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PREVALENCE, INTENSITY AND PECULIARITIES OF THE CLINICAL COURSE OF PERIODONTAL DISEASES IN PERSONS OF YOUNG AGE

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The prevalence of periodontal disease has a steady upward trend. In the last decade, there has been a significant increase in periodontal disease in children and young people. In 10-15% of 13-16 year-olds, children are diagnosed with generalized forms of gingivitis and periodontitis. The widespread prevalence of inflammatory and destructive lesions and periodontal disease among young people requires the development of measures for their prevention. The basis of such activities is data from massive epidemiological studies.

PURPOSE OF THE STUDY

To study the prevalence and intensity of inflammatory and destructive

periodontal diseases in persons aged 19 to 24 years.

RESEARCH MATERIALS AND METHODS

Mass examinations were carried out on the basis of the clinic of the Department of Therapeutic Dentistry of the Bukhara State Medical Institute named after Abu Ali ibn Sino according to the WHO method. Examined were practically healthy males (pre-conscripts and conscripts) aged 19-24, in the amount of 700 people. The bulk of the surveyed were persons aged 19-20 years (70%), 20% - persons aged 21-22 years and only 10% were aged 23-24 years. The choice was considered representative, since in each age group the number of examined people exceeded 100.

The state of oral hygiene was determined by the Fedorov-Volodkina index as modified by Fedorov (1982), and the periodontal condition was determined using the periodontal index (PI) according to Russel (1967).

RESULTS OF THE STUDY

The prevalence of periodontal disease in the studied male population is high - more than 50% and averages 520 people per 1000 surveyed, including 230 people with periodontitis and 290 people with gingivitis.

The prevalence of gingivitis is 10% higher than the prevalence of periodontitis. However, this difference is due to the greater number of patients with localized forms of gingivitis. In generalized forms of periodontal lesions, the spread of periodontitis was 54%, which is 8% more than the prevalence of generalized catarrhal gingivitis. Thus, young people have already severe forms of periodontal disease. In patients with periodontitis, the prevalence of I and II degrees of severity is almost 4 times higher than the number of patients with the initial degree of the disease. Thus, the average value of the periodontal index for the group of patients with generalized periodontitis is 1.70 + 0.03 points. The value of this indicator according to the interpretation scale proposed by the author of the index is in the critical zone between the intervals of the onset of destructive periodontal lesions (0.7-1.9 points - the upper limit) and pronounced destructive lesions (1.6-5.0 points - the lower limit), the value of the parodoctal index obtained by us allows us to characterize the lesion of the periodontium as "moderate" with a pronounced tendency to deterioration.

The prevalence of generalized catarrhal gingivitis among all forms of periodontal lesions was as follows: mild degree 6.9% of people, medium degree - in 22.4, and severe degree was diagnosed in 3.7% of patients.

The average value of the gingivitis index for this group of surveyed was 1.5 + 0.04, which corresponds to moderate gingivitis.

The results of studying the hygienic state of the oral cavity showed that "poor" hygienic state was noted in 68% of the subjects (22% - "unsatisfactory", 20% - "bad", 26 - "very bad") and only 32% were diagnosed with "satisfactory »Hygienic condition of the oral cavity. The average value of the Fedorov-Volodkina index in the Fedorov modification is 2.8 + 0.07 points, which can be assessed as "poor hygiene" of the oral cavity. There was no significant difference in the index assessment of oral hygiene among different age groups (P> 0.09).

Thus, the hygienic index does not depend on the age of the subjects, it is a reflection of a constantly acting irritating factor on the periodontal tissue. Obviously, the older age groups

are distinguished by its longer temporary exposure to unsatisfactory oral hygiene. The dynamics of the development of inflammatory periodontal diseases was studied, depending on the age of the examined.

For this purpose, the subjects were divided into 3 age groups: I - 19-20 years old, II - 21-22 years old and III - 23-24 years old.

In the formed groups, both the incidence of new diseases and the rate of deterioration of the periodontal condition in patients with a wound were studied. The development of pathological processes in the periodontium per 1000 persons in each age group in Fig. 2.

As can be seen from the data presented, the number of people with generalized periodontal diseases increases with age, the increase in new diseases in the first two years was 80 people per 1000 people examined, and over the subsequent periods - 75 people.

Thus, over 4 years the number of patients with generalized periodontal diseases increased by 155 people. The number of patients with generalized gengivitis at the beginning increased by 50 people (from 165 to 215), and then decreased by 55 people and amounted to 160 patients. A different picture was observed when analyzing the growth rate of patients with generalized periodontitis. Over the two-year period, the number of patients with generalized periodontitis increased by 30 people, and over the next two years by 130 people, which is 1.7 times higher than the increase in patients with generalized periodontal diseases. Thus, over four years the number of patients with generalized periodontitis increased by 160 people. Taking into account the revealed dependence of an increase in the number of patients with generalized periodontitis with a decrease in the number of patients with gingivitis, it should be recognized that in the presence of a rather high negative background of local irritating factors, the development of generalized periodontitis in a significant part of people was the result of a long-term current generalized gingivitis. However, we cannot assert with a sufficient degree of probability that the growth and development of periodontitis in the surveyed group is wholly and completely a consequence of long-term catarrhal gingivitis, for the following reason: all surveyed were conscripts or conscripts in the army. Undoubtedly, a change in living conditions and nutrition cannot but cause stressful situations in a significant number of persons subjected to examination, which in turn could have an impact on the development of a dystrophic - inflammatory process in the periodontal tissues.

However, a rather high negative background of local irritating factors, such as poor oral hygiene, lack of treatment for periodontal tissue diseases, did not allow differentiating the cause of the increase in the incidence of generalized periodontitis.

It should also be noted that the development of more severe forms of both gingivitis and generalized periodontitis, with an unfavorable dental status, proceeds much faster than the increase in the number of new persons with periodontal disease.

The peak of development of more severe forms of gingivitis is at the age of 20-21 years, and periodontitis at 22-23 years. This is very important for planning treatment and preventive measures for young people, especially in organized groups.

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