



BACK TO THE HISTORY OF DENTAL DEVELOPMENT HELPING CHILDREN

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Abstract

Pediatric dentistry studies the prevention, clinic, diagnosis and treatment of diseases of the teeth, periodontal and mucous membranes of the mouth, tongue and lips, taking into account the age characteristics of the child and their impact on the growing body. The history of the formation of specialties can be divided into periods. The period of primary accumulation of knowledge on pediatric dentistry (before the XVIII century) was characterized by separate mentions of pediatric dental problems in the works of scientists of the Ancient East and the ancient Middle Ages. Extensive data on the eruption, growth and structure of teeth at different ages, symptoms of dental and oral diseases, treatment methods and dental care manuals are contained in the famous "Medical Canon" of Abu Ali Ibn Sina (Avicenna, 980-1037). In this study, scientists have data on teething, growth and structure at different ages, symptoms of dental and oral diseases, treatment methods and dental treatment manuals. In Russian medicine, especially in the field of dentistry, his practical recommendations for the treatment of inflammatory processes in the maxillofacial region are rarely promoted. At the same time, in Uzbekistan, his work and his life are widely studied at universities and scientific institutions.

Keywords: dentistry, prevention, oral hygiene, preschool children, methods, caries spread.

Introduction:

The issue of planned preventive hygiene was discussed at a Dental conference [I All-Russian Dental Conference (1923); II All-Russian Dental Conference (1925)], and it was proposed to carry out planned oral hygiene not only in schoolchildren, but also in preschoolers. At the III All-Union Odontological Congress in 1928, considerable attention was paid to the prevention of dental diseases in schoolchildren. According to the draft P.G. Dauge, it is 1931, 2 months 18, the release date of issue No. 25 "On compulsory oral hygiene of school-age children", it invited all regional, regional departments of road and water sanitation to immediately begin routine hygiene of schoolchildren, mainly in large industrial areas.





Methods and Materials:

There are rumors among the Uzbek people about the skillful physician Akim Lukpan (Avicenna), about his methods of prevention and treatment, including teeth. The period of development of pediatric dentistry (at the turn of the XIX-XX centuries) is characterized by the formation of specialized "pediatric dentistry", the definition of the scope of discipline and training tasks, the organization of professional dental treatment of children. It was noted that. The "Rules on Pediatric Dentists" were approved, internships in pediatric dentistry and instructions on the procedure for certifying pediatric dentists were introduced (6, 8, 7). In the XIX century. During the training of pediatricians, much attention was paid to the prevention and treatment of dental diseases in children, and the section on the basics of pediatric dentistry was included in the curriculum on childhood diseases. N.V.Sklifosovsky (1836-1904) at the VI Congress of Russian naturalists and doctors in 1879 read a report on the basics of pediatric dentistry. in the report "On the depravity of teeth among residents of the capital", the relationship between the incidence of caries and the external environment was proved and it was proposed to carry out prevention by affecting the body as a whole. The third period of development of pediatric dentistry (the end of the XIX-XX centuries) was marked by the formation of specialized "pediatric dentistry", the definition of the scope of discipline and training issues, the organization of specialized dental treatment of children. In 1896, A.K.Limberg developed the basics of planned dental care for children. oral hygiene of schoolchildren. The first free charity aid for schoolchildren was organized in 1903, but 95.4% of children needed dental treatment. In 1919, there were 8 specialized reception rooms in Moscow, and the organized child population was registered for regular oral hygiene. In 1922, the National Journal of Dentistry published a study by P.G.Dauge on pediatric dentistry "The project of systematic caries control in the RSFSR", in which pediatric dentistry was given a leading role, and the authors for the first time justified the need for oral hygiene in an organized child population. The subjects of work and study of pediatric dentistry are: 1. The period of primary toothlessness in children; 2. The presence of a removable and temporary bite period; 3. The constant dynamics of the state of the dental system associated with its growth. The presence of a period of natural and artificial feeding of the child; 4. The process of eruption and the presence of natural changes in the teeth; 5. Mental and psychological features of the dentist's contact with children and parents; 6. An important method of examination, prevention and treatment inherent in pediatric dentistry is the treatment of diseases of temporary and permanent unformed and formed teeth. Treatment and prevention of malocclusion and jaw development. Prevention of caries and periodontal diseases. To instill useful





