

DEVELOPMENT OF PREVENTION AND TREATMENT OF INFLAMMATORY DYSTROPHIC PERIODONTAL DISEASE IN WORKERS OF GYPSUM PRODUCTION PLANT WITH DISEASES OF THE UPPER RESPIRATORY TRACT

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Abstract : *Diseases of the oral cavity are a common pathology that leads to the loss of teeth, the formation of foci of chronic odontogenic infection and other disorders both in the maxillofacial region and in the body as a whole. Serious medical and social consequences of inflammatory periodontal diseases and the lack of noticeable positive changes in their mass prevention determine the need to deepen and concretize ideas about the etiology and pathogenesis of these diseases (Tsepov L. M. Nikolaev A. I., Mikheev N. A. et al., 2004).*

Keywords: *pneumoniosis, bronchial asthma, GERD, gastric and duodenal ulcers, diabetes mellitus.*

INTRODUCTION

To date, a number of somatic diseases are known, which, as a rule, have characteristic manifestations on the oral mucosa (pneumoniosis, bronchial asthma, GERD, gastric and duodenal ulcers, diabetes mellitus, arterial hypertension, etc.) The combination of chronic non-specific lung diseases and chronic periodontitis is observed in 17.7-28.0% of cases (Luzin N. M. et al., 2003; Gorbacheva I. A., 2004). In this regard, it is of interest to study the oral cavity against the background of diseases of the upper respiratory tract, since gypsum dust can cause irritation of the eyes and respiratory tract. Experts say that drywall is practically harmless. The lack of drywall can manifest itself over time, as the gypsum that is part of it turns into dust, which can become a problem for the respiratory system. However, the large-scale production and processing of gypsum, which is currently underway, cannot but affect the environment. The environmental problem is one of the

most acute problems in the world, and it is also relevant for our region.

Gypsum mining used to be done manually, now it is carried out with the help of demolition works but just to get the gypsum is not enough, it must be processed at the enterprise. The dust released into the air is harmful substances that interact with each other and create an unfavorable environmental background for the workers of this plant any dust has a bad effect on the human body, because it consists of solid particles that enter the respiratory tract if we keep in mind pure gypsum as a mineral, then it itself is probably harmless however, in nature, gypsum is extracted from rock, and it contains many other impurities. gypsum is a hydrated calcium sulfate $CaSO_4 \cdot 2H_2O$, but in deposits it is found in various forms and is often associated with other minerals such as quartz. In workers engaged in the extraction of gypsum, pneumoconiosis was observed, its occurrence is attributed to silica impurities found in the place of birth. Gypsum dust can cause eye and respiratory irritation plaster particles that get on the skin can cause its irritation (Gavrilenko n. 2015).

Along with this, the chronic process in the lungs leads to a decrease in the overall immunological reactivity of the body, which can provoke an exacerbation of inflammatory periodontal diseases (Ipatova e. v., 2003; Mikhleva I. M. et al., 2004; Shikhnoabaeva e. d., 2007). chronic obstructive pulmonary disease is accompanied by the development of systemic hypoxia, and against the background of existing metabolic disorders, oxygen deficiency in periodontal tissues additionally inhibits

regenerative and reparative processes (Bezrukova a. p., 2000). et al., 2004), which leads to the initiation of destructive processes in periodontal tissues (Grudyanova. I., 2004). The oral mucosa is almost always involved in the pathological process of various diseases and pathological conditions. However, the nature of these changes is very different depending on the etiology, individual characteristics of the body, age, physical condition, genetic status, etc. In this regard, the diagnostic value of the symptoms of mucosal changes, as well as the therapeutic and preventive tactics of the doctor, will be different.

The functions of a dentist for preventive work include:

- organization and, if necessary, carrying out all types of preventive

dental care in the workplace and institutions;

- Knowledge of the following types of work: determination of CPI, CPI, CP, CPR, gi, RMA indicators, training in oral hygiene, ability to control the effectiveness of hygiene measures, select suitable (preventive, curative, etc.) toothpastes, brushes, rinses, fluorolac, as well as agents that affect resistance and mineral metabolism (Borodovitsina S. I., Savelyeva N. A., Tabolina E. S. 2019). Inflammatory diseases of the oral cavity (IBD) and chronic obstructive pulmonary disease, along with similar etiology, have a mutually aggravating course. A link was found between foci of chronic odontogenic infection and an increased risk of developing chronic obstructive bronchitis. Foci of infection in the tissues of the oral cavity can serve as a reservoir for colonization of respiratory microbes that cause the development of pneumonia, and periodontal lesions of an inflammatory and destructive nature can sensitize the body and thereby aggravate the course of the chronic process in the bronchi (Mitronina B., 2005; Okuda K., Ebiharai., 1998).

Purpose of the study.

Improving the effectiveness of dental care for patients with copd by studying the combined effect on the state of the oral cavity and therapy for exacerbation of copd for the development of a rational prevention treatment algorithm.

Objectives of the study.

1. To study the state of the oral cavity in workers of Bukharagipss COPD.
2. To identify the clinical features of the course of dental diseases in patients with COPD.
3. To investigate the features of microcirculation of the oral cavity of workers of bukharagips.
4. To study the oral microflora in workers of Bukharagips.
5. To give a clinical assessment of the effect of COPD therapy on the course of inflammatory diseases of the oral cavity.
6. To develop practical recommendations for the provision of dental care in workers of Bukharagipss COPD.
7. Formulate measures to protect the environment and human health from the negative impact of gypsum production and use of gypsum, develop measures of prevention.

For the first time, a comparative study of the dental status of Bukhara gypsum workers with diseases of the upper respiratory tract will be conducted, the inflammatory reaction in the oral cavity and bleeding are less pronounced against the background of severe destructive bone lesions. A direct relationship between the severity of upper respiratory tract diseases, the level of oral hygiene and the degree of periodontal inflammation in Bukhara gypsum workers will be revealed. A relationship is established between the amount of streptococcus viridans in the contents of small mobile areas of the oral cavity and the severity of chronic obstructive pulmonary disease, indicating the probability of participation of this microorganism in the pathogenesis of upper respiratory tract disease.

The clinical manifestations of dental diseases in Bukhara gypsum workers will be evaluated against the background of upper respiratory tract disease therapy and an algorithm for managing patients with combined pathology will be developed. To develop practical recommendations for dental care in Bukhara gypsum workers with COPD. Formulate measures to protect the environment and human health from the negative impact of gypsum production and use of gypsum, develop measures of prevention.

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