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ВИКОРИСТАННЯ ФЕРМЕНТІВ В ЛІКУВАННІ ПАЦІЄНТІВ З ХВОРОБАМИ ПАРОДОНТА

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USE OF ENZYMES IN THE TREATMENT OF PATIENTS WITH PERIODONTITIS

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Анотація

Хронічний генералізований пародонтит займає провідне місце в структурі сучасної стоматологічної патології. Дана нозологія вимагає тривалого лікування, часто ускладнюється гнійним процесом в тканинах пародонту, який негативно впливає на резорбтивні процеси в кістковій тканині і на результати комплексної терапії, тому й залишається актуальною і важливою проблемою стоматології.

Abstract

Chronic generalized periodontitis occupies a leading place in the structure of modern dental pathology. This nosology requires long-term treatment, often complicated by a purulent process in periodontal tissues, which adversely affects the resorptive processes in bone tissue and the results of complex therapy, and therefore remains an important and important problem of dentistry.

The aim of this study was to compare the effectiveness of different enzymes in the treatment of chronic generalized periodontitis**.**

Ключові слова: тканини пародонту, ферменти, стоматологічна патологія.

Keywords: periodontal tissues, enzymes, dental pathology.

Materials and methods

57 patients with chronic generalized periodontitis of I and II degrees of severity with purulent foci in periodontal tissues were selected to achieve the goal and solve the set tasks.

Patients were divided into two groups: 1 group I (main) - (29 people);

group II (comparison) - (28 people);

Control group (16 somatically and dentistically healthy individuals)

The groups were formed on the principle of no statistically significant differences in age and gender. methods, which include determination of basic paraclinical indices (RI, PMA, OHI-S, Muhlemann bleeding index),

radiological methods,

microbiological: classical method of bacterial cultivation using test systems API, France,

immunological methods: the concentration of SIgA, Ig A, Ig G and M was determined by the method of radial immunodiffusion in a gel according to G. Manchini. Used monospecific sera against these immunoglobulins. The study of the content of IL-1β, TNF-α and IL-4 in saliva was performed by enzyme-linked immunosorbent assay.

Biochemical methods: the concentration in the serum of hydroperoxides and malonic dialdehyde was studied according to the method of Gavrilov VB Study of the concentration of superoxide dismutase and catalase in gingival erythrocytes by Chevari SI

Statistical analysis.

The efficacy of the complexes used in each group was analyzed separately and in comparison with each other by means of identical complex clinical and radiological observation, which was compared, and registration of parameters of dynamic changes of laboratory parameters, which were determined. Based on the results obtained, the total effectiveness of complex therapy was defined as the cessation of the process, significant improvement and no change. By stopping the process, we meant the elimination of the inflammatory process in the periodontium against the background of normalization of periodontal indices and the positive dynamics of laboratory parameters until their full recovery. The improvement was considered cases when there were isolated signs of inflammation in periodontal tissues and parameters of laboratory parameters, which tended to normalize until their complete recovery. The condition was observed unchanged with no positive dynamics in the clinical course of the disease, which was accompanied by minor changes in additional laboratory tests.

Comprehensive treatment of generalized periodontitis in both groups was the same and included:

- training in the rules of hygienic care
- professional hygiene measures;
- local and general use of antimicrobial and anti-inflammatory therapy;
- appointment of immunomodulatory drugs.

Treatment began with informing patients about the role of oral hygiene in the occurrence and development of infectious-inflammatory process in periodontal tissues. In the presence of unsatisfactory hygienic care of the oral cavity, patients were taught the technique of brushing teeth.In the first days, the effectiveness of the oral care measures was monitored.

Prior to conservative treatment, professional hygienic interventions aimed at eliminating local harmful factors were mandatory. Particular attention was paid to the careful removal of dental plaque from pathological periodontal pockets. If necessary, the oral cavity was rehabilitated - treatment of dental caries, correction of fillings, restoration of interdental contact points and occlusal relationships.

Removal of dental plaque was performed using periodontal curettes, an ultrasonic scaler and a sandblasting machine. The root surface was treated under local anesthesia, the wound was irrigated with an antiseptic solution. Simultaneously with professional local treatment in the comparison group used not only local antibacterial therapy with drugs containing chlorhexidine, but also systemic - "Clarithromycin" 500 mg twice a day for 5 days.

As a general antibacterial therapy for patients of group I. was selected "Amoxiclav" 875/125 twice a day, a course of 5 days, which has a pronounced antimicrobial effect against gram-positive and gram-negative aerobic and anaerobic bacteria, including major periodontal pathogens, in addition, it is characterized by immunoadjuctive action (enhances the immune response). {. {1}} Treatment of patients with chronic generalized periodontitis was supplemented by the introduction into the described treatment regimen of immunocorrective agent - reoferon and antioxidant drug - "Aevit" in conventional doses, according to the manufacturer's instructions.

Immunocorrective therapy 1 mg per day for up to 15 days.

To clean periodontal tissues from inflammatory detritus in the treatment regimen of group n comparisons also included enzymes (trypsin and lidase). Trypsin was administered 10 mg intramuscularly, and lidase - 64 IU in 10 ml of 0.5% solution of novocaine in the form of instillations in periodontal pockets for 7 days

In the main group, the nature of enzyme therapy has changed: trypsin was prescribed proteolytic enzymes with systemic action. Systemic enzyme therapy was performed with enzymes that are part of "Wobenzyme". Wobenzyme was used in a dose of 4 pills 3 times a day during the first week of treatment, then 3 pills 3 times a day for 7 days.

The results of the study

The analysis of clinical results of treatment of patients of the main group and comparison group showed that the use of systemic enzyme therapy in the scheme of complex treatment creates optimal conditions for rapid elimination of the main clinical signs of periodontal disease in patients with chronic generalized periodontitis. Thus, for 4-5 days of use in the treatment of systemic enzyme therapy in patients of the main group there was a regression of the main symptoms of inflammation in the gum tissue and eliminated the secretion of pus from periodontal pockets in the vast majority of people (91.7%). Similar positive dynamics was observed in the clinical status and in patients of the comparison group, who used traditional therapy, supplemented by local and general use of enzymes (trypsin and lidase) were registered only for 7-8 days of treatment, and in a smaller number of observed (84.4%) . Along with clinical observations, the advantage of using systemic enzyme therapy with wobenzyme in the complex treatment of patients in the main group before the use of trypsin and lidase in the comparison group was indicated by dynamic changes in the main periodontal indices.

Conclusion.

In the treatment of generalized periodontitis enzyme preparation wobenzyme in comparison with the use of trypsin and lidase. The study of the dynamics of clinical, microbiological, biochemical parameters showed that the use of wobenzyme helps to increase the effectiveness of complex therapy and reduce the duration of treatment.

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