skills for the development of the dental system and oral hygiene. The planned issue of prevention and hygiene was discussed at the Dental Conference [I All-Russian Dental Conference (1923); II At the All-Russian Dental Conference (1925), it was proposed to carry out systematic oral hygiene not only in schoolchildren, but also in young children. At the III All-Union Odontological Congress in 1928, considerable attention was paid to the prevention of dental diseases in schoolchildren. According to the draft P.G. Dauge, it is 1931, 2 months 18, the release date of issue No. 25 "On compulsory oral hygiene of school-age children", it invited all regional, regional departments of road and water sanitation to immediately begin routine hygiene of schoolchildren, mainly in large industrial areas. Despite the difficulties, a network of school outpatient clinics developed in the country, and the number of children with disinfected oral cavity increased from 1924 to 100,000, in 1935 to almost 300 million, in the 20-30s the number of children with disinfected oral cavity increased from about half a million to about half a million in Agapov scientifically demonstrated a fundamentally new method of planned preventive oral hygiene in children, proving that oral hygiene should be understood not only to improve the condition of permanent teeth, but also dairy products. Due to the difficulties of the war and the post-war years, dentistry found itself in a difficult situation, and from 1950 to 1954 the number of dentists and graduates of dental faculties decreased due to the closure of several dental faculties and many dental schools. The Committee of the Ministry of Health of the USSR recognized the need to expand the training of dental personnel, and only in 1957, in 1956, the Department of Dentistry began to open. In 1953, I.I. Agapov published a monograph "Clinical dentistry of children", covering all sections of pediatric dentistry. The accumulated clinical and organizational experience of differentiated hospitalization of children, according to the Order of the Ministry of Health of the USSR under the Council of Ministers "On measures to improve dental treatment of the population" at the IV All-Union Congress of Dentists (1962) (1968-4-30-340), was first applied to 4.5 medical positions were provided to 10,000 children in the city, and 2.5 - in rural areas. It was appropriated. The International Program for the Prevention of Dental Diseases in Kazakhstan was created taking into account the WHO goals by 2020, therefore, at the age of 6, the prevalence of caries should be 80%. CPU +kp is below 2.0, at 12 years it is CPU-1.5, at 12 years it is CPU-1.5, at 15 years it is CPU-2.3. At the meeting of dentists of Kazakhstan, the need to introduce a specialized "pediatric dentists" into the nomenclature of medical specialties was noted, since the characteristics of the child's body require a complete rejection of the schematic transfer of accumulated experience in treating adults to children. The "Rules of work of pediatric dentists" were approved, internships in pediatric dentistry were





introduced, instructions on the procedure for confirming the compliance of a pediatric dentist with his position and medical category (1). A pediatric dentist is formed as a general practitioner working at a mixed reception, combining the functions of a pediatric therapist, a pediatric polyclinic surgeon in the framework of emergency and pre-medical care assistance from a specialist with knowledge and skills of preventive orthodontics. His professional activity was based on the basic principles of pediatrics, and the creation of a system for the prevention of dental diseases was another stage in improving staff training. Epidemiological studies have made it possible to create a data bank on the planning, implementation and assessment of dental morbidity of the population, the effectiveness of dental programs (2). In the early 90s, a network of medical institutions providing outpatient dental treatment to children, most often represented by school dental clinics, was formed. They can be part of the structure of the preventive department of the Pediatric Dental Clinic (DSP). The school's classroom belonged to both the "adult" dental service and the general children's polyclinic (5,6). The task of the school dental clinic was planned oral hygiene, within which elements of prevention of dental diseases and medical examination were gradually introduced. In addition, a mobile dental office was equipped here. The most powerful structural unit is the DSP. The advent of chipboard in Kazakhstan was a revolutionary step in pediatric dentistry, as it opened up the possibility of prescribing various types of professional care. Differentiation of services necessarily required staff training (3). The tissue form of pediatric dentistry was more popular and brought real results by the end of the 80s. In general, in the best clinics, the need for caries treatment was reduced to 40-50%, rehabilitation coverage was 80-85%, and the number of complications was less than 2%. Such results were achieved thanks to a wide network of school dental clinics and the introduction of a system of medical examinations of children with varying degrees of caries activity at the dentist. The period of formation of the specialty "pediatric dentistry" - the period of modern development of pediatric dentistry (from 1990 to the present) - is characterized by the crisis state of the pediatric dental service associated with changes in the socio-economic situation in the country and the search for ways out of the current situation. The transition to a new economic situation put pediatric dentistry in a worse position compared to other industries, since its organization was more closely linked to the state system. The long-term search for alternative methods of overcoming the crisis has put pediatric dentists in unequal conditions with "adult" dentists. In the 90s, the number of pediatric dentists increased. The problem was aggravated by the reluctance of young specialists to work in pediatric dentistry. The chipboard had a weak material and technical base, but it was usually updated only by the largest of





