



THE EFFECTIVENESS OF THE TREATMENT OF ABSCESSES AND PHLEGMON USING CHLORHEXIDINE.

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Annotation. The advantage of this drug is the local use of an antiseptic. Chlorhexidine exhibits bactericidal action (against gram-positive and gram-negative bacteria) - at a temperature of 22 ° C and exposure for 1 min; fungicidal action at a temperature of 22 ° C and exposure for 10 min; viricidal action (against lipophilic viruses).

Keywords: effectiveness of the treatment, abscesses, phlegmon, chlorhexidine, maxillofacial region,

The problem of purulent infections affecting the maxillofacial region is now extremely important. It has repeatedly been the subject of discussion at congresses, symposia, conferences and other forums both in this country and abroad. Numerous studies of native and foreign authors are devoted to its development. More than forty years ago (ie, during the period of mass use of antibiotics) even small doses of these drugs prevented the development of purulent complications, including sepsis and mediastinitis. The successes achieved in the treatment of purulent infections were so great that many doctors considered the problem of the prevention and treatment of surgical infection solved. This led to the fact that they began to neglect the established principles and methods of antibiotics. In surgical hospitals the gradual elimination of departments for the treatment of purulent infections has started. The widespread use of antibiotics led to changes in species composition and properties of the pyogenic microbial flora, and this, in turn, reduces the effectiveness of antibiotic therapy. In recent years, an increase in the frequency of purulent diseases of the maxillofacial area as well as the number of postoperative complications and the transition of acute purulent-inflammatory processes to chronic ones has been noted. The number of deaths due to purulent diseases and their complications has increased. All this attracted the attention of doctors to the problem of purulent infection ones again.¹⁻⁶ Despite the use of antibiotics, the number of purulent complications is steadily increasing and now it has reached the level of the 40-50 of the last century. The reasons for the increase in the number of patients with inflammatory diseases of the soft tissues of the maxillofacial area and neck are the following: Late appeal for medical care, which is associated with insufficiently conducting sanitary and educational work among the population. Medical errors made at the prehospital stage of treatment, and often self-medication of patients. Established stereotype in the appointment of drug therapy; late diagnosis of diseases and developed complications, and, consequently, incorrect treatment tactics.

It acts on bacterial spores only at elevated temperatures. It is stable, after processing the skin, it remains on it in a certain amount, sufficient for the manifestation of a bactericidal effect. Retains activity (although somewhat reduced) in the presence of blood, pus, various secretions and organic substances.

It does not have a damaging effect on objects made of glass, plastic and metals. Trichomonas colpitis, cervical erosion, itching of the vulva, prevention of sexually transmitted diseases (including gonorrhea, syphilis, trichomoniasis, chlamydia, ureaplasmosis); gingivitis, stomatitis, aphthitis, periodontitis, alveolitis, disinfection of removable prostheses; angina; postoperative care of patients in ENT and dentistry departments.

- Treatment of wounds, burn wounds and surfaces; disinfection of the patient's skin.
- Treatment of the surgeon's hands, medical staff and the operating field before diagnostic manipulations, surgery.
- After using this drug in patients with abscesses and phlegmon, the time of hospitalization of patients is shortened.
- Changes in the species composition of pathogens and reduced reactivity of the patient.

Purulent-inflammatory diseases of soft tissues are one of the most common types of pathology in the clinic of maxillofacial surgery. In recent years, the number of patients with these diseases has increased significantly, the severity of the process has worsened, which often leads to such severe and formidable complications, such as mediastinitis, sepsis, thrombophlebitis of the face and sinuses of the brain. From January 1969 to December 2018, the clinic of maxillofacial surgery of Shupyk National Medical Academy of Postgraduate Education marked an increase in the number of patients with inflammatory diseases of the face and neck from 53.5 to 75.9 percent. The prevalence of highly pathogenic and antibiotic-resistant microorganisms leads to the occurrence of severe forms of inflammatory diseases of the maxillofacial region, accompanied by severe intoxication, impaired immunological status of the body, resulting in reduced levels of humoral and cellular immunity factors, which contributes to the development of severe complications (sepsis, mediastinitis, etc.). In recent years, the number of deaths of patients with these complications has increased and amounted to 0.13-0.30 percent.^{4, 6} In the absolute majority of cases (90-96 percent), the etiological factor of inflammatory diseases of the maxillofacial region is an odontogenic infection. In only 4-10% of cases, microorganisms can be brought into the soft tissues of the face and neck from non-odontogenic foci (carbuncles, boils, inflamed palatine tonsils, infected wounds, etc.), lymphogenous, contact and dermatogenic pathways

The disadvantages of the traditionally used methods of therapy in the complex of therapeutic measures for inflammatory diseases in patients with diabetes mellitus are:

1. The need for a long stay of the patient in a hospital.
2. The traditional method of treatment does not provide for the use of drugs that have a pronounced antioxidant and antioxidant effect, which does not eliminate hypoxia of the tissues of the purulent wound.
3. The presence of a significant number of contraindications for the use of physiotherapeutic procedures (for example, electrophoresis of drugs, diadynamic therapy), acute phase of tissue inflammation, individual intolerance to electric current, hypertension, malignant tumors of the maxillofacial region, erosive-ulcerative processes of the oral mucosa, etc. P.
4. The possibility of developing an allergic reaction of an immediate and delayed type in response to the use of antibiotics, sulfonamides, antiseptics and other drugs in the medical complex.

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