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GENERALIZED PERIODONTITIS

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ABSTRACT

The article provides modern data on the problem of etiology, pathogenesis, clinical picture and treatment of generalized periodontitis. Periodontitis is a multifactorial disease. However, the course and progression of periodontitis is influenced by a large number of factors, including local, systemic, social, genetic.

Keywords: generalized periodontitis, etiology, pathogenesis, local and systemic therapy, complex treatment of diseases.

INTRODUCTION

Periodontal disease is a socially significant problem due to the widespread prevalence and intensity of damage to all age groups of the population. Approximately 50% of the population of different regions of the world at the age of 17-60 years have various forms of periodontal disease. Moreover, almost 90% of the population in developed countries are hereby gingivitis, 50% diagnos tiruyutsya generalized periodontitis (GP) moderate, and 3% severe. It should be noted that the incidence of periodontitis, including HAP, according to the World Health Organization, is widespread among people aged 30 to 40-44 years (55-98%), as well as at the age of 15-19 years (55-89 %).

METHODOLOGY

Mr. periodontitis (GP) - one of the Prevalence Anenii dental slaughtering timetotal. According to the publications of domestic and foreign authors, CGP began to be considered as a multifactorial disease in which neuroendocrine, metabolic and immune mechanisms are involved and in which endogenous and exogenous factors, along with immune defects, play a certain role in the formation and nature of the course pathological process in the periodontium.

Given the widespread prevalence of inflammatory diseases of the periodontal tissues and the adverse effect on the body as a whole, it becomes necessary to develop new diagnostic and therapeutic complexes that could help the doctor to recognize the etiological and pathogenetic factors of the disease, as well as to correct

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them at the initial stage of onset. diseases . Generalized periodontitis is not only a periodontal disease, but the whole organism. Most patients have a combination of various diseases of the internal organs. Many authors indicate the dependence of the severity of periodontal disease on the disease of the gastrointestinal tract. In addition, there is a relationship between diseases of the periodontal tissues and diseases of the cardiovascular system, respiratory organs, and gynecological pathology.

RESULTS AND DISCUSSION

We view Mr. P as a multifactorial Zabolev of, infection - induced immune damaged Niemi periodontal complex with a high probability of genetic predisposition, arising under the influence of the cumulative impact of exogenous ("dental" plaque, attachment of the anomalies of bridles, defect filling, prosthesis tion, anomalies position Dhu BOV, disorders occlusion) and endogenous (VNU diseases friction organs, hormonal disorders, etc.), general and local factors.

HP is the result of an imbalance between the factors of aggression (periodontopathogens) and the factors of protection of the macroorganism , the oral cavity and the periodontal complex . This disease occurs with an initial lesion of the gums (that is, the development of gingivitis) and the subsequent (or in parallel arising) involvement of other periodontal structures in the pathological process (periodontitis).

GP waveguide characterized by progressive image passage (i.e. eating s repetitive periods of about exacerbations and remissions) with the result of resorption of bone tissue of alveolar ridge / h Asti, destruction other structure round the retaining tooth system, the formation of steam pocket. Without timely and adequate treatment, CGP, as a rule, ends in loss or extraction of teeth and undoubtedly dysfunction of the dentition and the body as a whole. It can be argued with full justification that the pathogenesis of chronic generalized periodontitis is multicomponent , "multi-storey", complex, multifactorial, systemic, multifaceted and polypathogenic .

The detection in clinical conditions of such an active current pathology of periodontal disease usually does not present great difficulties, especially at the later stages of the development of the disease . At the same time, determination of the nature of the clinical course, differential diagnosis of nosological forms of periodontal lesions , prognosis of the development of the disease , identification of its relationship with the general condition of the patient and with changes in the periodontal complex and the skeletal system as a whole is a more complex task that

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requires further close study by both dentists and scientific workers not only of the stomatological profile.

CONCLUSION

Thus, the treatment of patients with GP - too complex mix etc. medical and ReA interventions to now be able to talk about what - what a benchmark standards.

It is found that treatment of patients CGP and involvement in pathological process endodont, C is used ani eat topical membranotropic antiseptic (with its remaining input iodine dimexide , IU tronidazol) has a pronounced anti-inflammatory and antibacterial effect. Under the influence of this complex, the relief of the inflammatory process in the paradontium and endodontium occurred 1.5 times faster than in persons who did not receive the indicated therapeutic complex .

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