

A CASE OF LIP DEFECT WITH FACIAL ANOMALIES IN KHORAZM REGION

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Abstract: The severity of anatomical and functional disorders directly depends on the type of upper lip cleft.

Anomalies of the maxillofacial system are among the most common congenital pathologies, and in recent decades there is a tendency to increase them. This condition is not only a functional, physiological, but also an aesthetic defect spread to the maxillofacial system, jaws, facial bones, soft tissues of the oral cavity, nose and facial tissues. Some congenital anomalies can be detected during pregnancy, while some can be detected only after birth.

Key words: aesthetic defect, congenital anomaly, cleft lip, cleft palate, anatomic disorder.

Relevance of the problem: Among the congenital anomalies of the maxillofacial system, cleft lip and palate are the most common, this pathology occurs in 1:800 babies, and in industrially developed regions, their occurrence is slightly more frequent - 1:500/1:450. The process of correction of these congenital anomalies is very difficult because it is combined with anomalies of other organs, especially the nervous system. Anatomical changes in the facial system cause functional deficits in the voice and speech system.

Today, congenital cleft palate and cleft lip occupy the 4th place among congenital anomalies of the maxillofacial area. Annual birth rate of such patients corresponds to 1:750 babies. According to statistics, 36.8% of complete cleft palate and cleft lip, 27.3% of unilateral cleft palate and cleft lip, 23.3% of unilateral cleft palate and 10.9% of bilateral cleft palate and cleft lip. Right-sided congenital cleft palate is more common than left-sided. Congenital cleft palate and lip cleft together, its course in various severe variants, is observed in most boys.

Children suffering from this pathology are considered disabled from childhood and are under the constant supervision of surgeons, orthodontists, pediatricians, neuropathologists, speech therapists, and taking measures to treat pathologies in time is one of the important tasks of modern medicine.

In children born with congenital cleft lip, in order to suck breast milk, the child has slow development of the jaw muscles, disruption of pneumatization in the branch of the mastoid tumor, and in many cases, there is a change in the left cerebral hemispheres, and it lags behind physical and mental development. As a result of hypoxia and hypoxemia, the anatomical structure of the upper respiratory tract is disturbed, breathing through the nose and mouth is formed in the child, the upper respiratory tract is prone to inflammation, as a result of lack of

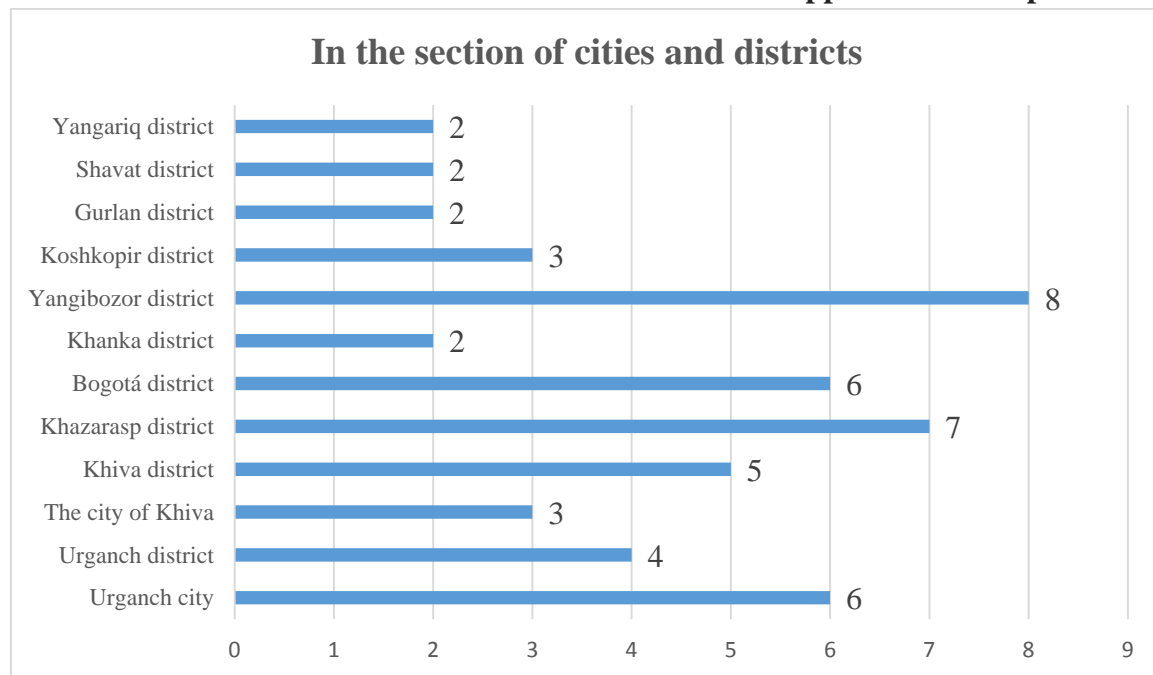
oxygen in the body, the blood circulation in the respiratory system and the cardiovascular system is disturbed.

