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Assessment of Dental Status and Oral Health in Pregnant Women

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Abstract: Pregnant women are at greatest risk of developing dental disease. According to a number of authors, the prevalence of dental caries during physiological pregnancy is 91.4%, periodontal tissue diseases occur in 90% of cases, damage to teeth that were intact before the carious process is predominantly acute in nature - in pregnant women it is observed in 38% of cases. women (Prokhodnaya V.A. 2015). Secondary caries, exacerbation of the carious process, enamel hyperesthesia occurs in 79% of pregnant women. At the same time, the intensity of the increase in dental caries based on the absolute increase in the caries removal index during pregnancy is 0.83. (Kalinina O.S., 2017).

Keywords: caries, dental health, bad habits, pregnancy, general condition of the body.

According to an analysis of the works of some authors, the incidence of dental caries in women during pregnancy is 90.8%, and with preeclampsia it reaches 95% [76]. During pregnancy, 39% of women have previously healthy teeth damaged by acute caries. According to many scientists, inflammatory and destructive lesions of periodontal tissues during pregnancy are observed in 65-90% of cases, and in the prenatal period their prevalence is 100% [22, 31, 63, 92, 115]. According to foreign authors, many injuries to periodontal tissues, from inflammation of the gums to inflammation of periodontal tissues, is 15-65% [120, 125, 126]. M. O. Lacoin in his research work found that during pregnancy, women develop gum inflammation in 35-98% of cases, and periodontal inflammation in 7-22% of cases [117]. K. Vaget, in his study of 345 women with periodontitis during pregnancy, determined that the depth of damage to pathological pockets was predominantly (38.7%) 4-6 mm.

Purpose of the study: Based on the study of etiopathogenetic aspects of dental diseases in pregnant women, improvement of measures for their prevention. Object and methods of research: At the first stage, it was planned to study the exchange cards of pregnant women who applied to the Bukhara Regional Specialized Children's Dental Center, as well as 200 medical records of dental patients who were under supervision at the Bukhara regional branch of the Republican Specialized Scientific and Applied Medical Center for Maternal and Child Health (f no. 043/y). At the second stage of the study, we formed four clinical groups among pregnant women:

1. Epidemiological group - assess the prevalence of dental diseases over a five-year period by studying statistical materials; 2. Two clinical groups - 1st group of pregnant women with dental caries and 2nd group - women with inflammatory periodontal diseases - to study the pathogenetic mechanisms and consequences of the development of dental diseases. We observe pregnant women in the dynamics of gestational age; 3. The dispensary group used the proposed tactics of dental observation of pregnant women.

In addition, the groups were divided into three trimesters:

first - 8-12 weeks of pregnancy;

second - 13-27 weeks;

third – 28-40 weeks; The following research methods were used: clinical-epidemiological, biochemical, immunological, statistical. At the initial stage, an analysis of the prevalence and development of inflammatory diseases of periodontal tissues and dental caries in pregnant women was carried out using the example of the Samarkand region in the period 2017-2022. The medical records of 500 dental patients at the regional dental clinic (form No. 043/u) and exchange cards of pregnant women in the antenatal clinic of maternity hospital No. 2 were studied. At the second stage of our study, two clinical groups were formed among pregnant women: Group 1 - 65 patients with dental caries and Group 2 - 45 patients with chronic generalized periodontitis (CGP) of mild to moderate severity. A social survey of women was conducted using a questionnaire containing a number of questions: social and hygienic characteristics of pregnant women (age, gestational age, level of education, social status, marital status); consultant obstetrician-gynecologist - obstetric status and extragenital pathology pregnancy compatibility, nature of childbirth, pregnancy complications, extragenital pathology; Medical activity of a pregnant woman - frequency of visits to doctors, including dentists. The third phase of the study involved testing our improved dental preventive care program for pregnant women.

In the first group, in all 3 trimesters of pregnancy, the antimicrobial sensitivity of the oral cavity was systematically determined by the level of 3 antimicrobial peptides - lactoferrin, cathelicidin LL-37 and alpha-defensin in the oral fluid., then a cause-and-effect relationship was determined between the level of peptide concentrations and the development of dental caries. In the second group, in order to determine the pathogenetic connection of periodontal tissue inflammation with the general inflammatory response system, the cytokine status in the oral fluid and immunophenotyping of blood lymphocytes were assessed. In our dissertation work, the initial indicators of dental status and its dynamic changes, the microbiological effectiveness of the oral cavity, the state of oral hygiene, obstetric status were studied, and a new methodological model was developed for extragenital pathology associated with it. for the number and scope of preventive measures during pregnancy.

In order to prevent the development of a systemic inflammatory reaction with the participation of placental structures in the dentist's office, an algorithm of therapeutic measures for diseases of periodontal tissues in pregnant women has been developed.

To implement multi-level research tasks, the following groups were identified:

- 1. 200 pregnant women to analyze the prevalence of dental diseases by studying epidemiological and statistical materials:
- 2. 2 clinical groups patients with dental caries of the 1st group (n=55) and patients with inflammatory periodontal diseases of the 2nd group (n=40) - to study the pathogenetic patterns of the course and consequences of dental diseases. Pregnant women were examined during gestation;
- 3. Dispensary group (n=75) to determine the results of the recommended preventive program for pregnant women.

Conclusion. Among pregnant women and the 1st clinical group, the most common age in epidemiological categories is from 26 to 28 years, in the 2nd clinical group - from 33 to 35 years, and in the dispensary group - from 29 to 32 years. The average age of pregnant women in the epidemiological group was 26.5±15 years, in the 1st clinical group - 23.1±1.5 years, in the 2nd clinical group - 31±1.5 years, in the dispensary group - 30, 1±1. 5 years. No possible age differences were observed between groups.

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