

Modern Treatments for Isolated Tooth Anomalies

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Relevance of the study. In the practice of orthodontic dentistry, dental anomalies and deformities occupy one of the leading places among the causes of parodont diseases. According to experts, 63% of patients with isolated dental anomalies have been found to develop pathologies of parodont tissue. Early diagnosis and effective treatment of periodont diseases, which are accompanied by anomalies of individual teeth, is one of the urgent tasks. Periodont diseases occur with anomalies in the condition of teeth of different weights. In 73% of cases of the front teeth of the lower jaw, periodontitis is observed when separate dental anomalies are observed in 67% of the upper jaws. It should be noted that both dental anomalies and deformities can worsen the condition of parodont tissues, and pathologies of parodont tissue negatively affect disorders in the state of individual teeth, occlusion and occlusion.

Orthodontic treatment of isolated tooth anomalies is one of the important steps in eliminating occlusive damage and creating a stable occlusion in patients with periodont diseases. Achieving high aesthetic and less important functional results in orthodontic dental practice is associated with the introduction of modern technologies and materials for orthodontic correction in patients with periodontitis. Effective results can be achieved by using orthodontic devices in patients with isolated dental anomalies as well as using physiotherapeutic and conservative treatments in the initial stages of periodont disease. Today, pathological changes have been identified using RMA, OHI-s indices to detect changes in orthopantomogram, telerecengogram and periodont tissue and oral cavity in the diagnosis of patients with isolated dental anomalies, and an effective treatment plan has been established [1.3.5.7.9.11.13.15.17.19]. When examined by orthopantomogram, telerecengogram examination methods in patients with isolated dental Anomalies, This allows the most accurate special calculation of all planes, angles and distances. Such an analysis allows not only to draw up a complex special treatment plan, but also to use the data obtained for the production of orthodontic devices. However, today orthopantomogram is important for a deeper study of methods for assessing the condition of bone tissue in the area of teeth and pile teeth using telerecengogram.

In addition, the use of orthodontic elainers for the treatment of dental condition anomalies, taking into account the morphological and functional indicators of the facial jaw, has not been sufficiently studied in modern specialized literature. The quality of modern orthodontic treatment also allows to improve the quality of life of patients by stabilizing the physical, social, mental or emotional activity of patients in the treatment of individual dental anomalies, according to the data of the World Health Organization. At the same time, the quality of life of adult patients undergoing orthodontic treatment with the help of elainers and breakaways is not sufficiently studied, and the methods of treatment with orthodontic devices that are obtained and not obtained in the patient are not fully studied and are one of the pressing problems waiting for a solution. Park J.W. (2008) and other authors' scientific research work cited projection errors in the diagnosis of isolated dental anomalies and errors in X-ray image detection may play a role in spotting two-dimensional images, in addition, some sources of errors have been studied due to the limitations of two-dimensional X-rays [2.4.6.8.10.12.14.16.18].

Nahm K.Y. (2012) and data from other co-founders suggest that in individuals with isolated dental anomalies, parodont tissue jaroxatation in patients with functional disorders of dental status, alveolar bone loss is observed even before orthodontic treatment begins. The use of RMA, OHI-S indexes in identifying changes in parodont tissue inflammatory processes orthopantomogram, telerecengogram and parodont tissue and oral cavity in isolated tooth anomalies is significant in preventing disease complications. 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.

Results and analyzes. 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. 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 to apply physiotherapeutic and phytotherapeutic treatments to orthodontic treatment of dental row defects in patients with isolated dental anomalies as well as to eliminate the processes of lamination in parodont tissue.

The use of physiotherapeutic and phytotherapeutic treatments in orthodontic device elainers and periodontitis in 47 patients aged 19 to 29 years, with the presence of form disorders and periodontic diseases of the dental rows I Group. There is an intermediate level of periodontitis in the area of anterior frontal teeth with defects in the II Group tooth rows 39 patients aged 29 to 39 years carry out treatment procedures for elainers and periodontitis. Guru III has isolated dental anomalies and after orthopedic treatment is the use of elainers for 38 patients between the ages of 39 and 49 with mild to moderate levels of periodontitis, as well as orthopedic treatment to eliminate inflammatory processes

in the periodont tissue. There is a plan for orthodontic treatment of dental row defects as well as treatment of inflammatory processes in the parodont tissue for patients with isolated dental anomalies.

In the selection of orthodontic device elainers in 47 patients under the age of 19 years with form disorders and periodontic diseases of the dental row i, treatment procedures were carried out taking into account the position of the jaw, The Shape of the tooth row defect, The Shape of the defect and the mild, medium and severe levels of periodontitis. In the area of anterior frontal teeth with defects in the II Group tooth rows there is an intermediate level of periodontitis an orthodontic device used by 39 patients between the ages of 29 and 39 depending on the shape and type of elainer and the degree of periodont diseases, treatment treatments were selected. Group III has isolated dental anomalies, and after orthopedic treatment, orthopedic treatments were performed for 38 patients between the ages of 39 and 49 with mild and moderate levels of parodontitis who need orthopedic treatment in one part of malui, as well as local and general treatments in severe levels of parodontitis. **Conclusion.** When choosing orthodontic device elainers in patients with isolated dental anomalies, treatment procedures were carried out taking into account the position of the jaw, The Shape of the dental resistive defect, The Shape of the defect and the light, medium and severe levels of periodontitis.

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