



## FEATURES OF MODERN TREATMENT OF VARIOUS FORMS OF PERIODONTITIS

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**Abstract:** The article describes the features of treatment of generalized and aggressive forms of periodontitis depending on clinical manifestations. The choice of tactics for the treatment of periodontitis depends on the severity of clinical manifestations, so it is important to accurately diagnose the degree of damage, after which a treatment plan is made in accordance with an individualized approach, taking into account the indications and contraindications for individual treatment methods.

**Key words:** periodontitis, forms, clinical manifestations, treatment.

**Аннотация.** В статье рассмотрены особенности лечения генерализованной и агрессивной форм пародонтита в зависимости от клинических проявлений. Выбор тактики лечения пародонтита зависит от выраженности клинических проявлений, поэтому важна точная диагностика степени поражения, после чего составляется план лечения в соответствии с индивидуализированным подходом с учетом показаний и противопоказаний к отдельным методам лечения.

**Ключевые слова:** пародонтит, формы, клинические проявления, лечение.

**Izoh.** Maqolada klinik ko'rinishlarga qarab periodontitning umumiy va agressiv shakllarini davolash xususiyatlari tasvirlangan. Periodontitni davolash taktikasini tanlash klinik ko'rinishlarning og'irligiga bog'liq, shuning uchun zarar darajasini aniq tashxislash muhim, shundan so'ng ko'rsatmalar va kontrendikatsiyalarni hisobga olgan holda individual yondashuvga muvofiq davolash rejasi tuziladi. individual davolash usullari uchun.

**Kalit so'zlar:** periodontit, shakllari, klinik ko'rinishlari, davolash.

**Relevance.** Among the urgent problems of dentistry, one of the leading places is occupied by periodontal diseases. According to WHO, pronounced destructive changes in the periodontium with the involvement of bone tissue in the process are most often detected in people from 35 to 44 years old - from 65% to 98%, and at the age of 13 to 19 years - from 55% to 95% [1].

As is known, the problem of periodontal pathology has general medical and social significance. According to WHO, 80% of the adult population of the globe is susceptible to periodontal diseases, leading to tooth loss, the appearance of foci of chronic infection in the oral cavity, decreased reactivity of the body, microbial sensitization, the development of allergic conditions and other disorders. To identify the first signs of periodontal diseases and carry out a set of therapeutic and preventive measures, an annual preventive examination of healthy children is necessary. Signs of periodontal pathology can be the first symptoms of serious diseases of the body (endocrine, hematological, etc.), which increases the responsibility of the pediatric dentist for their timely detection and treatment [2,4,6,7].

Inflammatory diseases of the periodontium - gingivitis and periodontitis are a single process that developed gradually in the early years (from childhood to 25-30 years) and does

not yet lead to a violation of the tooth-gingival junction, which is assessed as gingivitis of varying severity. With the appearance of a periodontal pocket, the stage of the process is assessed as periodontitis, in which deeper (in anatomical and functional terms) changes occur [1,3,4].

**Objective.** Features of management and treatment of generalized and aggressive forms of periodontitis depending on the clinical situation.

**Material and methods.** A review of medical literature and scientific articles was conducted. Results. The body of any person over time undergoes minor changes associated with the violation of some functions. And even if a person had naturally strong and white teeth, then in old age, few people manage to preserve them. Therefore, the issue of maintaining the dental health of a significant part of the country's population becomes relevant. An important component of it is the improvement of the indicators of the orthopedic dental status of people: maintaining the integrity of existing dental arches or compensating for existing defects with high-quality dentures. Periodontitis is an inflammatory disease that affects almost all tissues surrounding the tooth surface, including those connecting it to the jaw bones.

Generalized periodontitis. Characterized by bleeding, swelling and looseness of the gums, itching, pulsation and burning in the gum area, pain when chewing food, bad breath, the presence of dental plaque, and the formation of periodontal pockets. In addition to the listed symptoms, loosening and displacement of teeth, increased sensitivity of teeth to temperature irritants, and difficulty chewing food are also characteristic.

In severe cases, generalized periodontitis may be accompanied by general intoxication, enlarged regional lymph nodes, and acute pain in the gum area. In this case, there is an abundant accumulation of soft plaque and tartar, multiple periodontal pockets, often with purulent contents. In advanced stages, generalized periodontitis can lead to the formation of periodontal abscesses, fistulas, and tooth loss. In chronic generalized periodontitis in the remission stage, there are no dental deposits or purulent discharge. The gums are pale pink, the roots of the teeth may be exposed, and there is no bone resorption.

Depending on the severity of the disease, there are three degrees of generalized periodontitis:

- Mild degree - the depth of periodontal pockets is 3.5 mm; bone resorption does not exceed 1/3 of the length of the tooth root;
- Moderate degree - the depth of periodontal pockets is up to 5 mm; bone resorption is 1/2 the length of the tooth root;
- Severe degree - the depth of periodontal pockets is more than 5 mm; bone resorption exceeds half the length of the tooth root.

Treatment of generalized periodontitis should be comprehensive. Includes local conservative and surgical treatment; general anti-inflammatory and immunomodulatory therapy. According to indications, complex therapy includes physiotherapy (drug electrophoresis, darsonvalization, ultrasound phonophoresis, laser therapy, magnetophoresis), hirudotherapy, ozone therapy, apitherapy, phytotherapy.