them. Classes in schools began to close, and the number of pre-school educational institutions decreased sharply. This led to an overload of jobs in the clinic. The ratio of treatment in terms of planned prevention and accessibility has changed in favor of the latter. All this immediately affected the quality of dental treatment for children and their health. According to data for 1995, while maintaining approximately the same prevalence of caries, the need for treatment increased to 85%, and the coverage of rehabilitation decreased to 35% (1,2,3). The sharp increase in the number of complications is impressive, for example, the number of cases of complex caries of permanent teeth is increasing. The number of permanent teeth removed and the number of children hospitalized for dental inflammatory diseases has increased significantly. But pediatric dentistry has survived the main period of crisis. The insufficient level of professional training of doctors to some extent hindered the introduction of world technologies into clinical practice. The great merit of the society also lies in the training of dental specialists and the dissemination of advanced technologies through large-scale work on the organization of exhibitions, meetings, conferences, seminars and master classes, which expanded the range of professional printed publications (2, 3, 6). Currently, it is important to develop and apply preventive measures that are easy to manufacture and apply, as well as highly effective. In this regard, activated solutions and gels for remineralization are promising. The system of creating a methodological center deserves approval. In addition to the dental disease prevention program, it offers all screening activities conducted at the facility, including preventive ones. The pharmacist examines the patient, fills out the relevant documents, enters him in the clinic's registration log and, if necessary, directs him to other specialists. He takes measures aimed at oral hygiene. Upon completion of treatment, a second examination is performed and the date of the second examination is set. Based on our data, it can be noted that in school-age children, calorie intake did not always depend on age and energy consumption. In children living in areas with polluted air, the prevalence of caries is 12% higher. The optimal concentration of fluoride is recorded in the drinking water of Almaty, therefore, systemic administration into the body is not required. The incidence of caries in children aged 12 years was 80-82%, the intensity was 2.2-2.6. In children aged 6-7 years, the same indicators were at the level of 60-76% and 1.5-2.0. The content of mineral elements in children aged 7 years decreased due to violations of the teething period. In addition to dental therapists, psychologists, educators and other specialists should participate in dental education. It is recommended to start motivating for preventive and curative measures in preschool institutions from the first years of a child's life. Meetings with the child's parents should be organized and





