

# ORTHODONTIC TREATMENTS FOR ISOLATED DENTAL ANOMALIES

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**Relevance of the study.** To date, many scientific studies have been conducted to study the clinical effectiveness of the use of cephalometric analysis as a traditional method of orthodontic treatment in isolated dental anomalies Gyandjali N. T. (2014), Kosyuga S. Yu., Botova D. I. (2015), Makeeva I. M. (2014), Abbate G.M., Caria M.P., Montanari P. (2015), Best A.D., Shroff B., Carrico C.K., Lindauer S.J. (2017), Buschang P.H., Shaw S.G., Ross M., Crosby D., Campbell P.M. (2014) conducted. The maximum control over the movement of teeth and roots, as cited in scientific sources, allows orthodontic treatment of complex dental – jaw abnormalities. Makeeva I. M. (2014) and in scientific studies of other co-authors, in separate dental anomalies, they are considered to have high patient aesthetic requirements during orthodontic treatment. In his research, the author compared the results of treatment with the help of elainers, along with traditional treatment. For example, the duration of treatment with elainers with isolated dental anomalies averaged 10 months, and treatment with breakaways averaged 18 months. Gasanov R. A. (2018) and other co-authors make it possible to assess the hygienic condition of the oral cavity of patients during orthodontic treatment and improve the quality of life in patients through it. In isolated dental anomalies in foreign and domestic scientific literature, significant differences in index values were observed in patients using elainers 1.2 and 1.8 in traditional orthodontic treatment, on average 1.15 months after oral hygiene before starting treatment. Thus, the authors argue that, unlike elainers, the presence of non-removable orthodontic devices, improved oral hygiene and the possibility of normalizing the state of chewing in patients are created [1.3.5.7.9.11.13.15.17.19]. At the same time, the authors note that patients who receive orthodontic treatment with oral hygiene should pay attention to the accumulation of fillers and blisters on their teeth.

Subsequently, in orthodontic treatments, the elimination of dental row defects as well as the use of braces will worsen the value of the plaque index in patients, while in patients treated with elainers, the index value will remain a constant level. There are studies in the existing domestic and foreign literature devoted to the study of the effect on the development of gingivitis as a result of orthodontic devices. Thus, when using orthodontic devices, the value of the RMA index (modified by Parma, 1960) increases significantly 3 months after the start of treatment, which is associated with a deterioration in hygienic condition. After 1 year, the index quadruples, and on average 20.5 values are evaluated biolan. At the initial stage of orthodontic treatment, periodont tissue inflammatory diseases are often latent, patients ignore the first signs of the disease, which leads to a late diagnosis and treatment of these diseases. In addition, when not adequately treated during treatment with the traditional method of treatment, the periodont tissue is overloaded, blood vessel compression and thrombosis appear, blood circulation and tissue nutrition are disrupted, which manifests itself as an inflammatory reaction.

Thus, the transition from unsatisfactory to a good level of oral hygiene when orthodontic treatment is carried out through elainers in individual dental anomalies. It is a method of choice in orthodontic treatment, since they are removable orthodontic devices that do not create conditions for additional plaque retention. By increasing the effectiveness of treatment through elainers in isolated dental anomalies, a reduction in the risk of inflammatory diseases in the parodont tissue is achieved. Patients with isolated dental anomalies do not need to change their usual diet during oral cavity protection, patients do not have oral cavity lesions, elainers made of bioinert medical plastic are also a method of choice in the orthodontic treatment of patients with allergic history (nickel allergy). We aim at orthodontic treatment of dental row defects in patients with isolated dental anomalies as well as the

implementation of inflammatory processes in parodont tissue through physiotherapeutic and phytoterapeutic treatments [2.4.6.8.10.12.14.16.18].

Various physiotherapeutic methods were used to treat periodontic diseases: electrotherapy, ultrasound, aerosol therapy, photo therapy, vacuum therapy, balneo and peloid therapy, massage and other treatments were carried out. Physiotherapeutic procedures used to eliminate inflammatory processes in parodont tissues in patients with isolated dental anomalies have a beneficial effect on the system of nerve systems in parodont tissues, its vegetative section, hemodynamics, improve lymphatic and blood circulation, affect the growth of pathological granulations, reduce inflammatory and stagnant phenomena, improve metabolic processes, increase tissue resistance. The specific severity of physiotherapy procedures used to eliminate inflammatory processes in parodont tissues in patients with isolated dental anomalies is considered to depend on the form, course and degree of development of the disease.

