

# IMPROVING METHODS OF TREATMENT OF INFLAMMATORY DISEASES OF THE ORAL MUCOSA IN PATIENTS WITH CARDIOVASCULAR SYSTEM PATHOLOGY

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**Abstract.** Recently, oral mucosal diseases (OMDs) have become the reason for visiting the dentist due to premature tooth loss, decreased quality of life due to bad breath, bleeding gums and dental hyperesthesia. Therefore, inflammatory diseases of the oral mucosa attract the attention of doctors [2, 5, 6]. According to various authors, their high prevalence among the population exceeds 90-97%, significant degenerative changes in the maxillodental system require optimization and improvement of methods of detection and treatment of this pathology.

**Keywords:** mucous membrane, cardiovascular system, jaw-dental system, epithelial desquamation, trophic ulcer.

Trophic ulcers, desquamative changes in the mucous membrane of the oral cavity are the most common form of diseases of the mucous membrane of the oral cavity detected in patients with pathologies of the cardiovascular system [1, 3, 5, 9]. Its prevalence is mainly due to the lack of necessary monitoring for young people (19-24 years old), who experience mild inflammation of the mucous membranes, serious complaints and do not fully understand the problem. 4, 7, 8]. Many middle-aged patients consult a dentist with the appearance of painful ulcers in the retromolar zones, cyanosis and swelling of the gums and other specific symptoms that characterize inflammatory-dystrophic changes. All this prompted us to develop a specific treatment method for this population.

Purpose of the study. Improvement of methods of treatment of inflammatory diseases of the mucous membrane of the oral cavity in patients with pathologies of the cardiovascular system. Research materials and methods. The research included the results of treatment of 98 patients with cardiovascular diseases who were examined in the therapeutic department of the Samarkand City Dental Polyclinic in 2020-2024. Depending on the choice of treatment method for patients with CKD, patients were divided into two groups. The main group consisted of 60 (61.0%) patients with CKD. The comparison group consisted of 38 (39.0%) patients. According to the results of our research, patients with trophic ulcers are 40-60 years old - 78 people (80.0%), i.e. patients of working age, determined by the relevance of the study. When analyzing the data on the distribution of patients by gender and age groups, there are approximately the same number of men and women in each group. Oral health surveys are based on WHO recommendations. We used algorithms for clinical examination of patients with inflammatory diseases of the oral mucosa. By evaluating the indices, the condition of the oral mucosa tissue was examined. Complex treatment for patients in the main group, including antiseptic treatment of trophic wounds with an antiseptic mixture of ozonated sodium hypochlorite solution produced by the apparatus of the Austrian company W&H Prozone, the regimen is 16 seconds. Antiseptic treatment of wounds using the W&H Prozone device helped to eliminate soft and hard supragingival and subgingival plaque. An ozonized

sodium hypochlorite solution was used for antiseptic treatment of the oral cavity. Patients in the comparison group were prescribed only a course of pharmacotherapy, including antibacterial drugs, keratoplasty tools and vitamins, after professional oral hygiene.

**Research results.** The results of treatment of patients in the comparison group were carefully analyzed throughout the observation period (Table 1).

Indicators	Primary inspection	After 7 days	After 14 days	After 3 months	After 6 months	After 1 year
GI	1,7 (1,1; 2,1)	0,6 (0,4;0,7)	0,4 (0,3;0,6)	0,6 (0,4;0,6)	0,6 (0,6;0,8)	0,7 (0,6;1,0)
PMA	38,7 (32,4; 43,8)	8,2 (4,6;9,8)	2,1 (1,4;3,1)	19,2 (9,2;20,9)	24,1 (19,9;26,8)	30,4 (22,4;31,9)
IK	2 (2; 2)	0 (0; 0)	0 (0; 0)	1 (1; 1)	1 (1; 1)	1 (1; 2)
PI	3,2 (2,8; 3,6)	2,3 (2,0;2,7)	2,0 (1,3;2,1)	2,1 (1,7;2,7)	2,3 (1,9;2,7)	(2,0;3,0)
Stomatoscopy	3 (2; 3)	1 (0; 1)	0 (0; 0)	2 (2; 2)	2 (2; 2)	2 (2; 2)

