МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»

М А Т Е Р І А Л И

105-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
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Матеріали підсумкової 105-ї науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) – Чернівці: Медуніверситет, 2024. – 477 с. іл.

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У збірнику представлені матеріали 105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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most often found in the variation corresponding to types 2, 3 and 6 according to the Vertucci classification. According to our study, the lateral incisors are more stable and rarely have an additional canal (the 32 teeth in 28% of the examined patients, the 42 teeth in 30% of the patients). In two-channel lateral incisors of the lower jaw, the channels are located vestibulo-lingually. A double-rooted lateral incisor is quite rare; however, we managed to record such a case.

Conclusions. According to CBCT, single-root single-channel incisors of the lower jaw are the most common. On average, every third central and lateral incisor is single-rooted, two-channel, which ends with one apical opening. Only 1% of the lateral incisors of the lower jaw have two roots. CBCT is a unique method of studying variants of the root canals anatomy of permanent teeth and for planning successful endodontic treatment.

Soltys O.M.

OPTIMIZATION OF LOCAL TREATMENT OF PERIODONTAL TISSUE DISEASES WITH A COMPOSITION BASED ON DECAMETHOXINE

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Introduction. The state of the protective and compensatory mechanisms of the periodontal complex determines the degree of prevalence, duration and intensity of inflammatory and dystrophic processes in the periodontium and other similar organs of the oral cavity and nasopharyngeal region. The goal of therapy for patients with the specified pathology is to achieve stable remission, and then long-term stabilization of periodontal tissues, which is accompanied by the absence of an inflammatory process. After the end of the first and second phases of treatment, continuous maintenance therapy is recommended. For the maintenance therapy of periodontal patients, both general and local means are recommended, aimed both at increasing the resistance of the immune system and at preventing inflammatory components in periodontal tissues. To optimize the treatment of inflammatory and inflammatory-dystrophic diseases of periodontal tissues, we recommend an antiseptic composite solution DEPS in the composition of selected optimal doses of individual biologically active drugs that have found clinical use in medicine and veterinary medicine.

The aim of the study was improving the scheme of treatment and prevention of periodontal diseases in workers of the woodworking industry of Chernivtsi region, who in the process of professional activity have long-term contact with unfavorable factors of the production environment.

Materials and methods. 70 workers of the woodworking industry with diagnosed chronic generalized periodontitis of the I degree were treated (35 people - the main group (A); 35 people - comparison group (B)), age - from 25 to 45 years. To compare the results of laboratory studies, an additional survey of 25 healthy individuals of the same age with an intact periodontium were conducted. They formed the control group (C). Clinical examination of patients was performed according to standart methods: subjective (complaints, medical history, life history) and objective (examination, periodontal indices, determination of the level of gingival attachment). Laboratory methods of research included determination of urease and lysozyme activity in saliva, degree of dysbiosis of oral cavity. As maintenance therapy, patients of the main group were prescribed the proposed composition DEPS.

Results. After the treatment, a significant improvement in the hygienic status of patients in both groups was observed, but difference between groups A and B in the indicators of oral hygiene after treatment was no statistically significant ($p_{A2-B2} > 0.05$). There was a significant improvement in periodontal indices after treatment in patients of both groups (PMA index according to C. Parma, bleeding index according to Muhlemann in Cowell I. modification, Russell periodontal index, PSR-test), but the indicators in patients of the main group were significantly better - $p_{A2-B2} < 0.05$. In patients of the main group (A) the level of attachment loss decreased by 1.83 times, comparison group (B) - by 1.71 times. The difference in levels of attachment loss after treatment between groups A and B is statistically significant ($p_{A2-B2} < 0.05$).

The activity of the enzyme urease in patients of the main group (A) and comparison group (B) after treatment was significantly reduced (p_{A1-A2} <0.001, p_{B1-B2} <0.001), but only in the main group it reached the level in the control group (C) (p_{A2-C}> 0.05). The level of lysozyme after treatment was significantly increased in patients of both observation groups (p_{A1-A2}<0.001, p_{B1-B2}<0.001), and reached the level of lysozyme in patients of the control group (C) (p_{A2-C}>0.05, p_{B2-C}>0.05). The degree of oral dysbiosis in patients of the main group (A) was significantly reduced by 5.43 times (p_{A1-A2}<0.001), and its difference from the degree of dysbiosis in patients of the control group (C) is statistically insignificant (p_{A2-C}> 0.05). The degree of oral dysbiosis in patients of the comparison group (B) was significantly reduced by 3.04 times (p_{B1-B2}<0.001), but still remained significantly different from oral dysbiosis in patients of the control group (C) (p_{B2-C}<0.05).

Conclusion. The proposed pharmacological composition DEPS is an effective antiseptic solution and can be used in the phase of maintenance therapy to improve the treatment and prevention of periodontal disease in workers of woodworking industry.

Sorokhan M.M.

METHOD OF MANUFACTURING A BRIDGE WITH MINIMALLY INVASIVE PREPARATION OF ABUTMENT TEETH

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Introduction. Clinical durability of adhesive restorations is largely determined by the quality of marginal adaptation of orthopedic structures to hard tooth tissues. One of the factors that affect marginal adaptation is adhesive strength. To improve the mechanical fixation of bridges to the hard tissues of abutment teeth, various irregularities and roughness's (microretention points) formed on the metal surface during its processing in a sandblasting machine are used by applying frequent notches 0.2 mm deep, located at an angle of 30° to the crown axis, and perpendicular to the occlusal surface and intermediate part. However, all of the above methods require significant preparation of the vestibular surface of the tooth, because the retention points have convex outlines outward, so the layer of the facing mass must be of sufficient thickness to prevent the retention nodes from being visible.

The aim of the study. Therefore, the aim of our study was to develop a method of manufacturing a bridge with minimally invasive preparation of abutment teeth.

Materials and methods. To achieve this goal, 50 diagnostic plaster models of the upper and lower jaws with small defects in the dentition were cast. The models were studied in the articulator and parallelogram. The most convenient angles for creating additional retention grooves on the oral surface of the anterior teeth, their depth and number were worked out. The necessary instruments for the preparation of hard tooth tissues and their sequence of use were also selected. After successful laboratory tests, the method was transferred to the clinic. In the oral cavity of 45 patients, the Cerec Omnical intraoral specimen scanner or the MEGAparallel 8 intraoral parallelogram, Ø 30 mm, was used for preparation.

Results. Gentle preparation of the abutment teeth was performed by forming retention grooves on the oral surface with a depth of 1.0-2.0 mm and an area corresponding to the anatomical shape of the tooth with additional application of a sequential series of depressions in the area of retention grooves to a depth of 0.5-1.0 mm using an intraoral scanner or an intraoral parallelogram.

To create retentive points for the support platforms, a set of spherical diamond burs with a diameter of 2 and 3 mm was used, which was subsequently used to create a system of thin elongated channels for the adhesive prosthesis with cone-shaped burs with a grain size of 100 μm. Diamond burs with a grit of 25-50 microns were used for preparation of the proximal or oral surfaces, and carbide burs were used for finishing the cavity margins and contouring the restoration. Carbide burs with 12 to 32 facets were used for grinding, and polishing heads, disks and strips were used for final processing.