## МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ ВИЩИЙ ДЕРЖАВНИЙ НАВЧАЛЬНИЙ ЗАКЛАД УКРАЇНИ «БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»



## МАТЕРІАЛИ

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підсумкової наукової конференції професорсько-викладацького персоналу Вищого державного навчального закладу України «БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ» 11, 13, 18 лютого 2019 року

(присвячена 75 - річчю БДМУ)

УДК 001:378.12(477.85) ББК 72:74.58 М 34

Матеріали 100 — ї підсумкової наукової конференції професорськовикладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет», присвяченої 75-річчю БДМУ (м. Чернівці, 11, 13, 18 лютого 2019 р.) — Чернівці: Медуніверситет, 2019. — 544 с. іл.

ББК 72:74.58

У збірнику представлені матеріали 100 -ї підсумкової наукової конференції професорсько-викладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет», присвяченої 75-річчю БДМУ (м.Чернівці, 11, 13, 18 лютого 2019 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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In 14.28% of patients, suffering from pyelonephritis was bleeding gums. The movement of one to two teeth was found in 4.76%, periodontal pockets in 9.52%. In 28.57% of patients, a large number of hard and soft dental deposits were observed during the examination. Mucous membrane is dark brown color, sometimes inflamed, congestive hyperemia.

In a patient with kidney stones during the examination, hemorrhage of the gums, displacement of 1 to 2 teeth and a significant amount of dental deposits, both soft and hard were noted. The mucous membrane is inflamed, painful when touching, bleeding during probing.

In conclusion, according to the obtained data, the following preliminary diagnoses were put: patients with glomerulonephritis, pyelonephritis and kidney polycystic disease - chronic catarrhal gingivitis, with kidney stones - acute catarrhal gingivitis.

## Kotelban A.V. RITIES OF TREATMENT OF CHRONIC CATAR

## PECULIARITIES OF TREATMENT OF CHRONIC CATARRHAL GINGIVITIS WITH COMORBID DIABETES MELLITUS IN CHILDREN

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At the modern stage of development of stomatology gingivitis is treated by antiseptic agents of a wide spectrum of action, enzymes, fungicides, anti-protozoan drugs, antibiotics, probiotics, and immune modulators in case of reduced local immunity. Different schemes of treatment of this pathology against the ground of diabetes mellitus are presented in literature.

Therefore, the objective of our study is to increase the efficacy of treatment of chronic catarrhal gingivitis in children suffering from type 1 diabetes mellitus by means of improvement of the methods of pharmacological correction on the basis of investigation of clinical peculiarities of the disease.

2 groups of the study were formed – the main one and comparative (30 individuals each). The patients received basic therapy including insulin therapy according to basic-bolus scheme. The treatment of chronic catarrhal gingivitis in both groups included hygienic individual care of the oral cavity, professional hygiene and carious teeth sanation. The children from the main group were suggested to rinse the oral cavity with the antiseptic solution «Decasan»; chewing 1 pill of a probiotic action «BioGaia ProDentis»; oral administration of the immune modulator «Imupret». Chronic catarrhal gingivitis of children from the comparative group was treated according to the common scheme.

By the results of the investigation the state of the oral hygiene in all the children after treatment improved considerably. A good level of hygiene was determined in remote terms, although the indices of hygienic index were better in the children from the main group. According to PMA index inflammatory process was completely eliminated in children from the main group. In the group of comparison the mean value was 11,29%. In remote terms the value of PMA index in children of the main group 4,3 and 2,5 times decreased, and in children from the group of comparison these indices were twice as worse. A similar tendency was determined concerning sextants with gingival bleeding. In children from both groups dental calculus was lacking after treatment. In remote terms the number of sextants was low in both groups, although the difference was reliable.

Therefore, conducted course of the therapeutic-preventive measures concerning chronic catarrhal gingivitis promoted considerable improvement of the periodontal tissue in children.