Analyzing the data in Table 1, the following conclusions can be drawn: patients in the comparison group had a much higher hygiene index during the initial examination - 1.7 (1.1; 2.1), which corresponds to unsatisfactory oral hygiene. Conventional treatment helped to stabilize the pathological process in the mucous membranes, turning the average severity of the ulcer into a mild level for 3 months. After this period, inflammation begins to increase, which is confirmed by objective examination data, index assessment and cytobacterioscopic examination. When examined after 6 months, the values of these indicators again correspond to the average diseases of the mucous membranes, and after a year they are close to the data of the initial examination, which indicates that the conducted anti-inflammatory and antimicrobial indicates the ineffectiveness of anti-therapy. to patients in this group. The effectiveness of the developed method in the main group of patients was also evaluated using hygiene indices and cytobacterioscopic examination (Table 2).

Indicators	Primary inspection	After 7 days	After 14 days	After 3 months	After 6 months	After 1 year
GI	1,7 (1,1; 2,1)	0,6 (0,5;0,8)	0,4 (0,4;0,6)	0,4 (0,4;0,6)	0,6 (0,5;0,6)	0,7 (0,7;0,6)
PMA	38,7 (32,4; 43,8)	8,2 (4,5;7,2)	2,1 (1,4;3,1)	3,1 (2,4;4,2)	7,3 (5,2;10,8)	8,2 (8,1;10,8)
IK	2 (2; 2)	0 (0; 0)	0 (0; 0)	0 (0; 0)	0 (0; 0)	1 (1; 0)
PI	3,2 (2,8; 3,6)	1,5 (1,2;1,9)	1,2 (1,1;1,5)	1,2 (1,1;1,5)	1,4 (1,2;1,6)	1,5 (1,4;1,6)
Stomatoscopy	3 (2; 3)	1 (1; 1)	0 (0; 0)	0 (0; 0)	0 (0; 0)	1 (1; 0)

Based on the data in Table 2, a clear clinical effect was achieved in the main observation group. Thus, using the Prozone device, a specialized one-time Perio insert in a mode equal to 16 seconds. and simultaneous antiseptic treatment of trophic ulcers with an ozonized solution of sodium hypochlorite allows to achieve stable and long-term remission in the complex treatment of patients with CKD. At the same time, 1 year after treatment, a recurrence of the disease was found in 3 patients (2.7%), which may be related to changes in the diet or place of residence of the patients, bad habits, decreased immunity, development. co-occurrence or exacerbation of chronic

diseases, as well as non-compliance with the dentist's hygienic recommendations for oral cavity care. Hygiene indicators, Kulazhenko's bleeding index, papillary-marginal-alveolar index, periodontal index were significantly lower in patients of control subgroups than the same indicators in the same periods after treatment. Cytobacterioscopic research data also confirm the reduction and alleviation of inflammation, optimization of regenerative processes in gum tissue, along with increased epithelial proliferation in patients of the main group for 6 months and 1 year, and inflammation in patients of the comparison group increases to the initial level. level 3 and after 1 year. 6 months after the end of standard treatment. Radiographs confirmed the regeneration of bone tissue up to 3 mm in the main group, no bone regeneration was noted in the comparison group.

**Conclusion:** the traditional approach to the treatment of oral mucosa in patients with HCV provides remission of the disease for 3-6 months, with clinical data, hygienic indicators, X-ray and cytobacterioscopic studies approved. Using the Prozone device, a specialized disposable Perio nozzle, a mode equal to 16 seconds. and simultaneous antiseptic treatment of trophic ulcers with an ozonized sodium hypochlorite solution in the treatment of inflammation of the oral mucosa provides remission of the disease for up to 1 year, which indicates the possibility of reducing the patient's drug burden, promoting and maintaining will give. processes of restoration of the structures of the oral mucosa in comparison with standard treatment methods. After one year, the number of disease relapses in the main group was 3 (2.7%) patients, in the comparison group - 25 (28.4%).

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