

DISEASES OF THE ORAL CAVITY AND TEETH, PREVENTION OF DISEASES OF THE ORAL MUCOSA

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Abstract:

Periodontal diseases are among the most common dental diseases and occur in 80% of children and almost the entire adult population. Periodontal is a complex of tissues: tooth, periodontal, alveolar part of the jaw, gum. Pathological processes may have an inflammatory dystrophic (or a combination of them) character.

Keywords: oral cavity, teeth, diseases of the oral mucosa, modern medical treatment, medical help.

Introduction

In the occurrence of periodontal diseases, trauma, plaque, supra-gingival and subgingival deposits of tartar, overhanging fillings, defects in prosthetics, and the hygienic condition of the oral cavity are important. Among the common factors are a lack of vitamin A, group B, C, E, disorders of phosphorus–calcium metabolism, protein, mineral, carbohydrate, changes in the digestive, nervous, vascular systems, allergic reactions, decreased immunity.

Periodontitis is a disease of the tissues surrounding the root of the tooth. As a rule, it is preceded by pulpitis with its inherent pain. Refusal to treat it determines the penetration of bacteria through the root canal of the tooth beyond its limits, causing acute inflammation in new conditions, called acute periodontitis. Symptoms and course. A characteristic feature is the appearance of independent pain, at first weak, then increasing, becoming pulsating. Its difference from the pain of pulpitis is that it is strictly localized, becomes sharp with mechanical stress on the diseased tooth, especially in the form of tapping. The closure of teeth is so painful that many refuse to take even liquid food. A moderate increase in body temperature (up to 37.5 ° C) is possible. With these symptoms, the need for dental care in the very near future is extremely high. The use of home remedies, including painkillers, warm rinsing and dressing, can only provide occasional relief. Delaying the time to consult a specialist is fraught with serious complications due to the development of a purulent process, first limited, and then spilled. The resolution of this rapidly occurring acute process is possible with lighter consequences. When finding the way out of the pus from the focus of inflammation into the oral cavity (through the molten mucous membrane covering the alveolar process) or through the skin to the outside with the formation of a fistula,

acute periodontitis passes into the chronic stage. In this case, the threat of dangerous complications decreases, but does not disappear at all.

Paradontitis is important to reduce the body's resistance, metabolic disorders, the presence of neuromuscular diseases, insufficient oral hygiene, lack of proteins, vitamins, environmental and occupational hazards, the nature of nutrition - soft food does not contribute to self-cleaning of teeth. Symptoms: may be mild, moderate and severe. More often there is chronic periodontitis as a consequence of gingivitis. There is bleeding gums, bad breath, rapid formation of tartar. With the progression of the process, pain, abscess formation, loosening of the teeth occur. Treatment: in case of exacerbation, the help of a dentist is necessary. In the chronic course of treatment — dentists, therapists, surgeons, orthopedists; oral hygiene.

Gingivitis is a type of stomatitis when the mucous membrane covering the alveolar process of the jaw is affected. In addition to the common causes that cause the disease of the shell of a different localization, the most common is the dirty content of the oral cavity, the presence of dental deposits. Symptoms: during the examination, redness, swelling of the gums is noticeable, while eating and brushing teeth, its slight bleeding is possible. If oral hygiene is not observed, the gums become covered with plaque, ulcers occur, areas of tissue necrosis, bad breath. The disease can spread to other parts of the oral mucosa. Treatment: systematic dental care, rinsing, tartar removal, periodontitis treatment, a gentle diet. Gingivitis is an inflammatory process in the gum. Acute forms develop against the background of common diseases: gastrointestinal tract, endocrine pathology, allergies, infections, environmental factors and the nature of nutrition are important. Chronic gingivitis is observed in patients with cardiovascular pathology, digestive systems, blood diseases, impaired immunity, hormonal disorders, exposure to adverse industrial and environmental factors: prolonged use of mercury and bismuth preparations, lead poisoning, etc. metals.

Dental caries and its complications is a tooth disease characterized by progressive destruction of its hard tissues over time. The causative agent: *Streptococcus mutans*, which usually accumulates on the surface of the tooth in the form of a small plaque, imperceptibly leading to a defect in the surface of the tooth, and then below the underlying tissues. Caries resistance is determined by the structure of the enamel, depending both on the conditions of tooth formation and on the general condition of the body and lifestyle. Treatment of chronic forms is periodic excision of the affected tooth tissues (enamel, dentin), with the formation of a cavity and restoration of the shape and functions of the tooth by filling; acute requires additional pathogenetic therapy and dispensary supervision. Tooth decay is an infectious process associated with exposure to microflora (*streptococci*), a violation of the diet, the composition of trace elements in food, especially fluoride. According to the depth of the defect, initial, medium, and deep caries are distinguished. Downstream: acute, acute, chronic. Symptoms: tooth pain of varying intensity. Diagnosis: upon examination, there is a spot, a defect and a cavity in

the hard tissues of the tooth. Cavity probing, X-ray examination, and electrodontometry are performed. Treatment: anesthesia, further treatment at the dentist.

