



ANOMALIES AT CHILDREN LIVING IN VARIOUS ECOLOGIC CONDITIONS AND RENDERING OF THE PREVENTIVE HELP BY IT

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Relevance. To date, extensive experience in the treatment and prevention of dental diseases. It is proved that embryonic prophylaxis of dentoalveolar anomalies is possible during complex measures aimed at preventing and eliminating etiological and pathological factors. In this case, the most difficult is the adequate impact on the general condition of children, the elimination of factors negatively affecting the fetus and its dentition in the antenatal period.

In recent years, studies have been conducted to study the prevalence of dental caries, periodontal disease, and dentofacial anomalies among children and adults. However, some key points of this problem, such as the relationship between the level of pollution of others in different territories, differing in the degree of pollution of environmental objects, have not yet been clarified.

The purpose of this study -was to study the condition of teeth, periodontal disease and the frequency of dentoalveolar anomalies in children living in ecologically polluted areas, and to develop therapeutic and preventive measures.

A hygienic assessment of the degree of air pollution in the cities of Bukhara and Zarafshan was carried out together with the city centers of the State Epidemiological Supervision. The results showed that the main sources of harmful emissions in Zarafshan are the quarry of the mining and smelting complex "Muruntau", enterprises for the production of nonwoven materials, building materials, a city printing house, and in Bukhara, a graphite-gypsum plant, industrial heating network, a plant for reinforced concrete products, a textile mill, silk factory, furniture factory.

More dysfunctional is Zarafshan. Common air pollutants - dust, sulfur dioxide, nitrogen dioxide, carbon monoxide, hydrocarbon - in this area are added aggressive substances such as phenol ethyl acetate, formaldehyde. It should be noted that the leading ingredient in the level of air pollution in both Zarafshan and Bukhara was inorganic dust, suspended solids, the presence of which is a consequence of dust storms characteristic of these regions of the republic.

Postnatal prophylaxis: compulsory breastfeeding; prevention of rickets; elimination of bad habits; obligatory check of the frenum of the lip and tongue; during the period of teething and change of milk teeth, eating solid food; timely prosthetics with early tooth loss to prevent deformation of the dentition; balanced nutrition of children in kindergarten, at home and at school (a sufficient amount of fats, proteins, carbohydrates and vitamins).

In the period of milk and early tooth changes, children were prescribed: a set of myogymnastic exercises; polished mounds of unfinished milk fangs; normalization of nasal breathing.

Thus, a comprehensive survey of 2248 children in Bukhara and Zarafshan revealed various levels of prevalence of dentoalveolar anomalies among children, depending on their place of residence, which differ in the degree of air pollution. The highest levels of dentoalveolar anomalies are observed among children living in ecologically unfavorable territories, aged 7-10 and 11-15 years, which dictates the need for therapeutic and preventive measures as early as possible, i.e., starting from the embryonic period of development of the child.

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