**Results and analyzes.** In patients with isolated dental anomalies, parodont produces an electropharmacological effect that combines the combined effects of medicinal ions and galvanic current in inflammatory processes in their tissues. During electrophoresis, long-term hyperemia (1.5-2 hours) occurs, which stimulates metabolic processes, the formation of biologically active substances (histamine, acetylcholine, etc.), serves as a source of long-term neuroflex binding property, enhancing the regeneration and resorption processes of tissue breakdown products. In patients with isolated dental anomalies, it was found that in inflammatory processes in parodont tissues, vitamin C is a persistent manifestation of local c-hypovitaminosis, which requires local saturation of parodont tissues with ascorbic acid. Electrophoresis of vitamins C and RR has an anti-inflammatory effect for the elimination of substances that have a local binding property and for chronic and aggravated periodontitis. The accumulation of vitamin C in periodont tissue ensures the normal permeability of capillaries, improves the physiological activity of connective tissue and promotes the formation of collagen. During the treatment process, vitamin RR reduces the permeability of blood vessels, affects hyaluronidase, increases the strength of capillaries and protects against the elimination of ascorbic acid. Improving lymphatic and blood circulation reduces hypoxia, improves trophism of periodont tissues. Ascorbic acid electrophoresis has been best done with a stainless steel electrode because lead electrodes do not promote the accumulation of vitamins, which is believed to be due to the oxidative effect of lead on the reduced form of ascorbic acid.

We aim to use phytotherapeutic treatments in inflammatory processes in parodont tissues in patients with isolated dental anomalies. Phytotherapeutic treatments were considered effective compared to other treatment treatments, aimed at reducing PMA, OHI-S indices and OIBSHQ diseases, developed and implemented complex treatments for topical application of common pomegranate oil (rinsing the oral cavity with pomegranate oil applique using SPLAT Professional "healing herbs" and "Biocalcium" rinsing) to parodont tissue and mucous membranes. In patients with isolated dental anomalies, pomegranate oil, applied as a phytotherapeutic treatment in inflammatory processes in parodont tissues, was prescribed to be applied to the oral mucosa and taken in 5-7 drops, rinsed with oral SPLAT Professional "healing herbs" and "Biocalcium" chewing for 1 minute, and rinsed the mouth with other liquids for 10-15 minutes in order to achieve local appliquément. The course is recommended in 8-10 treatments. After rinsing, it is prescribed not to eat for 2 hours and not to clean the teeth. The course can also be repeated 3-5 times a year. SPLAT Biocalcium mouthwash-an effective prophylactic agent: convenient to use after eating and cleaning the oral cavity; the active composition of the mouthwash penetrates hard-to-reach places, provides absolute cleansing; SPLAT professional "Biocalcium"; fills the preventive effect of toothpaste; refreshes breathing for a long time; a necessary tool when there are orthodontic and orthopedic constructions; can be used in irrigators. SPLAT Professional" healing herbs " mouthwash: provides for the Prevention of inflammation in the oral cavity; effectively fights against pathogenic bacteria that cause the formation of caraches and caries; refreshes breathing; 99% is considered a natural product. Clinical effectiveness from rinsing the oral cavity with SPLAT Professional "healing herbs" and "Biocalcium" chewing is associated with the formation of a protective film on the teeth and gum mucosa, and with this, protection against the harmful effects of

acidic carash and toxic drugs that enter the mouth from the environment. It stores active minerals and vitamins of Group A, V, C, calcium and iron in many concentrations, as well as antioxidants and skin enhancers. Pomegranate oil has three times more antioxidant properties than blue tea, which is why this remedy is also recommended in oral tea.

In patients with isolated dental anomalies, post-treatment analyses of pathological changes in guruhki parodont tissue were compared. Research patients were examined by RMA, OHI-s indices in order to determine their post-treatment condition of oral cavity and periodont. The development of inflammatory processes in Parodont tissues is evidenced by parodont diseases. In patients examined, pathological processes in the parodont tissue were found to occur for the following reasons: poor oral hygiene was 74% before treatment; 53% after treatment. high poured fillings changed by 7% after treatment in 37% of patients before treatment; tongue and Lip Hip ligaments were eliminated after treatment in 12% of patients before treatment. occlusion changes in the tooth – jaw system were eliminated after treatment in 45% of patients before treatment. changes in parodont tissue as a result of improper bite and chewing pressure yuyuki were observed in 62% of patients after treatment before treatment. misattributed dental prostheses were eliminated after treatment in 22% of patients. bridging prostheses and artificial coatings parodont tissue resorption was eliminated after treatment in 18% of patients. orthodontic devices and their incompatibility with the jaws occur 11% before treatment after treatment the chewing condition was restored. The Green-Vermilon method was used to determine the post-treatment status of patients with isolated dental anomalies in the oral cavity. G.Green and I.R. Wermillon (1964) OGI-s (Oral Hygiene Indices-Simplified) is evaluated by a simplified index of oral hygiene.

**Conclusion.** The following tooth surfaces were studied to determine OHI-S: face, tongue, and (6/6)/(6/6)lab1|1. Dental caries was eliminated when determining the oral condition of patients being examined. The amount of Carache on the surfaces of the teeth was determined as follows: the iodine – retaining solution stains six permanent tooth surfaces with the mixture-the lip surfaces of the upper central incisors, the facial surfaces of the Upper first permanent large root teeth, the amount and type of Carache on the tongue surfaces of the lower first permanent large root teeth were determined and.

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