

ORTHODONTIC TREATMENT FOR PREVENTION OF CARIES

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ABSTRACT

This paper makes analyses of the orthodontic treatment for prevention of caries. On this case, research has been pointed out on different research on the orthodontic treatment for prevention of caries. In conclusion, research has emphasized outcomes and shortcomings of the issue with aspects of orthodontic treatment for prevention of caries

Keywords: orthodontic, treatment, prevention, caries, analyses, Uzbekistan

INTRODUCTION

However, the technology of applying braces has significant drawbacks, in particular, the occurrence of bacterial corrosion of the composite around the bracket, carious process, hypoesthesia, gingivitis and iarodontitis. In addition, metal locks and ligatures often injure the mucous membrane of the oral cavity and make it difficult to carry out hygiene procedures, which leads to inflammatory periodontal diseases and enamel demineralization. Caries develops in 15-52% of carriers of the bracket system (N.M. Shulkina, V.A. Uskova, M.V. Shulkin, 1999). If the orthodontist fails to achieve optimal oral hygiene from the patient, to predict the risk of tooth decay and take timely preventive measures, this can end in failure both for the patient and the orthodontist. The patient may experience damage to the tissues of the teeth and periodontium, and the attending physician may be sued for damages. In such situations, American courts, for example, force the orthodontist to pay compensation in the amount of 100-200 thousand US dollars.

MAIN PART

Despite the emergence at present of a huge arsenal of tools offered to ensure oral hygiene and the prevention of caries, this problem, as before, remains central to orthodontics. The solution to this problem may depend on the identification of individual characteristics of the sensitivity of the patient's body with dentoalveolar anomalies to the effects of specific factors that can cause caries when using bracket systems and the timely application of adequate preventive measures. If before removable devices were used in 90% of cases, now they are used only in 16% of cases. Today 84% of patients are treated using fixed equipment (N.M. Shulkina, V.A. Uskova, M.V. Shulkin, 1999). In this regard, the problem of prevention of dental caries and periodontal diseases in the process of orthodontic treatment is especially acute. The practical significance of the issue is determined by the high prevalence of dental caries among the population and the incidence of periodontal tissues. Braces, rings, arches fixed on the teeth significantly impede oral hygiene, which leads in 32.7% of cases to damage to the hard tissues of the teeth, mainly immune to caries surfaces, and in 92% there is an unfavorable periodontal condition. Incorrect orthodontic treatment also contributes to these changes. To prevent such complications, various preparations containing calcium and fluorine have been proposed. However, they do not always give the desired effect, since 65-67% of the examined patients have poor oral hygiene, and local fluoridation is not effective enough due to the rapid loss of calcium fluoride crystals.

CONCLUSION

Currently, many fundamental aspects of prevention in the process of orthodontic treatment have not yet been fully resolved. There is no data on the use of the deep fluorination method in orthodontics. The issues of assessing the resistance of tooth enamel and the effectiveness of remineralizing agents using the electrometric method in the process of orthodontic treatment are not adequately covered. There are no effective motivational teaching methods and self-monitoring of the quality of toothbrushing for orthodontic patients. In this regard, the urgent task is the further development of preventive measures in the process of orthodontic treatment.

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