential area. Among these complications, purulent-inflammatory complications of the soft tissues of the face took the place. These are suppuration of wounds and hematomas, and late complications were manifested in the form of post-traumatic scar deformations. These complications were observed in patients who did not seek primary medical care at all or who were treated by general practitioners. This is because there are specific principles of providing primary surgical care when facial injuries are observed. Failure to adequately follow the rules of primary surgical treatment of injuries in the maxillofacial region causes complications of the upper facial soft tissues. Purulent-inflammatory complications of the soft tissues of the face took place among these complications. These were manifested in the form of suppuration of wounds and hematomas, and late complications in the form of posttraumatic scar deformations. These complications were observed in patients who did not seek primary care at all or were treated by general practitioners. This is because there are specific principles of providing primary surgical care when facial injuries are observed. Insufficient adherence to the rules of primary surgical treatment of injuries in the maxillofacial region causes complications of the upper soft tissues of the face.

### **CONCLUSION**

So, to sum up is necessary to say that from the beginning to correct diagnosis of the combined soft tissue injuries is important. Because if in the primary diagnosis of these complicated injuries started the next unexpected complications of combined injuries of the soft tissue injuries of maxillofacial region can create difficulties of the recovering patients. Therefore, certain effective measures have to be implemented in the process of diagnostic ant rehabilitation period.

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