

TO STUDY THE FEATURES OF THE CLINICAL COURSE OF ACUTE ODONTOGENIC DISEASES OF THE MAXILLOFACIAL REGION IN CHILDREN, DEPENDING ON AGE

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Relevance. It is known that the diagnosis and treatment of inflammatory diseases of the maxillofacial region represent one of the main problems of pediatric dentistry. According to a number of researchers, inflammatory diseases of the maxillofacial region account for up to 21% of all surgical and 52% of dental diseases in childhood.

The course of odontogenic infection in children has a number of features due to the relative immaturity of the organs and tissues of the child, the imperfection of immunity, the abundance of lymphatic tissue, the presence of anatomical and physiological features of the structure of teeth and jaws, the ease of damage and increased permeability to microbes of natural protective barriers, etc.

Local treatment is aimed at the fastest purification of the focus of inflammation from exudate, suppression of local infection and stimulation of reparative processes.

Therapy of purulent-inflammatory diseases of CHLO has a complex, multicomponent approach. And its main method today is surgical - the indispensable opening of the purulent focus and its drainage, which ensures the outflow of exudate, prevents the spread of pus into neighboring anatomical areas.

The purpose of complex treatment is to reduce intoxication, restore the disturbed balance between the body and the environment.

Since the main etiological factor of purulent-inflammatory processes is microorganisms, the main importance is the effect on pathogenic microflora - the use of antibacterial drugs, both broad-spectrum and taking into account the sensitivity of the flora.

conclusions:

Despite the detailed technique of surgical treatment of purulent wounds of the maxillofacial region in children, the success of antibacterial therapy and the use of physical methods, in recent decades there has been no tendency to decrease the number of patients with purulent-inflammatory diseases of various etiologies. Patients with GVZ CHLO make up from 30 to 35% of the total number of surgical patients. According to the literature data, inflammatory processes of the maxillofacial region account for 57.5-62.4% of surgical patients in the maxillofacial hospital. The proportion of complications of purulent-inflammatory processes remains high – sepsis, mediastinitis, thrombosis of cerebral vessels, etc. The frequent development of purulent-inflammatory diseases of the soft tissues of the maxillofacial region, their complications are due to the high prevalence of chronic focal odontogenic infection, as well as infectious and inflammatory lesions of the oral mucosa. In this regard, the search for effective ways of treatment remains an urgent problem of modern surgical dentistry.

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