



Teeth Transplant In Chronic Periodontitis Inoutpatient Conditions

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Abstract:

Considering the importance and activity of the problem, we set ourselves the goal in this work: to study the frequency, clinical picture and course of chronic periodontitis in people of different ages, to preserve the causative tooth. Materials and methods of research: We conducted a study and studied 62 patients with various types of chronic periodontitis of one or another tooth treated in the clinic of maxillofacial surgery BukhGosmi in 2012-2016. Conclusion: Thus, the results of clinical studies have shown that in the treatment of chronic periodontitis, they contribute to the early elimination of local and general signs of inflammation, it is possible to save the causative tooth according to its condition. As a result, replantation is easily accessible, simple and effective, less traumatic, and the replacement of dentition defects by transplantation is the ideal that humanity is striving for.

Introduction:

Partial absence of teeth is the most common pathology of the dental system. According to D.A. Gavrilov, L.A. Shavlyanova (2002) by the age of 14, 10-24% of children have minor dentition defects, and among high school students, 31.9% of students need orthopedic treatment of dentition defects.

Based on experimental and clinical observations, it has been established. that a violation of the continuity of the dentition causes pathomorphological and functional changes near the defect and spreads to the entire dentition, and then to the entire body as a whole. (1,3). The absence of teeth in children leads to persistent and sometimes irreparable changes in the face, noticeable flattening of soft tissues. shortening of the upper lip, progenic relationship of the jaws, reduction of the lower part of the face, which gives the patient's face an senile appearance (3,4). The absence of teeth leads to dysfunction of the gastrointestinal tract and speech function. At an older age (13-16 years), children become less sociable, withdrawn, and laugh little (1,2,5).

A practically healthy person who has a defect in his dentition consults a doctor for dental prosthetics. The doctor grinds down intact teeth. located next to the defect. Subsequently, a crown is placed on these ground teeth. As is known, after 4-5 years, these previously healthy teeth under the crown are destroyed and subsequently removed. Unfortunately. Today this is the norm, since many orthopedists do not know how to fix the defect in any other way (1).

Thus, the absence of teeth is the most common pathology of the dental system. According to most authors, it is the cause of the development of deformation of the dentition and bite (1,5,6).

Considering the significance and activity of the problem, in this work we set ourselves the goal: to study the frequency, clinical picture and course of chronic periodontitis in people of different ages, to preserve the cause of disease.

Materials and methods of research. We conducted a study and studied 62 patients with various types of chronic periodontitis of one tooth or another who were treated at the Bukh-Gosmi Oral and Maxillofacial Surgery Clinic in 2019-2023.

An analysis of the causes of occurrence showed that chronic periodontitis can arise in the teeth of previously ill patients with symptoms of pain from temperature stimuli, when treatment was not carried out or was completed, the failure of patients to see a doctor before the disease becomes chronic, from Anamnesis revealed that the patient had once received an injury in the area of the causative tooth.

Observations showed that the 6th and 7th teeth were most often affected in 28.6% of cases. Lower jaw (63.2%), upper jaw (54.2%). The occurrence of chronic periodontitis in the acute stage was facilitated by hypothermia, common colds, flu, sharp biting on solid food, etc.

The clinical picture of chronic periodontitis was varied: a positive reaction to percussion, pain when eating solid and hot food. The mucous membrane covering the alveolar process in the area of the corresponding tooth is swollen and hyperemic.

Treatment of chronic periodontitis in the examined patients was carried out depending on age, phase of the inflammatory process, severity of the clinical picture and time elapsed from the onset of the disease, and radiological data.

In 48.6%, the causative teeth were removed (since it was impossible to save them - the coronal part was completely destroyed). The patients were prescribed broad-spectrum antibiotics and sulfonamide drugs. vitamins.

In 51.4% of patients, the causative ones, in most cases the lower 6-7 teeth, were replanted. On the day of treatment, the causative tooth was removed under conductive (mandibular) anesthesia. and the preservation of replants was carried out in the preservative solution "Vi-kon"

Subsequently, the anatomical shape of the crown was restored by filling it with "Composite". A resection of 0.3-0.4 mm was performed in the area of the root apex. After all stages of treatment, the tooth was transplanted into its original cavity.

Antibacterial, anti-inflammatory, analgesic and desensitizing therapy was carried out. The tooth was immobilized using a wire or wire-composite splint. To carry out therapeutic treatment of the replant, we have proposed a device in the form of a vice, easy to use and safe for the doctor.

The clinical, radiological and functional studies we conducted after tooth transplantation included studying the process of engraftment of the replant and restoration of its function in the postoperative period. A month after the operation, when the splint reinforcing the replant was removed, the patient's general condition was satisfactory.

Objectively: the mucous membrane in the oral cavity and in the area of the replanted tooth is pale pink, palpation does not cause pain, percussion of the replanted tooth is painless.

The replant is immobile or exhibits slight mobility. The gum tightly covers the neck of the replant.

6 months after dental replantation surgery, complete restoration of replant function is clinically determined. Patients note that they use replanted teeth just like others. Strengthening of the grafts was observed after 40 days, but was not visually observed from intact teeth. On radiographs of this period. complete or completing repair of bone tissue in the area of the apex of the replanted tooth resected during the operation is noted. A uniform thin line of the psriodontal fissure is noted.

Conclusion: Thus, the results of clinical studies have shown that the treatment of chronic periodontitis contributes to the early elimination of local and general signs of inflammation, and it is possible to preserve the underlying tooth in its condition. As a result, replantation is easily accessible, simple and effective, low-traumatic, and replacing dental defects through transplantation is the ideal to which humanity strives.

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