the essence of the events should be explained to them. To talk about the possibility and importance of preventing diseases of the teeth and gums, the rules and features of brushing teeth in children. Comprehensive prevention, taking into account risk factors, has reduced the incidence by 2 times. Classes with children should be differentiated strictly by age: if it is better to conduct classes with kids in a playful way, talk to older people like adults, then compliance with a balanced diet in combination with fluoride content will decrease to 48%. It has to be formed. Public opinion is that it is necessary to take care of oral health as well as the beauty of one's appearance. At the meeting of dentists of Kazakhstan, the need to introduce a specialized "pediatric dentists" into the nomenclature of medical specialties was noted, since the characteristics of the child's body require a complete rejection of the schematic transfer of accumulated experience in treating adults to children. The "Rules for pediatric dentists" were approved, internships in pediatric dentistry were introduced, Instructions on how to prove that a pediatric dentist meets his position and medical category. The pediatric dentist worked in a mixed reception and was formed into a pediatric therapist, a general practitioner who combines the knowledge and skills of preventive orthodontics in the range of emergency and emergency care in the pediatric polyclinic of surgeons and specialists. His professional activity was based on the basic principles of pediatrics, and the creation of a system for the prevention of dental diseases was another stage in improving staff training. Epidemiological studies have made it possible to create a data bank on the planning, implementation and assessment of the prevalence of dental diseases in the population, the effectiveness of preventive dental programs / Kabulbekov, etc. a.et). A network of medical institutions providing outpatient dental treatment to children was formed by the early 90s. Dental clinics at schools were most often represented. They can be part of the structure of the preventive department of the Pediatric Dental Clinic (DSP). The school's classroom is divided into an "adult" dental service and a general children's polyclinic (Negametzyanov G.M. It belonged to both of them. Pediatric dentistry studies the prevention, clinic, diagnosis and treatment of diseases of the teeth, periodontal and mucous membranes of the mouth, tongue and lips, taking into account the age characteristics of the child and their impact on the growing body. The history of the formation of specialties can be divided into periods. The period of primary accumulation of knowledge on pediatric dentistry (before the XVIII century) was characterized by separate mentions of pediatric dental problems in the works of scientists of the Ancient East and the ancient Middle Ages. Extensive data on the eruption, growth and structure of teeth at different ages, symptoms of dental and oral diseases, treatment methods and dental care manuals are contained in the famous





"Medical Canon" of Abu Ali Ibn Sina (Avicenna, 980-1037). In this study, scientists have data on teething, growth and structure at different ages, symptoms of dental and oral diseases, treatment methods and dental treatment manuals. In Russian medicine, especially in the field of dentistry, his practical recommendations for the treatment of inflammatory processes in the maxillofacial region are rarely promoted. At the same time, in Uzbekistan, his work and his life are widely studied at universities and scientific institutions. There are rumors among the Kazakh people about the skillful physician Akim Lukpan (Avicenna), about his methods of prevention and treatment, including teeth. The period of development of pediatric dentistry (at the turn of the XIX-XX centuries) is characterized by the formation of specialized "pediatric dentistry", the definition of the scope of discipline and training tasks, the organization of professional dental treatment of children. It was noted that. The "Rules on Pediatric Dentists" were approved, internships in pediatric dentistry and instructions on the procedure for certifying pediatric dentists were introduced (6, 8, 7). In the XIX century. During the training of pediatricians, much attention was paid to the prevention and treatment of dental diseases in children, and the section on the basics of pediatric dentistry was included in the curriculum on childhood diseases. N.V.Sklifosovsky (1836-1904) at the VI Congress of Russian naturalists and doctors in 1879 read a report on the basics of pediatric dentistry. in the report "On the depravity of teeth among residents of the capital", the relationship between the incidence of caries and the external environment was proved and it was proposed to carry out prevention by affecting the body as a whole. This period of development of pediatric dentistry (the end of the XIX-XX centuries) was marked by the formation of specialized "pediatric dentistry", the definition of the scope of discipline and training issues, the organization of specialized dental treatment of children. In 1896, A.K.Limberg developed the basics of routine oral hygiene for schoolchildren. The first free charity aid for schoolchildren was organized in 1903, but 95.4% of children needed dental treatment. In 1919, there were 8 specialized reception rooms in Moscow, and the organized child population was registered for regular oral hygiene. In 1922, the National Journal of Dentistry published a study by P.G.Dauge on pediatric dentistry "The project of systematic caries control in the RSFSR", in which pediatric dentistry was given a leading role, and the authors for the first time justified the need for oral hygiene in an organized child population. The subjects of work and study of pediatric dentistry are:.The primary period of prosthetics in children; available period, removable and temporary occlusion;.Constant changes in the condition of the dentition, due to its growth; the presence of a period of natural and artificial feeding of the child; The process of teething and natural changes in teeth;