The purpose of the investigation: to study the incidence, sex, age, causes of occurrence, and anthropometric changes of cleft lip, which is a congenital anomaly of the maxillofacial system, between districts and cities.

Examination materials and methods: address, sex, age, x-ray, computed tomography, endoscopic and microbiological examinations of 50 patients who applied to the "SEVINCH" clinic in the city of Urganch, Khorezm region in outpatient form, and the results were statistically analyzed.

Inspection results: in the course of inspections, the residential addresses of 50 children who applied to the "SEVINCH" clinic located in the city of Urganch on an outpatient basis were studied by city and district (Table 1).

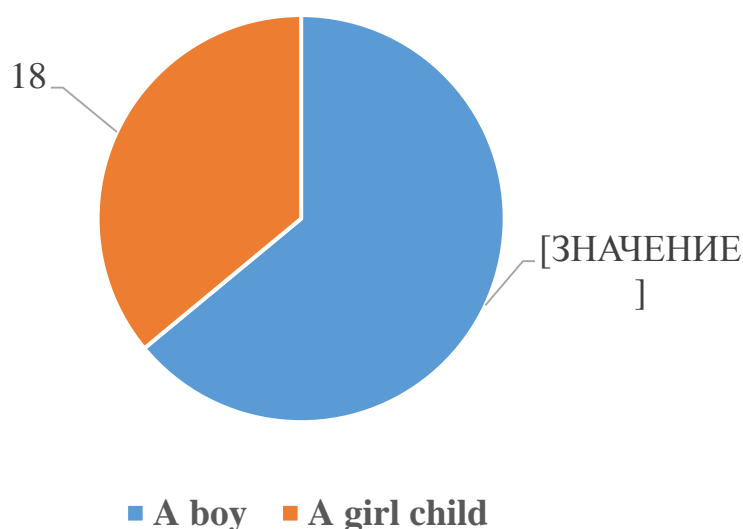
Table 1 of children's residence in cities and districts who applied on an outpatient basis.



During the studies, when the gender of the children was studied, it was found that the number of boys was greater than that of girls (Table 2).

Meeting of boys by gender Table 2.

Results of the study by gender



As a result of the investigations, when the age and gender of the studied children were studied, there were 6 33.3% girls under 3-5 years old, 3 16.6% under 5-10 years old, 4 22.2% under 10-14 years old, 5 over 14 years old 27.7%, and boys. 5 people under 3-5 years old made up 12.5%, 14 people under 5-10 years old made up 43.7%, 7 people under 10-14 years old made up 21.8%, and 6 people over 14 years old made up 18.7% (Table 3).

Age indicators of sick children Table 3.

Grouping of patients by age	Number of patients					
	Girls		Sons		Total	
	Abs	%	Abs	%	Abs	%
3-5 years old	6	33.3%	5	12.5%	11	22.0%
5-10 years old	3	16.6%	14	43.7%	17	34.0%
10-14 years old	4	22.2%	7	21.8%	11	22.0%
Over 14 years old	5	27.7%	6	18.7%	11	22.0%
Total	18	100%	32	100%	50	100%

Also, when the patient was studied for the disease of children, the same result was achieved (Table 4).

Diseases of sick children Table 4.

Types of patients' diseases	Number of patients					
	Girls		Sons		Total	
	Abs	%	Abs	Abs	%	Abs
A small nose	10	55.5%	19	59.3%	29	58.0%
Palate	8	44.4%	13	40.6%	21	42.0%

Total	18	100%	32	100%	50	100%
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10 girls were born with cleft lip, 55.5%, 29 boys were 58.0%, 8 girls were born with cleft palate, 44.4%, and 21 boys were 42.0%.

In conclusion, it can be said that most of the patients are from Yangibozor district when studied in the cross-section of districts and cities, it is more common in boys than in girls, and according to the age and type of disease, the incidence of cleft lip in boys is 59.3%, mainly in boys under 5-10 years of age. It was 43.7%.

In general, when examining children's diseases, 36.8% have complete cleft palate and cleft lip, 27.3% unilateral cleft palate and cleft lip, 23.3% unilateral cleft palate and 10.9% bilateral complete cleft palate and cleft lip. It was found that the right-sided congenital cleft lip is more common than the left side, congenital cleft palate and cleft lip together, its course in various severe variants, was observed in most boys.

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