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ISSUES OF CARIES PREVENTION IN CHILDREN

Abstract. Caries of baby teeth occupies a special place in the structure of this pathology. Despite the improvement of quality and expansion of the volume of preventive and therapeutic measures, the level of intensity and severity of early childhood caries in our country remains very high. There are more than a hundred reasons that contribute to the development of the carious process in baby teeth.

Keywords: physiological, dental caries, multifactorial polyetiological disease.

INTRODUCTION

Known developments in the classification of generally accepted terms of teeth eruption are not obvious, which dictates the need for a detailed study taking into account regional and ethnic characteristics. Physiological teething is an indicator of harmonious development, somatic health of the child's body [1]. Leading specialists in the field of dentistry, in accordance with the classification, distinguish physiological periods of child development, during which a certain structure of the oral cavity organs is preserved. The first period, identified by the author as intrauterine - 280 days, is fundamental, determining the stability, physiological formation and subsequent development of the body. The health status, lifestyle and level of hygienic knowledge of a pregnant woman affect the formation of resistance to caries of the dental tissues of the future child [2]. During pregnancy, the level of dental health deteriorates [3], and complications during pregnancy lead to severe symptoms of oral diseases.

MATERIALS AND METHODS

Some scientific works demonstrate the dependence of the pronounced microbial colonization of the oral cavity by cariogenic streptococci and external manifestations of active caries in pregnant women [4], which will undoubtedly affect the formation of tooth rudiments in young children due to the possible mass transmission of pathogenic flora. According to some authors, the dental well-being of pregnant women is determined by hormonal transformation, against their background, the characteristics of oral fluid change, adhesion and growth of dental plaque are potentiated, and the total mass of pathogenic flora increases. There are contradictory data on the prevalence of inflammatory manifestations from the periodontal tissues in expectant mothers: from insignificant prevalence to 100% they are associated with the lack of sanitation, complicated pregnancy, and poor oral hygiene [2]. According to S.S. Murtazaev [4], half of the examined women had minimal signs of gum inflammation at the beginning of pregnancy.

RESULTS AND DISCUSSION

expectant mother, contribute to the occurrence of extragenital pathology, which leads to decompensation of chronic diseases [3]. And is also a risk factor for the occurrence of pathology of any complexity in the oral cavity in young children [1]. This is due to a violation of the formation of a full-fledged structure of hard dental tissues [3]. Mothers with complicated pregnancies, who give birth to children with low birth weight [4], such children in the overwhelming majority have an active form of dental caries [1]. Basic knowledge of pregnant

women in the field of maintaining a healthy oral cavity, both for the women themselves and for the future child, allows you to do without negative processes. As a result of research [2], the fact of insufficient awareness among women is associated with socio-economic factors, low quality of education and weak interest in dental health. Antenatal prevention is impossible without improving the quality and depth of knowledge of pregnant women, consistent diagnosis and proper treatment with a professional approach aimed at long-term results [3]. The extent of parents' hygienic understanding and the degree of their commitment to preventive measures in children are commensurate with the risk of developing carious diseases, which is demonstrated by numerous examples [4]. It has been statistically proven that timely visits to the dentist, systematic and timely oral care of the child under the supervision of parents, as well as limiting the consumption of refined carbohydrates reduce the risk of diseases of hard dental tissues in children. Many authors claim that the carbohydrate factor is involved in the development of caries [1].

A similar dependence was proven in their studies by other authors: in countries where the average sugar consumption per person per day is less than fifty grams, a low prevalence of diseases of hard dental tissues is recorded, while in people with a high frequency of sugar consumption, the level of caries is higher than average. A connection has been proven between blooming caries and the habit of falling asleep with a bottle, juice, compote or water with honey [2], while the risk of developing caries increases six and a half times [3]. Unreasonably early introduction of carbohydrate products into the child's diet causes a disruption in the physiological functioning of the hormonal and digestive systems and negatively affects the formation of the dentition. A balanced diet contributes to the reasonable formation of eating behavior [4]. An increase in the number of diseases and complications associated with nutritional errors, insufficient food culture, are becoming the object of research by authors from different countries [10]. Breastfeeding is an excellent nutrition for the child, both traditional and recent studies have shown the crucial role of breast milk in a healthy microbial landscape. Breast milk contains immunoglobulins, lactobacilli and bifidobacteria, enzymes, all these elements protect the immature body of the child and participate in the formation of innate and acquired immunity [3]. A series of experiments demonstrate a decrease in the likelihood of development. Existing measures for the prevention and treatment of caries do not bring the expected results, the prevalence of carious diseases reaches 80%, depending on the average intensity of four teeth, which is twice as high as in economically developed countries [4].

CONCLUSION

Negative attitudes and attitudes towards dental care from parents can be passed on to children. Lack of knowledge in matters of dental health, lack of interest in mothers and fathers, lack of conviction in maintaining dental health inevitably leads to an increased risk of dental caries in children. If parents monitor the child's oral hygiene, limit the child's consumption of sweets, notice the first pathological changes in the teeth early and seek dental care in a timely manner, this significantly reduces the risk of prevalence and intensity of caries in their children.

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