

Conclusion. The applied experimental models indicate the development of osteoporotic changes in periodontitis associated with diabetes mellitus. The use of strontium ranelate consistently slows down the processes of bone mineral density's loss and contributes to an increase in the calcium to phosphorus ratio and strontium content, which indicates the activation of the bone component of the periodontium remineralization.

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IMMUNOLOGIC STATUS OF THE ORAL FLUID DURING SURGICAL SANITATION OF THE ORAL CAVITY IN DIABETES MELLITUS PATIENTS

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Aim: to study the dynamics of immunologic indices of the oral fluid during surgical sanitation of the oral cavity in patients with diabetes mellitus.

Materials and methods. We examined 57 patients with type 2 diabetes with sub-compensated and decompensated forms of the disease and 25 clinically healthy patients. They were divided into four groups. The first group was the control one; the second group included 12 individuals with sub-compensated and 11 with decompensated forms having just experienced tooth extraction; the third group included 12 individuals with sub-compensated and 11 with decompensated forms whose oral cavity was irrigated with lysomuroid; the fourth group included 11 individuals with decompensated forms who were administered the combination of lysomuroid and tymalin before and during sanitation.

Results. The examination results of patients from the 2nd group with sub-compensated form of the disease before sanitation revealed 1,2 times lower lysozyme activity of the oral fluid compared to the control group, and with decompensated form it was twice as low. Correlating results were found before sanitation in the third and fourth groups.

The level of SIgA in the oral cavity of patients from the 2nd group with sub-compensated form was 1,5 times lower, and in those with decompensated form was 2,7 times lower compared with that of the control. Comparison of the indices in the second and third groups with sub-compensated and decompensated forms found this index to be 1,8 times lower in patients with decompensated form.

The indices of bactericidal lysozyme activity and SIgA level did not change after surgical sanitation performed using classical method.

The activity of lysozyme in the oral fluid of patients from the third clinical group was found to increase on the third day after preliminary oral irrigation by means of lysomuroid. SIgA level did not change compared to the index before treatment.

When the surgical sanitation of patients from the third group was completed, lysozyme activity was found to increase consistently: by 1,2 times in patients with sub-compensated form, and by 1,4 times in patients with decompensated form. SIgA level increased by 1,2 and 1,3 times respectively.

In patients from the fourth group, bactericidal activity of lysozyme increased by 1,4 times, and SIgA level increased by 1,3 times following the combined administration of lysomuroid and tymalin for 3 days. When surgical sanitation was completed, lysozyme activity was 1,7 times higher and SIgA level was 1,6 times higher compared to the indices before treatment.

Conclusion. Therefore, the bactericidal activity of lysozyme and SIgA level in the oral fluid decrease in diabetes mellitus patients with dental surgical pathology. Introducing lysomuroid and tymalin into a complex of preventive measures is found to promote increase of these immune indices, and thus lowering the probability of inflammatory processes occurrence in the oral cavity.

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PREVALENCE AND INTENSITY OF DENTAL CARIES OF PREGNANT WOMEN IN DIFFERENT TRIMESTERS OF PREGNANCY

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A functional restructuring of all organs and systems occurs in a woman's body during pregnancy. Adaptive changes occur in the nervous, endocrine, cardiovascular and other systems of the body and also in the oral cavity. Although preventive methods and remedies are widely used in dental practice, the prevalence of dental diseases in pregnant women remains high. Studies of many authors show that pregnancy increases the risk of new dental diseases or exacerbation of existing diseases, especially lesions of hard dental tissues and periodontal tissues. According to WHO, the prevalence of dental caries among pregnant women is 2.9 times more frequent than among women that are not pregnant and the inflammatory process of periodontal tissues is 2.2 times more frequent in pregnant women.