

Indications for Dental Examination of Mentally Ill Patients with Periodontal Diseases

Astanov Otabek Mirjonovich

Bukhara State Medical Institute

Annotation. The issues of combined diseases of the oral cavity (OD) and internal organs occupy a prominent place in dentistry, because they allow us to reflect the essence of the genesis of many dependent diseases of the OD and outline ways to develop comprehensive preventive measures [3]. Therefore, it is often noted that lesions of the PR tissues, in most cases, are the first clinical signs of disorders in diseases of the neuroendocrine, hematopoietic, digestive, cardiovascular systems (CVS), etc. [1, 5, 9, 15]. The dependence of the occurrence of a pathological situation in the PR on the general condition of the body is beyond doubt, while the incidence of caries, periodontitis and abnormalities of the maxillary joints in a number of somatic diseases has been proven [8], including when harmful factors are exposed to the human body [7]. A number of authors see a possible pathogenetic role of dysfunction of the autonomic nervous system (ANS) and the central nervous system (CNS) in the formation of the pathological process [6]. The relationship between the occurrence of wedge-shaped dental defects and diseases of the central nervous system has been noted [12]. Also, the condition of the dentition system and the provision of comprehensive dental care to the mentally ill is a little-studied issue. At the same time, with the growth of mental illness (PD), the dental service of psychiatric hospitals cannot cope with the entire flow of patients and some patients with mental disorders end up in ordinary dental clinics. The experience of dental assistants in providing dental care to patients with mental disorders has shown that special training is necessary to work with this category of patients [11, 13,17].

Keywords: indications, dental examination, patients, epidemiology, pathology

Introduction

The aim of the study was to assess the condition of periodontal tissue and sensory threshold sensitivity of the examined patients with records of epidemiology of pathology in the Bukhara region.

Material and methods. The research is based on retrospective and prospective data obtained as a result of observation of patients and their medical records in 2020-2023 with varying severity of psychiatric pathologies on the dispensary records of the Bukhara Regional Psychiatric Hospital, as well as materials obtained from the statistical department of the Ministry of Health of the Republic of Uzbekistan.

To assess the dental condition and for the purpose of conducting a long-standing dental study retrospectively and prospectively, 850 patients with PD were selected (the main group was O/G; they were also divided into subgroups according to diagnoses O/G-1, 2, 3, 4) and 175 patients as a control group (C/G) without pathology of PD, aged from 18 to 70 years, who turned to a dentist at the clinic "Dental base" Bukhmi on their own initiative.

A dental examination of patients undergoing inpatient treatment was carried out, taking into account the individual disease according to the existing classification of diseases and health-related problems. In all 1025 examined patients with PD; among 175 patients who turned to the dentist, a dental examination was performed, the intensity of dental caries and its complications was determined using the CPI index, the

need for dental prosthetics, the hygienic condition of the Oral Hygiene Index-Simplified (OHI-S) - simplified index of oral hygiene (IG-Y) was used Green-Vermillion [14,16,18] (PP), the periodontal condition was assessed using the SRTN index, the viscosity of the oral fluid (RV) was determined, and the pH of saliva was measured.

In order to determine the relationship of foci of chronic PR infection with general somatic diseases and to assess the effect of PR pathology on the severity of the general condition of the body, we applied a modified risk index for chronic oral sepsis (RHOS-M) PR [10]. In order to assess the condition of the temporomandibular joint (TMJ), a study was conducted, while the coincidence of a triad of signs was taken as the selection criterion for the study group: 1) the presence of pain syndrome; 2) restriction of mouth opening; 3) internal TMJ disorders according to magnetic resonance imaging (MRI). Also, in order to determine the sensory threshold sensitivity of the examined patients, sensometry using the Sensoest device was used - the method allows to determine the emotional state of the patient and his need for premedication.

