



CONDITIONING OF PERIODONTITIS ON THE BACKGROUND OF PERIODONTITIS

Turayev Alimjan Baxriddinovich
Samarkand State University

Abstract

The article discusses the relationship between periodontitis and the development of periodontitis. The authors conclude that periodontitis causes periodontitis, since the result of this disease is a general weakening of the teeth and gums, a decrease in resistance to various negative factors. Repetitive microtrauma can lead to periodontitis and periodontitis. The author believes that early treatment and prevention of periodontitis is the key to the prevention of periodontitis. Early detection and prevention of periodontal disease is key to reducing the risk of periodontitis, which must be addressed to prevent the spread of other dental and gum diseases, including infection.

Keywords: periodontitis, periodontitis, dentoalveolar system, gingival edge, microtrauma, destruction of tooth tissues.

Introduction

Periodontal diseases, along with dental caries, are a major mass lesion of the alveolar bone system. They have an insidious beginning (determined by subjective and objective symptoms), have a variable chronic course, often worsen, are difficult to diagnose in the early stages of development and are poorly treatable with the development of the pathological process. Due to these diseases, dental health itself is significantly reduced, which negatively affects the vital activity of the entire human body, psycho-emotional state and social activity. The function of the alveolar system decreases in periodontal diseases due to the inflammatory and dystrophic process in periodontal tissue [2]. Periodontitis is an inflammatory, infectious, chronic disease of periodontal tissues that can destroy the tissues around the tooth, and then the tooth itself. Due to the lack of pain in the early stages of the disease, patients often do not seek medical help. The reason why this disease is so widespread: World statistics show that 90-95% of the population today suffers from periodontitis in one form or another. Periodontitis has a diverse etiology and a complex pathogenesis; these indicators affect the nature of the action of key environmental factors, such as functional load or mastic function. To date, many etiological factors have been identified that play a role in the development of the disease. They can be local (exogenous) and general



(endogenous) and have synthetic effects. Exogenous factors include: 1) microbial target; 2) chronic damage to the edge of the tooth by food lumps in the following cases: - lack of intermediate contact (caries, incorrect fillings, veneers, crowns; lack of contact, pathological wear of the contact point contributes to the hard tissues of the tooth; the tooth is displaced or incorrectly positioned; the shape of the tooth or its position in the tooth is disturbed, and therefore the clinical equator is lost (the tooth is irregular, there is a fringe), a shape defect, curvature and curvature of the tooth); 3) chronic microtrauma - an overabundance of periodontal tissues: teeth with chronic mucosal disease, temporomandibular joint disease; Edema due to displacement of removable dentures, consoles or bridges. Among the common endogenous factors, various general somatic diseases are distinguished, the main of which are factors that cause hemodynamic disorders of the entire body. The pathological process spreads from the tooth, periodontal ligament, periodontal, bone tissue, vascular system and pulp to all periodontal tissues of the tooth. The disease is often chronic, but progresses slowly and rapidly; in this case, the reverse development usually takes place, and stabilization is possible only thanks to the great efforts of various dentists and the use of several therapeutic drugs. measures. In periodontitis, damage to periodontal tissues, teeth and tooth tissues is manifested by the following symptoms: - dental disease; the presence of tartar and soft plaque; - bleeding tooth; formation of periodontal pockets; receding dentures; pathological softening of teeth; displacement of teeth and gaps formed, rotation and curvature of teeth; digestion; Premature contact of the chewing surfaces of some teeth due to displacement of some teeth. The nature and level of the considered disorders (severity of symptoms) depend on etiological factors (their combination), the duration of the disease, the condition of the tooth (occlusive shape, presence of defects, pathological erasability, etc.), personal oral hygiene. compensatory capabilities of the body and the alveolar system. Pathological loosening of teeth occurs as a result of tissue edema at an early stage of the lesion and is aggravated by the subsequent destruction of fibrous tissue and periodontal bone tissue. The main factor in the destruction of tooth tissues is pathological activity that occurs against the background of altered and impaired function. During the destruction of periodontal tissues, the resistance to vertical movements, especially at an angle to the long axis of the tooth, as well as the degree of adaptation and compensation, significantly decreases, which leads to a decrease in periodontal sensitivity. napkin. Frequent irritants, abnormal reactions. All this, along with a decrease in compensatory reactions, will lead to a decrease in reserves of endurance to functional load. Given the prevalence of this disease and its negative impact on dental function, several conditions can be identified for the development of





periodontal diseases [5]. The periodontium is also a complex anatomical structure originating from the connective tissue between the dense plate of odontocytes and the cement of the root. Throughout the periodontium, there is a direct attachment to the jaw bone, from the apical opening of the pulp and between the periosteum and the tooth along the edges of the cells. The average thickness of the periodontal is 0.20-0.25 mm, but its size is affected by age, tooth development, their function and some pathological processes, such as periodontitis. Thus, the negative impact of the pathological process reduces the quality of the supporting, pressure-distributing, plastic, nutritional, sensory and protective functions of periodontal tissues. One of the pathological obstacles to periodontal activity is periodontitis. Periodontitis is an inflammation of the surrounding and supporting tissues of the tooth, including the periosteum of the tooth, the gums of the upper and lower jaws and tooth cells. Periodontitis can be caused by infection, injury, or medications. The main role in the development of acute periodontitis is played by microorganisms, mainly streptococci, non-hemolytic streptococci 62%, green - 26%, hemolytic - 12%. Microbial toxins and pulp breakdown products enter periodontal tissues through the root canal and dental pocket. The researchers note that infectious periodontitis can be divided into intradental and extradental types according to the method of bacterial attack. Medical periodontitis occurs when the pulp is improperly treated and strong chemicals or drugs (arsenic, tricesylformalin, etc.) enter the periodontal tissues. Traumatic periodontitis is caused by severe single damage to periodontal tissues and less severe, but repeated microtraumas, improperly (excessively) used fillings, "direct" incidents, etc. This is caused by constant pressure on certain teeth of the teeth. with a tube or a tool and bad habits (biting line, pressing on teeth with a pencil, etc.). Accordingly, periodontitis and periodontitis of etiology are similar in terms of the degree of influence of traumatic factors. Periodontitis and periodontitis are two diseases characterized by inflammation of the gums and dental epithelium. The first process is often associated with infection and destruction of connective tissue structures in the space of the root canal and fracture of the tooth near the inner wall of the alveolar process. In the second pathology, the alveolar process of the tooth root is also affected. Periodontitis causes periodontitis, because the result of this disease is a general weakening of teeth and gums, a decrease in resistance to various negative factors. Repeated microtraumas can lead to periodontitis and periodontitis. It should be noted that timely treatment and prevention of periodontitis is the key to preventing periodontitis: for example, in the early stages of periodontitis, sometimes brushing your teeth is enough: a specialist removes tartar with a laser or ultrasound; teeth with subsequent treatment with fluoride compounds. Early detection and prevention of





periodontal diseases is the key to reducing the risk of developing other diseases of the teeth and gums, including periodontitis, which is difficult to treat and requires gradual elimination to prevent the spread of dental infection with a negative prognosis.

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