

Features of the Identification of Local Immune Factors In The Oral Cavity Of Pregnant, Lactating Women

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Relevance. Pregnant and lactating women living in rural conditions studied their dental health, in which it was found that the incidence of dental pathological conditions in lactating women is higher than in pregnant women, a condition that leads to many tissue changes related to the oral mucosa, dental hard tissues and oral cavity.

Today, changes in all systems during pregnancy that occur in the body, especially those in the Endocrine, nervous systems, affect other organs and systems of the body. During the entire gestation period, many of these changes are a reversible process, returning to their physiological period after gestation. However, without matching in all these systems, some changes in the oral cavity are irreversible, especially as it concerns teeth and their function.

During pregnancy, changes in specific and non-specific resistance factors of the body were observed, but dental health in the system of a pregnant-lactating woman, the degree of influence of local immunity factors of the oral cavity on changes in them were not studied, they were not shown their role in the formation of these pathological conditions.

Women involved in research based on the above oral cavity we studied the parameters of local immune factors in dynamics when they were pregnant and after having children.

Nonspecific protective factors in saliva that can be affected in dental health have been identified as secretory immunoglobulin A (sIgA) and lactoferrin (LF), as well as anti – licking cytokines-interleukin-1 β (IL-1 β), 6-interleukin (IL-6), and 10-interleukin (IL-10). Since the methods of detection are presented in detail in Chapter II, we did not find it necessary to dwell on them.

We started the studies by identifying these indicators in the saliva of healthy women who are pregnant and not breastfeeding, because without knowing meior it is impossible to identify and interiretate the changes that have occurred in local immune factors.

All of the results obtained were within the framework of universally accepted reference indicators and did not differ from the results of other strikes, which means that an analysis can be carried out, comparing these parameters with data from pregnant and lactating women, taking them as a meiori indicator.

In order for it to be easy to interpret and analyze the parameters identified in the saliva of pregnant women, we separately studied the indicators of non-specific protective factors and cytokines, presented the results in the form of a table and a picture.

It is known that sIgA consists of a dimer with an average molecular mass of 380-385 kda, this immunoglobulin is produced on the surface of the mucous membranes in the body. It is also found on the surface of the mucous membranes of the upper respiratory tract of the intestines, genitals, biological fluids of the body such as tears, saliva, breast milk, fertilizer milk, as well as other biological fluids. the secretory component "envelops" sIgA, which protects it from the proteolysis of enzymes contained in various secretions found on the surface of the mucous membranes, which is

equal to the fact that the secretory component "envelops" it, does not affect its function. However, some conditionally-pathogenic microorganisms (SHPM) found on the surface of the shale floors produce proteases that break down sIgA, but this condition is rare and is considered the "first echelon" of protection that eliminates all microorganisms that have fallen into the body from the outside, which are foreign to the biotope. For this reason, it is also important to study its concentration in saliva.

Conclusion. It is also important to identify lactoferrin (Lf), a multifunctional protein of 80 kda molecular weight in the transferrin family, as it is also one of the important factors that promote oral local immunity. This protein has bacteriostatic and bactericidal action on pathogens and SHPMS, as well as anti-licking activity. In moderation, this protein is found in excess in fertiliser milk and is found in smaller amounts in other biological fluids.

LITERATURE USED

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