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DENTAL PROFILE OF CHILDREN WITH CHRONIC GASTRODUODENITIS

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Introduction. Nowadays, chronic gastroduodenitis, chronic gastritis, gastro-esophageal reflux diseases occur the first place in the complex of gastrointestinal diseases in children [1, s. 528, 2, s. 31, 3, s. 127].

Inflammatory processes of periodontal tissues, damage of teeth by caries and pathological changes of oral mucosa can be present together with gastrointestinal diseases. The first important step of the treatment and prevention of chronic catarrhal gingivitis in children with chronic gastroduodenitis is the development of the record of dental morbidity with somatic pathology [4, s. 50, s. 17].

The aim is to determine peculiarities of dental profile and the course of chronic catarrhal gingivitis in midchildhood with gastroduodenitis.

Object and methods of investigation. Examined children aged 6–12 years of Poltava were divided into 3 groups: the 1st one included somatically healthy children without signs of periodontal tissue inflammation. This group contained 104 children. The same number of somatically healthy children with the presence of chronic catarrhal gingivitis included the 2nd. The third group which contained 118 people was examined during in-patient treatment and they had such diagnosis as chronic gastroduodenitis and chronic catarrhal gingivitis.

Based on done results it was determined that condition of oral cavity in children was poor. So, by Fedorova-Volodkina index, oral hygiene was evaluated as unsatisfactory (2,16±0,02 and 2,18±0,02 grades possible). In children, who had healthy periodontium and did not have somatic pathology we determined oral hygiene as satisfactory one (1,19±0,01). Gums' inflammation in children, who were ill with chronic gastroduodenitis was significantly expressed by papillary-marginal-alveolar index as gingivitis of moderate stage of inflammation. Somatically healthy children with chronic catarrhal gingivitis had mild stage of the disease. Expressed gums' inflammation with chronic gastroduodenitis was confirmed by high indicants of papillary index of bleeding, and somatically healthy children had lower stage of bleeding of papillary gums surface.

During investigation, chronic recurrent aphthous stomatitis was detected in 3 children of the 2nd group (7,3%) and 2 children in the 3rd one (6,25%).

In 60, 5 % somatically healthy children with chronic catarrhal gingivitis, abnormal occlusion was diagnosed, most of them had crowding on mandible and maxilla, attachment of frenulum of the upper lip, tongue, and shallow vestibule. Among examined children, who were during in-patient treatment due to catarrhal gingivitis, and suffered from gums' inflammation, dysgnathia was detected in 67,7%.

Intensity of fluorosis in group of children with chronic gastroduodenitis and chronic catarrhal gingivitis was detected (1,42±0,11 stage) in comparison with groups 1 and 2 (0,84±0,081 stage and 17±0,11stage correspondingly).

Children with chronic gastroduodenitis and chronic catarrhal gingivitis beginning at the age of 8-9 years have higher intensity of caries of permanent teeth, than somatically healthy children with chronic gingivitis and healthy children without signs of inflammation of periodontal tissue. Generally, it in 2.8 times increases caries intensity of permanent teeth in healthy children and in 1,35 times in somatically healthy children with gastroduodenitis.

Dental examination was performed by WHO methods 1989. The ststus of oral hygiene was evaluated by Silness-Loe 1964 and Fedorova-Volodkina 1971 indeces. The evaluation of gingivitis severity was done by papillary-marginal-alveolar index in Parma modification, 1960 and papilla bleeding index was also determined. To make comparative by caries destruction, intensity of caries of permanent and temporary teeth was determined. The stages of fluorosis intensity were determined by Moller classification 1965.

The presence of dentofacial abnormalities and manifestations of aphtous stomatitis was determined. Using general methods of medical statistics, results of investigation were done. Intensity of caries of permanent teeth possibly is higher in all age periods in examined patients without somatic pathology with chronic catarrhal gingivitis, than in healthy children without gums' inflammation.

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ГІСТОЛОГІЧНІ ЗМІНИ СТРУКТУРНИХ КОМПОНЕНТІВ ЯСЕН ПРИ ПАРОДОНТИТІ НА ФОНІ ГАСТРИТУ

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Запальні захворювання тканин пародонту на сьогодні є чи не найважливішою проблемою стоматології, що має не тільки медичне, але й величезне соціальне значення, яке зумовлено широкою поширеніс-