



Pathological Changes in Periodontal Tissues in Children with Disabilities

Eronov Yoqub Quvatovich ¹

¹ Bukhara State Medical Institute

Abstract: Inflammatory periodontal diseases are characterized by non-deviant growth, are widespread among children and large groups of the population. At the same time, periodontal diseases occur in school-age children: from 30-50% - in children aged 10-12 years, 55-96% - in children aged 13-15 years. The stagnation of the gum mucosa depends on the state of the upper layer – the epithelium, which acts as a functional barrier to microflora due to the property of epithelial cells, as well as the process of constant proliferation and differentiation of cells on the gum surface.

Keywords: children with disabilities, periodontal tissues, microbiological studies.

Relevance of the topic: Chronic catarrhal gingivitis is 35-85% among parodont disorders in children. The largest specific gravity corresponds to gingivitis of light to medium weight. Changes in the Parodont tissue are observed in 50% of children aged 7-8 years, with the prevalence of gingivitis increasing with age to sexual maturity, with 90% of children aged 12 years having gingivitis. Scientists believe that gingivitis is often painless and can remain untreated for many years. As the inflammation progresses to within the parodont, gingivitis progresses to another nosological form, parodontitis. Chronic catarrhal gingivitis is considered not only inflammation of the parodont, but also the quality of the body's response to the aggressive action of microbes present in the teeth, as a result of which an ichthyising factorial negative effect of its own character is formed, which leads to dysmetabolic damage to epitheliocytes and microtomys.

Purpose of the topic: Improvement of microbiological examination methods of parodont tissue in children with disabilities.

Research results and analyses: The following rules were followed when material was obtained for microbiological research:

1. No drugs were applied to children's mshq until the Material was obtained.
2. Children did not brush their teeth before the Material was obtained.
3. At each working stage, the receipt of the material was carried out at least 2 hours after the food was received.
4. The material obtained for the study was delivered to the bacteriological laboratory within 30 minutes of receipt.

In patients with chronic catarrhal gingivitis, the following material was taken for microbiological study:

- the contents of the tooth-milk vodka were taken into a sterile, hygroscopic vata fuse in the dental tube and also closed with a sterile lid, placing it in a sterile vial with a physiological mixture of 1 ml.

The separation of microorganisms from their natural habitat was carried out by planting the studied materials in artificial nutrient environments. The method we are studying has the research name cultural.

The materials under study nutrient media were planted with 0.1 ml of oral fluid and a physiological mixture and 0.1 ml of a vial with the contents of the tooth-gum vodka.

The material under study was planted in Petri cups primary to a dense nutrient medium. Taking the material into a pipette and slightly opening the cup, a drop was lowered into the medium and rubbed with a spatula over the entire surface of the agar.

To separate the general microflora, it was planted in blood agar prepared in the following way. 5-10% of the Animal (Sheep, rabbit, large-horned mole) diffibrinated or completely freshly obtained blood or human blood waste was added to the dissolved and cooled nutrient agar up to 45-0oc degrees, and then the sterility was checked in advance, planted in sugar water, leaving it in a thermostat for 18-20 hours. Blood agar without forming a foam, is thoroughly mixed and poured into cups with a layer of 3-4 mm. Cultivation is carried out in a thermostat at a temperature of 37oC for 18-20 hours.

The Endo environment was used to detect intestinal microflora. To prepare it, 100 ml of ordinary agar (pH 7.4) was heated in a water bath or steam Park, cooled to 70oc degrees and added 1 g of chemically pure lactose dissolved in a sterile test tube of pre-distilled and boiled water.

In separate test tubes: 1) 2-3 ml of the alcohol-saturated mixture of the main Fuxin 2) 10 ml of the 10% sulfite sodium water mixture (Na₂SO₃). In a sterile test tube, 1 ml of fuchsin mixture was measured and a sulfite sodium mixture was added (light pink color) until the fuchsin discolored. The prepared mixture was poured into heated Agar, without forming a foam, mixed well and poured into cups with a layer of 3-4 mm. Warm agar has a light-pink color, when it cools down, it discolors. It was grown in a thermostat at a temperature of 37oC for 18-20 hours [2.4.6.8.10].

In the material under study, Candida was planted in the Saburo environment to identify fungi of the species. The basis of this environment is the drojja water. 80 g of culinary drojja is taken (or 20 g of dry drojja) per 1 liter of water pipe water (not distilled), boiled for 15 minutes, filtered through a paper filter, poured into vials and 1 ATM. Sterilized for 2 minutes. 100 ml of sterilized, 1% pepton, 2% agar is added to drojja water, heated until dissolved, then 4% glucose is added (or maltose), filtered, poured into a test tube (pH 5.8) sterilized at 0.5 ATM for 20 minutes. After sterilization, the environment in the test tubes is released. Grown in a thermostat at a temperature of 37oC for 5 days.

The interpretation of the results of microbiological research of materials was carried out taking into account the differential symptoms characteristic of each type of bacteria, formed during the growth of the colony.

Tilla for staphylococci (*S. aureus*) or white (*S. epidermidis*, *S. Saprophyticus*) colonies are endemic. In micrococcus, colonies are usually colored yellow (with different shades – yellow-green to orange) or pink (red to Orange). *S. many* strains of aureus and *S. some* strains of epidermidis are dissolved by erythrocytes, forming a transparent area of hemolysis around the colonies. Micrococcus do not have hemolytic properties [10.12.13].

Streptococci are differentiated by the appearance of hemolysis in blood agar, which is associated with the lysis of cross-erythrocytes. At the same time, a transparent area is formed around the colonies with a complete covering of the environment from a tenth to a few millimeters wide. colonies of β -hemolytic streptococci may appear as follows: a mucoid 1.5-2.5 mm in diameter, in a straight circular shape, in the appearance of memorizing dew drops; Thunder-behold, 1.5-2.5 mm in diameter, round colonial, gray-white, with a slightly raised center; smooth, small, 1-1.5 mm in diameter, spherical colony with smooth edges, bright wet surface, α -hemolytic or or bruised

streptococci hemispherical in blood agar, Green in the area, forming small colonies 1-1.5 mm in diameter, forming an α -reaction on a smooth or coarse gray-green surface; they do not have a blood agar appearance and are called nonhemolytic.

Neisseries appear on the surface of blood agar in the form of smooth colonies with smooth circles around the edges, a bright or rough colony on the surface, curved edges, a strange superficial appearance with a wrong shape, some with yellow pigment. Moraxell's species grow in the form of a large hemispherical, circular, moist, sometimes mucous colony with or without a small area of hemolysis. Microbes of the asinetobacter type grow large, white, bright often mucous colony visigor, around which there is a possibility of a small hemolysis area.

Corynebacterium colonies are circular, opaque, oily, small or large, creamy, white-yellow, orange-liver colored, smooth without an area of hemolysis.

In an "Endo" environment, colonies of Representatives of the family Enterobacteriaceae are bulging, straight-circled, more or less opalesced, sometimes glabrous in appearance. They can be colorless, especially in large colonies with a pink or gray color with a black tint, the center of which is more or less pronounced [1.3.5.7.9.11.13].

Conclusion. Colonies of fungi of the Candida type are bulging, smooth, shiny, but not wet, smooth or slightly wrinkled, first white, then cream-colored. From a vial with a content of 0.1 ml of oral liquid and 1 ml of physiological mixture and tooth-milk vodka, colonies grown in nutrient media were calculated.

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