

OCCURRENCE OF CLINICAL PALATE AND LIP DEFECT WITH FACIAL ANOMALIES IN KHORAZM REGION.

B.S.Yuldashev¹

A.Q.Kuruyazov²

O.Khodzhimuratov³

R.X.Karimov⁴

Urganch Branch of Tashkent Medical Academy

Department of "Pathomorphology" associate professor¹

Head of the "Stomatology" department of the Tashkent Medical Academy, associate professor²

Assistant of the "Stomatology" department of the Tashkent Medical Academy³

Associate Professor of the "Pathomorphology" Department of the Tashkent Medical Academy⁴

<https://doi.org/10.5281/zenodo.10183613>

Abstract: Among the congenital anomalies of the maxillofacial system, cleft lip and palate are the most common, this pathology occurs in 1:800 babies, and in industrially developed regions, their occurrence is slightly more frequent and is 1:500/1:450. The correction process of these congenital anomalies causes many difficulties because they are combined with other organs, especially nervous system anomalies. Anatomical changes in the facial system cause functional deficits in the voice and speech system. The severity of anatomical and functional disorders directly depends on the type of upper lip cleft.

Key words: congenital anomaly, cleft lip, cleft palate, anatomic disorder.

Relevance of the problem: Anomalies of the maxillofacial system are among the most common congenital pathologies, and in recent decades there is a tendency to increase. This condition is not only functional, physiological, but also the maxillofacial system affects the jaws, facial bones, soft tissues of the oral cavity, nose and face. An aesthetic defect spread to the tissues is also considered. Some of the anomalies of congenital development can be detected during pregnancy, while some can be detected only after birth.

Children suffering from this pathology are considered disabled from childhood and are under the constant supervision of surgeons, orthodontists, pediatricians, neuropathologists, speech therapists, and taking measures to treat pathologies in time is one of the important tasks of modern medicine.

Today, congenital cleft palate and cleft lip occupy the 4th place among congenital anomalies of the maxillofacial area. Annual birth rate of such patients corresponds to 1:750 babies. According to statistics, 36.8% of complete cleft palate and cleft lip, 27.3% of unilateral cleft palate and cleft lip, 23.3% of unilateral cleft palate and 10.9% of bilateral cleft palate and cleft lip. Right-sided congenital cleft palate is more common than left-sided. Congenital cleft palate and lip cleft together, its course in various severe variants, is observed in most boys.

In children born with congenital cleft palate, along with breathing through the nose, hearing disorders, disturbances in the vestibular analyzer, snoring, pneumatization in the branch of the mastoid tumor, along with this, in many cases, changes in the left cerebral hemispheres are observed, and they lag behind in physical and mental development. As a result of hypoxia and hypoxemia, the anatomical structure of the upper respiratory tract is disturbed, breathing through the nose and mouth is formed in the child, the upper respiratory

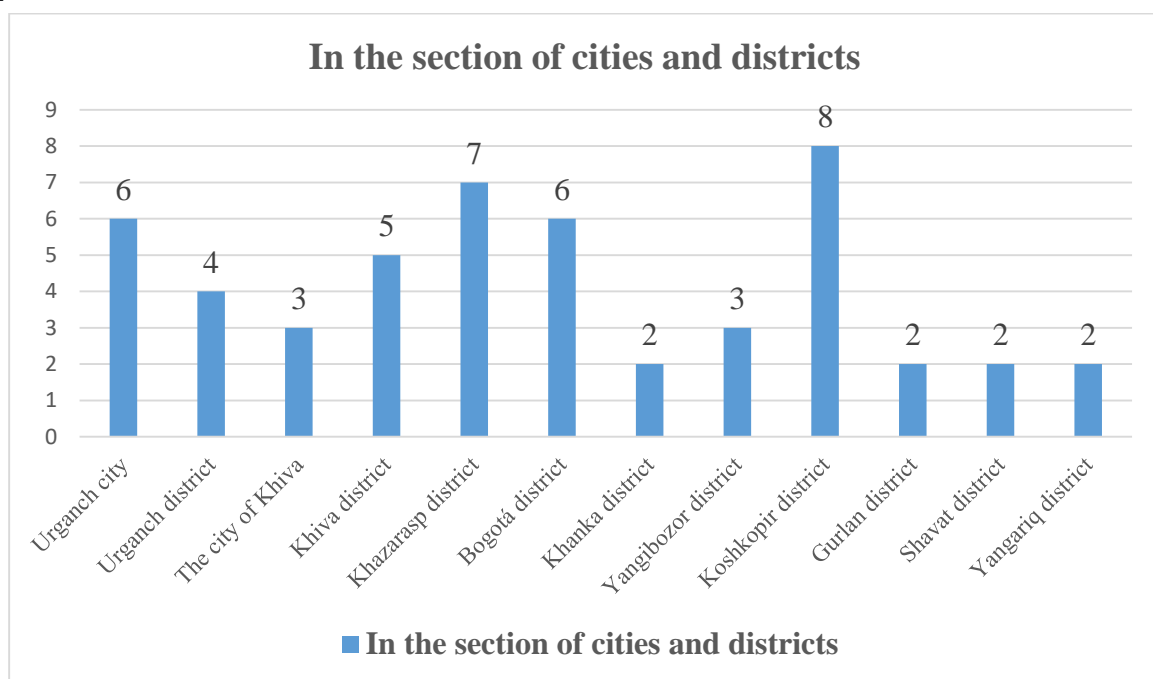
tract is prone to inflammation, as a result of lack of oxygen in the body, the blood circulation in the respiratory system and the cardiovascular system is disturbed.