Saliva viscosity was determined using a capillary viscometer. The viscosity of RYE was calculated by the formula: $Y = CT$, where B is the kinematic viscosity of the liquid, K is the constant of the viscometer, T is the time of the liquid expiration in seconds. Also, saliva pH was measured using a portable electronic pH meter.

Statistical data processing: using variational statistical methods, the following were calculated: the average value M, the standard deviation σ and the arithmetic mean error m. In a confidence interval of 95%, the data was processed in the Statistics program.

THE RESULTS ARE DISCUSSED.

An analysis of the data obtained on psychiatric services in the republic for 2021 shows that doctors in the state are 1399.25; 1195.8 are employed; provision of doctors per 10,000 population is 0.25; the number of visits (thousand) is 1891363; 864717 of them are about the disease; 25060 were taken for D+K for the first time diagnosed; of them – psychoses -4001, schizophrenia – 1766, non-psychotic characters - 11008, mental retardation – 6327, including epilepsy 1847; including in the Bukhara region, these indicators; 65,5; 64,25; 0,25; 107853; 1466; -395, - 31, - 684, - 252, -104; 74,2 accordingly.

In the republic for 2022, it shows that doctors in the state are 1439; 1244 are employed; provision of doctors per 10,000 population is 0.26; the number of visits (thousand) is 2261245; 801503 of them are about the disease; 24345 were taken for D+K for the first time diagnosed; of them – psychoses - 3635, schizophrenia – 2056, non-psychotic characters – 10333, mental retardation – 5995, including epilepsy - 2279; including in the Bukhara region these indicators; 64; 61,5; 0,26; 111990; 43478; -1256, -467, -28, -459, -196; 106 accordingly.

Inpatient services: in the Republic of 2021; provision of beds – 8094 (per 100,000 population – 22.6); hospitalization per 100,000 246.3 of them, the state of "D" is 39.6; the number of deaths is 80; including in the Bukhara region these indicators; -497; 24,2; 274,8; 30,7; 0 accordingly.

Inpatient services: in the Republic of 2022; provision of beds – 8,107 (per 100,000 population – 22.6); hospitalization per 100,000 253.3 of them, the state of "D" is 40.5; the number of deaths is 86; including in the Bukhara region these indicators; -479; 23,8; 285,4; 32,5; 0 accordingly.

Day hospital work: In the Republic of 2021, a place per 10,000 population is 0.2; consists at the beginning of the year 352; consists at the end of the year 409; 142213 days were spent; and the number of days of disability is 5053; including in the Bukhara region these indicators -0,1; - 154; -6; -8; -3452; 0 according toBut.

Day hospital work: In the Republic of 2022, a place per 10,000 population is 0.2; consists at the beginning of the year 388; consists at the end of the year 301; 163720 days were spent; and the number of days of disability is 2976; including in the Bukhara region these indicators -0,1; - 184; -7; -8; -3943; 0 according toBut.

According to outpatient compulsory treatment: in the Republic for 2021, the state at the beginning of the year was 167; the state at the end of the year was 159; the average duration of stay was 708; the number of days from the beginning of the n/a to the termination was 35402; including in the Bukhara region, none of these indicators were noted.

According to outpatient compulsory treatment: in the Republic by 2022, the state at the beginning of the year is 159; the state at the end of the year is 160; the average duration of stay is 1036; the number of days from the beginning of treatment to termination is 54882; including in the Bukhara region, none of these indicators were noted.

For inpatient compulsory treatment; in the Republic for 2021, the state at the beginning of the year is 497; the state at the end of the year is 530; the number of days from the beginning of the n/a to the termination is 163737; including in the Bukhara region - 14; - 12; - 3986, respectively.

For inpatient compulsory treatment; in the Republic, the state for 2022, the beginning of the year 536; the state at the end of the year 548; the number of days from the beginning of the n/a to the termination 222322; including in the Bukhara region - 12; - 16; - 6819, respectively.

