

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ**



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професорсько-викладацького колективу
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HYGIENIC STATE OF THE PERIODONTAL TISSUE AT THE PREOPERATIVE STAGE OF TREATMENT OF PATIENTS WITH GENERALIZED PERIODONTITIS

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Introduction. Inflammatory-dystrophic processes occurring due to the effect of numerous pathogenic factors including long-term unsatisfactory oral hygiene of patients make up the base of generalized periodontitis.

The aim of the study. To assess the hygienic state of the periodontal tissue in patients at the preoperative stage of treatment of generalized periodontitis.

Materials and methods. The study was carried out through the examination and interview of 109 patients with advanced forms of generalized periodontitis. The research involved 77 individuals with II degree generalized periodontitis (70,64 %) and 32 with III degree generalized periodontitis (29,36 %). A comprehensive treatment of tooth-retaining tissues including surgery was planned. Oral hygiene was assessed by OHI-S in patients with II-III degree generalized periodontitis. The results were compared with the data of 30 practically healthy individuals without dental diseases (the group of comparison).

Results. Individuals from the group of comparison admitted regular oral hygiene ($73,33 \pm 7,94$ %) that was 2,6 times more than in patients with advanced forms of generalized periodontitis ($28,39 \pm 8,42$ %), $p < 0,01$. Regular oral hygiene was carried out by $28,21 \pm 7,20$ % of individuals with II degree generalized periodontitis and $28,57 \pm 9,63$ % with III degree generalized periodontitis, $p_1 > 0,05$. At the same time, irregular oral care was confirmed by $50,55 \pm 9,32$ % of individuals with II-III degree generalized periodontitis, that was 3,0 times higher than in the group of comparison, $p < 0,05$. At the same time, irregular oral care was confirmed by $48,72 \pm 8,00$ % of individuals with II degree generalized periodontitis, $p < 0,01$, and $52,38 \pm 0,64$ % of individuals with III degree generalized periodontitis, $p < 0,05$, $p_1 > 0,05$. According to the survey, only $10,0 \pm 3,38$ % of the respondents from the group of comparison indicated poor oral hygiene. The number of individuals with II-III degree generalized periodontitis was much higher: 2,4 times higher with II degree generalized periodontitis, $p > 0,05$, and 1,9 times higher with III degree generalized periodontitis, $p > 0,05$. OHI-S criteria determined that satisfactory oral hygiene (the score of 0-0,6 points) was found in $30,0 \pm 8,23$ % of the individuals from the group of comparison. It was 5,8 times higher than the number of patients with II degree generalized periodontitis – $5,13 \pm 2,53$ %, $p < 0,05$. OHI-S criteria did not determine satisfactory oral hygiene among those with III degree generalized periodontitis. Oral hygiene of 0,7-1,6 points was found in $60,0 \pm 8,94$ % of individuals from the group of comparison. It was higher than among other patients: with II degree generalized periodontitis – in 2,9 times and III degree generalized periodontitis – in 3,2 times, $p < 0,01$. Unsatisfactory oral hygiene (1,7-2,5 points) was more often seen among those with generalized periodontitis. In case of II degree generalized periodontitis it was 5,6 times higher, $p < 0,01$ and III degree generalized periodontitis – 4,3 times higher, $p < 0,05$. Poor oral hygiene (more than 2,6 points) was diagnosed in individuals with advanced generalized periodontitis: in $17,95 \pm 6,14$ % of those with II degree generalized periodontitis and twice as much among the patients with III degree generalized periodontitis – $38,10 \pm 10,59$ %, $p < 0,01$, $p > 0,05$. OHI-S criteria determined unsatisfactory oral hygiene index ($1,82 \pm 0,13$ points) in the group of comparison. Unsatisfactory oral hygiene was verified in patients with II degree generalized periodontitis, but the score was 1,2 times higher – $2,26 \pm 0,14$ бали, $p < 0,05$. In patients with III degree generalized periodontitis OHI-S ($2,92 \pm 0,16$ points) was indicative of poor oral hygiene. It was 1,6 times higher than that in the group of comparison, $p < 0,01$, and among those with II degree generalized periodontitis – in 1,3 times, $p_1 < 0,01$.

Conclusions. Assessment of oral hygiene of patients from the group of comparison and those with advanced forms of generalized periodontitis is indicative of the necessity to intensify and improve individual, professional and motivating measures in this group of patients.