Indications for oral hygiene in sick children with cerebral palsy

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ABSTRACT

Cerebral palsy, one of the diseases of the central nervous system, is a serious disease that is caused by various brain injuries during the first year of life: before, inside and after childbirth. Patients with cerebral palsy lag behind in physical and mental development, and due to their inability to help themselves, this causes not only medical, but also social problems. Proper dental care for sick children with cerebral palsy is one of the measures to prevent diseases of the oral mucosa and its complications.

Keywords: cerebral palsy, papillary, marginal, alveolar, oral hygiene index.

1. INTRODUCTION

Providing dental care for children with cerebral palsy is one of the most pressing problems in medicine today.

Changes in the general condition of the oral mucosa and changes in salivary composition, such as changes in the acid and alkaline environment in the salivary composition, are fundamentally different in healthy children [1.3.5]. When salivary components are present in the pathological state of phosphorus, magnesium and other micronutrients, they cause various diseases in the children's body [2.4]. NA Wichalkowski (2011) has been successful in the treatment of chronic catarrhal gingivitis in children with cerebral palsy using BOS + DVUS + Calcine.

Study of oral hygiene status in children with cerebral palsy V.R. Ogonyan (2003) from the Fedorov-Volodkina method, He used the Schiller-Pisarev tests and the PMA index. Research has shown that: High prevalence of systemic enamel hypoplasia (19.04%), dental diseases with caries (93-100%).

His research is by confirms poor hygiene of children with cerebral palsy, this is much higher than for children without this pathology. According to S.V. Erzina (2005) Children with cerebral palsy, aged 7-18 and the prevalence of periodontal disease in adolescents is 94.4%, in most cases they occur in the form of chronic catarrhal gingivitis [1.3.7]. Oleinik (2001, 2002, 2008) found the following increased dental performance in children with central nervous system diseases: The prevalence of caries (98.0%), the prevalence of periodontal disease was found in 80.0% and hypersalivation processes in 84% [6.8.9].

2. THE PURPOSE OF THE TOPIC

Application of PMA index and methods for determining oral hygiene status in children with cerebral palsy and to determine if these patients need dental care.

3. MATERIALS AND METHODS OF INVESTIGATION

62 girls and boys aged 11 to 14 with cerebral palsy were recruited. PMA index in sick children was calculated using the method proposed by Schiller-Psarev.

4. RESULTS AND ANALYSIS

Thus, the prevalence of periodontal and parodontium and mucosal diseases in children with cerebral palsy has been established as a result of poor research on oral hygiene and poor bite.

Assessment of the degree of inflammation of the mucosa in children with cerebral palsy and the papillary-marginal-alveolar index (PMA) method was used to compare the dynamic changes in this inflammation. These can be used to determine the degree of inflammation of the gums in children by using...
iodine and potassium iodide solution, as suggested by Schiller-Psarev. In this method, the iodine glycogen, which results from the reaction of glycogen in the cells of the mucous membrane of the glycogen, is brownish-brown due to the reaction of iodine glycogen.

The patient is divided into two subgroups to identify this method. The grouping of sick children is classified according to the degree of cerebral palsy.

**In Group 1** 30 children with moderate cerebral palsy were enrolled.

**In Group 2** 32 children with severe brain paralysis were enrolled.

In Group 3 30 patients are in children To determine the PMA apply a solution of potassium iodide in the oral cavity of infected children, such as the milk teat, gums, and alveolar areas.

As a result:

A) In 10 patients, P-inflammation in the milk teat
B) In 12 patients. Inflammation on the edges of the gums
C) 8 patients have A-alveolar gums inflammation

In this group, PMA = 56

This result was found to have moderate inflammation in the oral cavity of PMA patients.

**In Group 2** 28 sick children

a) Eight patients were found to have the same form of inflammation and gums in children.

b) In 2 patients, the process is on the gums, in the milk teat and that the inflammation in the alveolar areas is complete.

In this group, PMA = 68 was found to have severe gingivitis.

Using PMA indices in children with cerebral palsy

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5. **CONCLUSION**

Results and analysis of PMA in children with cerebral palsy show that oral hygiene is poor and results from endogenous and exogenous effects and are at the stage of developing gums.

**REFERENCES**