The purpose of the investigation: to study the frequency of congenital anomalies of the face-jaw system, the causes of their occurrence, anthropometric changes and to improve the work on their timely elimination.

Examination materials and methods: address, sex, age, x-ray, computed tomography, endoscopic and microbiological examinations of 50 patients who applied to the "SEVINCH" clinic in the city of Urganch, Khorezm region in outpatient form, and the results were statistically analyzed.

Inspection results: in the course of inspections, the residential addresses of 50 children who applied to the "SEVINCH" clinic located in the city of Urganch on an outpatient basis were studied by city and district (Table 1).

Table 1 of children's residence in cities and districts who applied on an outpatient basis.

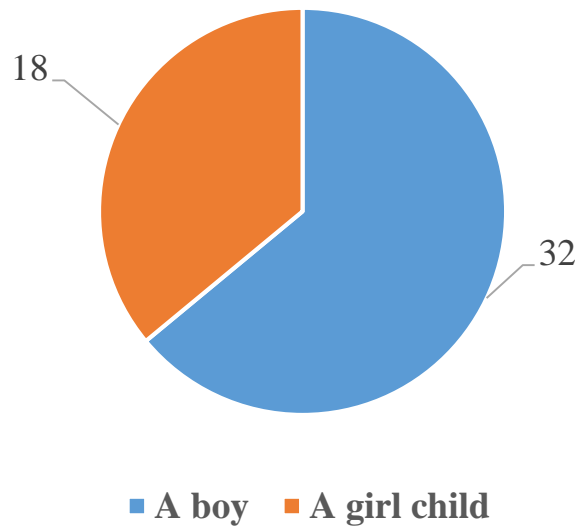


During the studies, when the gender of the children was studied, it was found that the number of boys was greater than that of girls (Table 2).

Meeting of boys by gender Table 2.



Results of the study by gender



As a result of the investigations, when the age and gender of the studied children were studied, there were 6 33.3% girls under 3-5 years old, 3 16.6% under 5-10 years old, 4 22.2% under 10-14 years old, 5 over 14 years old 27.7%, and boys. 5 people under 3-5 years old made up 12.5%, 14 people under 5-10 years old made up 43.7%, 7 people under 10-14 years old made up 21.8%, and 6 people over 14 years old made up 18.7% (Table 3).

Age indicators of sick children Table 3.

Grouping of patients by age	Number of patients					
	Girls		Sons		Total	
	Abs	%	Abs	%	Abs	%
3-5 years old	6	33.3%	5	12.5%	11	22.0%
5-10 years old	3	16.6%	14	43.7%	17	34.0%
10-14 years old	4	22.2%	7	21.8%	11	22.0%
Over 14 years old	5	27.7%	6	18.7%	11	22.0%
Total	18	100%	32	100%	50	100%

Also, when the patient was studied for the disease of children, the same result was achieved (Table 4).

Diseases of sick children Table 4.