mental characteristics of the dentist's contact with the child and parents;. Congenital and acquired malformations, developmental abnormalities, etc. An obligatory method of examination, prevention and treatment inherent in pediatric dentistry has become the treatment of diseases of temporary and permanent unformed and formed teeth. Treatment and prevention of malocclusion and jaw development; 2. Prevention of caries and periodontal diseases; 3. To instill useful skills for the development of the dental system and oral hygiene. The planned issue of prevention and hygiene was discussed at a Dental conference [I All-Russian Dental Conference (1923); II At the All-Russian Dental Conference (1925), it was proposed to conduct systematic oral hygiene not only in schoolchildren, but also in infants and preschoolers. At the III All-Union Odontological Congress in 1928, considerable attention was paid to the prevention of dental diseases in schoolchildren. According to the draft by P.G. Dauge, this is 1931, 2 months 18, the release date of issue No. 25 "On compulsory oral hygiene of school-age children", it invited all regional, regional departments of road and water sanitation to immediately begin routine hygiene of schoolchildren, mainly in large industrial areas. Despite the difficulties, a network of school outpatient clinics developed in the country, and the number of children with disinfected oral cavity increased from 1924 to 100,000, in 1935 to almost 300 million, in the 20-30s the number of children with disinfected oral cavity increased from about half a million to about half a million in the National Assembly, proving that oral hygiene should be understood not only as improving the condition of permanent teeth, but also dairy products. Due to the difficulties of the war and the post-war years, dentistry found itself in a difficult situation, and from 1950 to 1954 the number of dentists and graduates of dental faculties decreased due to the closure of several dental faculties and many dental schools. It was only in 1956 that the Committee of the Ministry of Health recognized the need to expand the training of doctors at the Faculty of Dentistry. In 1953, I.I. Agapov published a monograph "Clinical dentistry of children", covering all sections of pediatric dentistry. The accumulated clinical and organizational experience of differentiated hospitalization of children was demonstrated in the work of the Council of Ministers of the USSR "On measures to improve dental treatment of the population" at the IV All-Union Congress of Dentists (1962). According to the order of the Ministry of Health of the USSR (1968-4-30 No. 340), for the first time 4.5 medical places were assigned to 10,000 children in the city, and 2.5 in rural areas. The International Program for the Prevention of dental diseases in Kazakhstan was created taking into account WHO goals by 2020, therefore, at the age of 6, the prevalence of caries should be 80%. CPU +kp is below 2.0, at 12 years it is CPU-1.5, at 15 years it is CPU-2.3. At the meeting of dentists





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An important point is the development and application of preventive measures that are easy to manufacture and use, and at the same time effective. In this regard, solutions for remineralization, as well as gels, are promising. The preventive doctor examines the patient, fills out the relevant documents, enters him into the clinic's registry and, if necessary, directs him to other specialists. At the same time, he conducts activities aimed at oral hygiene. Upon completion of treatment, a second examination is performed and the date of the second examination is set. The content of mineral elements in children aged 7 years decreased due to violations of the teething period in school-age children, and the calorie content of food did not differ by age and energy consumption. In children living in areas with polluted air, the prevalence of caries is 12% higher. In addition to dental therapists, psychologists, educators and other specialists should participate in dental education. It is recommended to start motivating for preventive measures in preschool institutions. Classes with children should be differentiated strictly by age: if it is better to conduct classes with young children in a playful way, then talk to older people like adults, arrange meetings with the child's parents, explain the possibility and importance of preventing diseases of teeth and gums, talk with them about how to properly care for teeth and gums. about the rules and features of brushing teeth by a child, comprehensive prevention, taking into account risk factors, increases the incidence by 2 times, to which it has been





reduced. The appointment of a balanced diet in combination with trace elements decreased to 48%.

To conclude: It is necessary to form a public opinion that it is necessary to take care of oral health in the same way as it is necessary to take care of the beauty of appearance.

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