At the same time, financing is the cost of maintaining one per day, including all expenses: in the Republic for 2021, 24-hour hospitals 127881.38; day hospital 29543.15; for maintenance therapy per patient 83100.77; for medicines per patient per day in a day hospital 5575.89; for meals per patient per day in a day hospital 3372.53; for medicines per patient per day in the hospital 11357.14; for meals per day in the hospital 17877.79; including in the Bukhara region -125780; -25227; -180022,1; -12927; -12300; -12420; -20800 accordingly.

At the same time, financing is the cost of maintaining one per day, including all expenses: in the Republic for 2022, round-the-clock hospitals 173462.99; day hospital 44271.33; for maintenance therapies per patient 100677.28; for medicines per patient per day in a day hospital 8271.36; for meals per patient per day in a day hospital 3674.50; for medicines per patient per day in the hospital 16259.54; for meals per day in the hospital 21944.63; including in the Bukhara region -179144,4; -27243; -239338,2; -11847; -15400; -16512,6; -25445 accordingly.

One of the tasks of our study was to study the epidemiological state of the mental health and psychiatric services of the Republic, especially the example of the Bukhara region. As can be seen from the results of the analysis of the studied medical records of 17700 patients who are "D" registered – 9383 patients with disabilities, of which -609 are group 1; -7921 are group 2; - 125 – 3- th group with disabilities, -728 – sick children and adolescents under 18 years of age and from general the studied cards - 53.0% is disability by disability. Including, among women, these indicators were; -7592; - 1975; - 793; - 2623; - 2201 accordingly. It was also found that out of the studied maps of patients with pathologies of PD – with a diagnosis of schizophrenia – 4455; epilepsy – 1790; oligophrenia – 6606; other forms of psychosis – 4849.

Table 1 also shows that 52.8% of the examined patients with PD are men, 47.2% are women, while oligophrenia is 58.4% among men; schizophrenia is 57.6% among women, and 28.8% of cases of oligophrenia are among the general examined regardless of gender. The quantitative and percentage ratio between the groups by diagnosis (O/G -1, 2, 3, 4) is more fully consistent for statistical processing and as a comparative group between the main groups. In Q/Y, it was men – 56%, women - 44%, which more fully meets the requirements for statistical processing as a Q/Y.

CONCLUSION. Thus, the dental status of patients with PD is characterized by high intensities of dental caries ($20.67 \pm 0.82^*$); including; with diagnoses of schizophrenia - $21.52 \pm 0.98^*$; epilepsy - $22.86 \pm 0.94^*$; oligophrenia – $19.64 \pm 0.78^*$; - other mental illnesses – $18.66 \pm 0.98^*$; while in The examined patients were 11.44 ± 0.62 due to the large number of carious and removed teeth and high need for prosthetics from 8.2 ± 0.48 to 9.4 ± 1.4 of them, the need for prosthetics of more than three teeth in one jaw is from 4.8 ± 0.44 to $5.8 \pm 0.80^*$; at the same time, the need for more than 3 teeth is equal to but) in C/G. Also, the correlation

analysis carried out between the values of the parameters of RV, PR hygiene and the intensity of damage to the hard tissues of the tooth and periodontal tissues revealed a different degree of relationship between these parameters. The condition of PR in patients with PD is characterized by a high prevalence of periodontal tissue disease – 82% (with an aggressive form of 94%); a high risk of chronic oral sepsis – 13.3% (with A /F PD – 17.7%), poor hygiene of PR; DI-S-index of plaque - 1.1 ± 0.14 points; GI-chronic gingivitis – $1.25 \pm 0.07^*$; apical periodontitis - 1.3 ± 0.86 ; SRTN – chronic periodontitis - $1.24 \pm 0.44^*$; PPZ-pathological tooth mobility – $0.55 \pm 0.94^*$; while in patients with A/F; $-1,7 \pm 0,24$; $-1,85 \pm 0,44$; $-1,7 \pm 0,4$; $-2,25 \pm 0,24$; $-1,08 \pm 0,06^*$ accordingly; Also, all of the above results significantly differ from patients to /G.

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