Types of patients' diseases	Number of patients					
	Girls		Sons		Total	
	Abs	%	Abs	Abs	%	Abs
A small nose	10	55.5%	19	59.3%	29	58.0%
Palate	8	44.4%	13	40.6%	21	42.0%



Total	18	100%	32	100%	50	100%
-------	----	------	----	------	----	------

10 girls were born with cleft nose, 55.5%, 29 boys were 58.0%, 8 girls were born with cleft palate, 44.4%, and 21 boys were 42.0%.

In conclusion, it can be said that most of the sick children are from Koshkopir district when studied in the district and cities, according to gender, it is more common in girls than in boys, and according to the age and type of diseases, the incidence of nasal congestion in boys is 59.3%, mostly in boys under 5-10 years of age. It was 43.7%.

References:

1. Artikova D. O., Ruzmetova D. T. XORAZM VILOYATIDA HOMILADOR AYOLLARDA SIYDIK YO 'LLARI INFEKSIYASINI KECHISHI VA UNGA OLIB KELUVCHI OMILLAR //INTERNATIONAL JOURNAL OF SCIENCE AND EDUCATION. – 2022. – Т. 1. – №. 1. – С. 3-4.
2. Bekchanov A. J. et al. Causes of death in infants born to women affected by Covid-19 disease //American Journal of Pediatric Medicine and Health Sciences (2993-2149). – 2023. – Т. 1. – №. 5. – С. 34-38.
3. Khasanovich K. R., Tulibaevna R. D., Ziyaevich T. H. DISTRIBUTION OF PERINATAL DISEASE IN NEWBORN CHILDREN IN KHORZAM PROVINCE BY CITY AND DISTRICT AND CAUSES OF DEATH //World Bulletin of Public Health. – 2021. – Т. 5. – С. 82-85.
4. Каримов Р., Авезов М. Оценка перинатальных случаев смерти, уровня и состояния заболеваний уха, горла и носа //Журнал вестник врача. – 2021. – Т. 1. – №. 1. – С. 60-63.
5. Karimov R. X., Tursunov X. Z., Ruzmetova D. T. Modern approaches to perinatal disease in diabetes in pregnant women //ACADEMICIA: An International Multidisciplinary Research Journal. – 2021. – Т. 11. – №. 12. – С. 173-179.
6. Karimov R. X., Musaev U. M. ANALYSIS OF RESEARCH AND COMMISSION FORENSIC EXPERTISES CONDUCTED ON LIVING PERSONS.
7. Каримов Р. Х., Мусаев У. М., Рузметова Д. Т. ЯТРОГЕНИЯ НА ПРИМЕРАХ ИЗ ПРАКТИКИ (По данным лет обзор) //International conference on multidisciplinary science. – 2023. – Т. 1. – №. 1. – С. 10-12.
8. Каримов, Р. Х., Мусаев, У. М., Рузметова, Д. Т., & Султанов, Б. Б. (2023, October). ЯТРОГЕНИЯ В НЕОНАТОЛОГИИ (ПО ДАННЫМ ЛЕТ. ОБЗОР). In International conference on multidisciplinary science (Vol. 1, No. 3, pp. 76-78).
9. Каримов Р. Х. и др. ВРАЧЕБНЫЕ ОШИБКИ В ПРАКТИКЕ АКУШЕРОВ-ГИНЕКОЛОГОВ //Past and Future of Medicine: International Scientific and Practical Conference. – 2023. – Т. 2. – С. 114-117.
10. Kh K. R. et al. PATHOMORPHOLOGICAL CHARACTERISTICS OF RESPIRATORY AIRCRAFT CHANGES IN INFANTS BORN FROM MOTHERS WITH COVID-19 //JOURNAL OF HEALTHCARE AND LIFE-SCIENCE RESEARCH. – 2023. – Т. 2. – №. 8. – С. 21-28.
11. Матякубова С., Рузметова Д. Особенности клинического

течения при преждевременном излитии околоплодных вод и принципы ведения беременных //Журнал проблемы биологии и медицины. – 2019. – №. 1 (107). – С. 175-177.

12.Матякубова С., Рузметова Д. Фоновые факторы, влияющие на течение беременности и её исход при преждевременных разрывах плодных оболочек //Журнал проблемы биологии и медицины. – 2018. – №. 4 (104). – С. 203-205.

