



Rehabilitation of Children with Congenital Isolated Clefts in the Maxillofacial Region

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Abstract: The study and improvement of the life status of children with congenital cleft lips and palate with the help of temporary silicone nipples and plates showed a positive effect on the development of speech defects and on the anthropometric indicators of the upper jaw and the dental alveolar arch.

135 infants born with VGN were involved, of which 83 were male infants and 52 were female infants. The infants were divided into 2 groups. Group 1 is the main group of 68 infants (of which 42 are male and 26 are female) and group 2 is the control group of 66 infants (of which 41 are male and 26 are female). The studied changes and their systematization lead to a decrease in maxillofacial pathologies, as well as growth and development, which contributes to the non-hormonal development of the child. The introduction of the obtained data into practical healthcare will reduce the proportion of maxillofacial anomalies. For the first time, the method of using early orthodontic treatment of children with VGN, carried out with the help of a "dental obturator for orthodontic treatment of children with VGN" has been scientifically substantiated.

Keywords: cleft, children, lip, palate, silicone, obturator.

Introduction: The infancy period. Organization of artificial feeding with the help of various devices (a nipple in a nipple, a nipple with a "petal", a "floating" obturator, an elastic obturator). The elimination of deformation of the upper jaw begins with an uneven expansion, namely a larger one in the anterior section and a smaller one in the lateral ones. At the age of 6 months to 1 year, a surgical operation is performed – cheylorinoplasty. Before surgery, an orthodontist should make a nasal liner to prevent deformities of the nostrils after surgery. The period of mixed bite. When the incisors located on the interdental bone erupt, their incorrect bookmark is manifested. The central incisors can be rotated around the axis, rejected orally. The lateral incisors are either absent or have an improperly formed crown and are located abnormally. In the area of the defect of the alveolar process, as well as along the edges of the cleft, there are usually supercomplete teeth. The bite is broken, there may be a deep incisor overlap, in the area of the canines and the first temporary molars – dental alveolar shortening and often an open bite. Plates and obturators are used to expand the upper jaw. Treatment of patients with cleft lip and palate (RGN) is one of the most difficult tasks of modern dentistry and maxillofacial surgery. In the Republic of Uzbekistan today, the birth rate of children with congenital cleft of the upper lip and palate is higher than the national average. Violations of such vital functions as breathing, nutrition and speech, aesthetic defects associated with congenital cleft of the upper lip and palate, adversely affect the overall physical and intellectual development of the child. The feeling of inferiority, the reaction of others to speech causes such a child to have difficult experiences, which, of course, affects the formation of his psyche. These psychological layers, in turn, further aggravate speech disorders. Speech defects that were not eliminated in childhood subsequently hinder the choice of a profession, interfere with work and everyday life. Conducting comprehensive studies of congenital anomalies of the maxillofacial region in order to prevent them and actively participate in this work along with doctors of various

specialties (geneticists, immunologists, obstetricians and gynecologists, pediatricians (neonatologists), neurologists, cardiologists, psychologists, sociologists, environmental doctors) and dentists. This will expand the care of the child's health and create favorable conditions for the formation of the maxillary-facial system.

The purpose of the study. To study and improve the life status of children with congenital cleft lip and palate.

Material and methods of research. 135 infants born with VGN were involved, of which 83 were male infants and 52 were female infants. The infants were divided into 2 groups. Group 1 is the main group of 68 infants (of which 42 are male and 26 are female) and group 2 is the control group of 66 infants (of which 41 are male and 26 are female). Temporary silicone nipples and plates were applied to the main group of infants, which facilitated sucking and swallowing acts and improved speech defects, while traditional methods of treatment were applied to the 2nd group of infants. When performing this dissertation, plaster models of infants were used, clinical and anthropometric methods were used to obtain parameters with congenital cleft lips and palate, followed by statistical data processing. In the course of the study, our task was to improve the life status of children with congenital cleft lip and palate with the help of temporary silicone nipples and plates, as well as to determine the state of bite in children with congenital cleft lip and palate, depending on age; in addition, to identify the features of changes in the parameters of the dental system during the change of teeth in children with congenital cleft lips and palate before urano- and cheylorinoplasty in a comparative aspect. At the same time, to determine the early timing of surgical intervention in children with cleft lip and palate, to improve the life status of children with congenital cleft lip and palate with the help of temporary silicone plates (obturators) replenishing elements that facilitate sucking and swallowing acts and to improve speech defects in children with congenital cleft lip and palate with the help of temporary silicone plates (obturators), in the end, to develop and implement into clinical practice a "Method of early orthodontic treatment of children with VGN" using orthodontic devices of their own design.

Results and their discussion. The results of the study showed that, based on a set of studies, comparative analyses of the condition and improvement of the life status of infants with congenital cleft lips and palate using temporary silicone nipples and plates were conducted for the first time. For the first time, a comparative analysis of the parameters of the upper dental alveolar arch in newborns in the period before and after the use of the proposed obturator, its effect on the growth and development of the alveolar process, was carried out. In group 1 of infants, an improvement in the life status of children with congenital cleft lips and palate was determined with the help of temporary silicone nipples and plates, the normal state of bite in children with congenital cleft lips and palate was determined depending on age, and speech defects in children with congenital cleft lips and palate improved with the help of temporary silicone plates (obturators) than in the 2-group of children with VGN (in the control group, over time, the same indicators have been coming back to normal since, but the term).

Conclusion: Thus, the study showed that on the basis of a set of studies, for the first time, a comparative analysis of the condition and improvement of the life status of children with congenital cleft lips and palate using temporary silicone nipples and plates was carried out, a positive effect was proved. For the first time, a comparative analysis of the parameters of the upper dental alveolar arch in newborns in the period before and after the use of the proposed obturator, its effect on the growth and development of the alveolar process, was carried out. The introduction of the obtained data into practical healthcare will reduce the proportion of maxillofacial anomalies. For the first time, the method of using early orthodontic treatment of children with VGN, carried out with the help of a "dental obturator for orthodontic treatment of children with VGN" has been scientifically substantiated

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