In mild cases of the disease, plaque is removed, periodontal pockets are treated with antiseptics, and periodontal applications are applied [1,4].

In the treatment of moderate periodontitis, curettage of periodontal pockets, application of therapeutic dressings, and grinding of tooth surfaces are added to the above procedures. If

necessary, tooth roots or individual teeth are removed, therapeutic splinting and orthopedic treatment, as well as general therapy, are performed.

Treatment of severe generalized periodontitis may require additional surgical intervention: removal of teeth of grade III-IV mobility, gingivotomy or gingivectomy, flap surgery, opening of periodontal abscesses. According to indications, plastic surgery of the vestibule of the oral cavity, osteogingivoplasty, plastic surgery of the frenulum of the tongue and lips are performed. In severe cases of the disease, anti-inflammatory immunomodulatory therapy and vitamin therapy are mandatory.

Localized periodontitis. The localization zone of focal periodontitis is a small group of teeth or tissues around them. This form of the disease has an acute form of the course, which, if left untreated, becomes chronic.

The disease occurs suddenly with the following pronounced symptoms in a certain area of the gum: pain when chewing, bleeding, redness, swelling.

Treatment of focal periodontitis should be comprehensive. The first stage eliminates the causes that contributed to the occurrence of the disease, and the second stage is aimed directly at treating the lesion itself. General treatment for focal periodontitis is not required, since the process is local.

Elimination of the causes of the disease includes the removal of traumatic crowns and overhanging fillings, removal of dental plaque and antibacterial therapy. In case of deep bite, deep incisor overlap, progenia, selective grinding of tooth tissues is performed. Antibiotic therapy is prescribed to eliminate the source of infection, the choice is made in favor of broad-spectrum antibiotics, these can be tetracycline or metronidazole.

Surgical methods are used when an abscess and deep periodontal pockets are detected: the abscesses are opened, the damaged surfaces are cleaned, and the periodontal pockets are subsequently treated.

Then the patient is referred to orthopedic dentists, where the design of the therapeutic orthopedic devices is selected.

Juvenile periodontitis is characterized by the rapid destruction of periodontal tissues with the subsequent formation of periodontal pockets, displacement and pathological mobility of the teeth. The process can begin almost asymptotically, without the presence of a large amount of plaque and pain. At the onset of the disease, symmetrical damage to the periodontium occurs in the area of the incisors and first molars. The displacement of the first incisors and molars occurs in the labial, buccal and distal directions. Diastemas appear. Juvenile periodontitis, in the absence of proper treatment, can take a generalized form, when the entire dental row is involved in the pathological process.

Treatment of desmodontosis started in time opens up the possibility of preserving teeth in patients. Treatment of juvenile periodontitis is currently carried out using antibiotics in combination with local treatment: curettage, gingivotomy with preliminary depulping of teeth and the introduction of drugs that enhance reparative regeneration of bone tissue. In already developed stages, it may be necessary to remove damaged teeth and carry out orthopedic treatment.

Refractory periodontitis. Refractory periodontitis is a type of periodontitis that continues to develop despite constant therapeutic measures.

The disease occurs with a large number of complications and is accompanied by bone loss in several areas at the same time.

After massive loss of supporting tissues, tooth loss occurs. Antibacterial therapy is used in treatment. The prognosis is unfavorable. The lack of remission and cure is caused by poor oral hygiene, irregular follow-up visits and, accordingly, the lack of maintenance treatment.

Rapidly progressing periodontitis. The pathological process is localized simultaneously in the area of several teeth. Sometimes rapidly progressing periodontitis can be accompanied by such systemic diseases as diabetes mellitus [3,5,7] or Down syndrome.

With this form of the disease, instantaneous destruction of bone tissue occurs, while active periods alternate with periods of remission. During the active period, pronounced signs of periodontal inflammation are observed, the release of purulent exudate from the periodontal pockets, which entails extensive damage to bone tissue. During periods of remission, the gums are slightly inflamed, the destruction of bone tissue does not progress.

Rapidly progressing periodontitis can be stopped as a result of the therapy, but it is known that the disease often recurs.

Treatment is carried out in several stages:

1. Conservative treatment includes the removal of dental plaque, the appointment of physiotherapy procedures, antiseptic treatment and anti-inflammatory applications.

2. Antibiotic therapy to suppress the pathogenic microorganisms that caused the inflammation.

Treatment is carried out in several stages:

3. Surgical treatment includes the elimination of periodontal pockets with the treatment of tooth roots and bone defects of the alveolar process, which are filled with a synthetic transplant, and subsequently the periodontal tissues are sutured. In case of severe destruction of bone tissue and the alveolar process after flap operations of pathologically altered tissues and filling of bone pockets with a preparation for filling bone cavities - "Kollapan", 10-12 days after surgical treatment, stabilization of the process and a significant decrease in pathological mobility of teeth in the area of the surgical intervention should be observed. This will allow maximally preserving and strengthening mobile teeth, and subsequently at the stages of orthopedic treatment to use as a support for various types of dentures.

**Conclusions.** Regardless of the stage of periodontitis, treatment should be comprehensive: general and local. Treatment of mild cases begins with non-surgical methods, that is, professional oral hygiene is performed, removing dental plaque, supplementing the treatment with physiotherapy and massage to improve blood circulation in the damaged areas, then anti-inflammatory procedures are prescribed. In moderate and severe forms of periodontitis, ineffectiveness of therapeutic methods, surgical treatment is performed.

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