13.Ruzmetova D. T., Matyakubova S. A. CLINICAL PRACTICAL ASSESSMENT APPLICATION OF POLYMERASE CHAIN REACTION AS A TEST FOR ASSESSING MICROBIOSINOSIS IN PREGNANT WOMEN //Central Asian Journal of Pediatrics. – 2021. – Т. 2021. – №. 1. – С. 37-49.

14. Ruzmetova D. T., Matyakubova S. A. OCCURRENCE OF UTERINE MYOMA IN WOMEN OF REPRODUCTIVE AGE IN KHOREZM REGION //Open Access Repository. – 2023. – Т. 4. – №. 3. – С. 489-492.

15. SA M., DT R. RISK FACTORS OF DEVELOPMENT OF PRETERM PREMATURE RUPTURE OF FETAL MEMBRANES IN PREGNANT WOMEN //European Science Review. – 2018. – Т. 1.

16. Sabirjanovich Y. B. et al. ETHERIOLOGICAL FACTORS OF DEATH IN PNEUMONIAS FOUND IN NEWBORNS //EUROPEAN JOURNAL OF MODERN MEDICINE AND PRACTICE. – 2023. – Т. 3. – №. 8. – С. 1-4.

17. Сатликов Р.К, Юлдашев Б.С, Закиров Ш.Ю, Каримов Р.Х / ИЗУЧЕНИЯ МИКРОБИОЛОГИЧЕСКИХ ОСОБЕННОСТЕЙ МИКРООРГАНИЗМОВ ПРИ НЕОСЛОЖНЕННЫХ ИНФЕКЦИЯХ МОЧЕВЫХ ПУТЕЙ // Монография: - Т.: "O'ZKITOBSAVDONASHRIYOTI" NMIU, 2022 – 84 б.

18.Перинатал ўлимнинг сабаблари ва патологик анатомияси / Монография / Х.З. Турсунов, Б.С. Юлдашев, Р.Х. Каримов: - Т.: "O'ZKITOBSAVDONASHRIYOTI" NMIU, 2022 – 108 б.

19. Каримов Р.Х. / ХОРАЗМ ВИЛОЯТИДА ПЕРИНАТАЛ ЎЛИМНИНГСАБАБЛАРИ ВА ПАТОЛОГИК АНАТОМИЯСИ // Автореферат: - Т: "Muxarririyat va nashriyot" бўлими, 2021 – 46 б.

20. Каримов Р.Х. / ХОРАЗМ ВИЛОЯТИДА ПЕРИНАТАЛ ЎЛИМНИНГСАБАБЛАРИ ВА ПАТОЛОГИК АНАТОМИЯСИ // Диссертация: - Т: "Muxarririyat va nashriyot" бўлими, 2021 – 111 б.

21.Tulibayevna R. D. Characteristics of Urogenital Tract Microbiota During Pregnancy //Research Journal of Trauma and Disability Studies. – 2022. – Т. 1. – №. 10. – С. 249-254.

22.Турсунов Х. З. и др. Буйрак ва буйрак усти беши касаллиги, уни даволаш усуллари ҳамда асоратлари (адабиётлар шарҳи). – 2022

23.Юлдашев Б. С., Каримов Р. Х., Бекчанов А. Ж. COVID-19 ЎТКАЗГАН ЧАҚАЛОҚЛАРДА ПНЕВМОНИЯНИНГ МОРФОЛОГИК ХУСУСИЯТИ //International Scientific and Practical Conference of Students and Young Scientists" Sustainable Development: Problems, Analysis, Prospects"(Poland). – 2023. – С. 26-28.

24.Yuldashev B. S. et al. Causes of Pneumonia In Infants Born of Mothers Infected With Covid-19 //International Journal of Integrative and Modern Medicine. – 2023. – Т. 1. – №. 1. – С. 9-16.

25.Юлдашев Б.С., Исмаилов О., Каримов Р.Х., Исмаилов О. / Хомила ва

янги туғилган чақалоқлар мурдасининг суд тиббий экспертизаси (Текшируви) // Ўқув
қўлланма: Т.: "O'ZKITOBSAVDONASHRIYOTI" NMIU, 2023 – 96 б.