Acute toothache. Occurs with complications of caries – pulpitis and periodontitis. Pulpitis is an inflammation of the tooth pulp. It usually occurs with the progression of dental caries, but the pathogens of infection can be introduced into the pulp of the tooth through the blood in inflammatory diseases of other organs. Symptoms: sharp spontaneous pains that occur without affecting the pulp of a paroxysmal nature, the pain radiates along the branches of the trigeminal nerve, increases at night, in a horizontal position. In chronic pulpitis, pain arises from irritants and is of a prolonged nature. The bottom of the extensive carious cavity is sharply painful when probed. Tooth percussion (tapping on the tooth) is painless. When the process spreads, pain occurs in neighboring teeth, gives to the jaw, temple, ear. The cold soothes the pain, the heat increases. Treatment: inside – analgesic, topically – at the dentist.

Periodontitis is an acute or chronic inflammation in the periodontium. It occurs in one or more teeth and in the small tissues surrounding the tooth. Symptoms: in the acute process – sharp pains, increasing, tearing, localized in the area of the causal tooth. The tooth is mobile, raised, tapping on the tooth and touching increase the pain. With purulent, the process spreads to soft tissues. The pain is sharp, throbbing, tapping is sharply painful, body temperature rises. In chronic forms, complaints are less pronounced. Treatment: clear indications for the removal and preservation of teeth have been developed. Pre-medical and general medical care is reduced in the acute period to the appointment of painkillers, anti-inflammatory drugs, cold on the affected tooth area. The oral mucosa is an important barrier of the body, has a close connection with its internal organs and systems. It participates in the function of digestion, respiration, the act of speech, hematopoiesis, regulates the balance of the oral environment. Diseases of the oral mucosa can occur due to:

1. Infections, including fungal ones.
2. As a result of allergic reactions.
3. As a result of diseases of other organs and body systems (blood, skin, gastrointestinal tract and liver).
4. In acute infectious diseases (measles, scarlet fever, typhoid fever, influenza, adenovirus infection).
5. In systemic diseases (lupus erythematosus, eosinophilic collagenosis, etc.).
6. In cardiovascular diseases, endocrine pathology, neuropsychiatric diseases.
7. With anemia: hypochromic – symptoms of damage to the oral cavity are manifested by burning, pain in the tongue and other areas of the oral mucosa, congestion in the corners of the mouth.

Treatment: performed by a hematologist, the dentist sanitizes the oral cavity. The tongue should be treated with various oils. With pernicious anemia (lack of vitamin B12 in the body) – dry mouth, burning tongue. The mucous membrane is pale yellow, with

spot hemorrhages, bleeding gums, swelling of the tongue with a smooth, bright red surface. Treatment: at the dentist and gastroenterologist.

Aphthous stomatitis is an autoimmune disease of the internal organs of allergic origin, characterized by vegetoneurosis, endocrine disorders, stress conditions, hypo-beriberi. Symptoms: aphthae (ulcers) on the mucous membrane of the mouth and genitals, eye disease (iritis, uveitis). Treatment: in a hospital with the participation of a dermatologist, therapist, neurologist. Oral sanitation is mandatory during remission.

Xerostomia – dryness of the oral mucosa as a result of a decrease in the secretion of saliva and mucus with damage to the salivary and mucous glands, which is observed in diabetes mellitus, allergic conditions, and other pathologies. Symptoms: the mucous membrane is dry, atrophic, inflamed, constant burning in the mouth. Treatment: treatment of the underlying disease, sanitation and oral hygiene.

Occurs on the skin and mucous membranes. The development of the disease is associated with diseases of the gastrointestinal tract, cardiovascular and endocrine systems. Symptoms: papules appear on the mucous membrane of the mouth, first red, then whitish-pearlescent, which, merging, form a grid, plaques. Treatment: elimination of concomitant diseases, sanitation of the oral cavity, symptomatic treatment at the dentist.

Stomatitis is an inflammation of the mucous membrane of the mouth. Causes of the disease: common factors, dysbiosis, diseases of the gastrointestinal tract. Stomatitis can be herpetic (caused by the herpes virus) with the formation of erosions, ulcers; drug-induced, developing with allergic reactions to drugs; mercury; with blood diseases; in weakened patients; with severe diseases. By the nature of the course, stomatitis can be: catarrhal, fibrinous (purulent), with the formation of erosions and ulcers. Treatment: all types of stomatitis are carried out locally – at the dentist, general – at the therapist. Mandatory examination for any form of stomatitis for syphilis, tuberculosis.

Cheilitis is a disease of the red border of the lips of an inflammatory, trophic nature as a result of exposure to neurogenic, hormonal, viral factors. Causes: prolonged exposure to the sun, vitamin B2 deficiency, fungal damage, reaction to penicillin, with impaired thyroid function, allergic nature. Symptoms: lips are swollen, hyperemic, painful, there are jams in the corners of the mouth. Treatment: symptomatic – elimination of irritating factors, oral hygiene. Consultation of specialists. Damage to the oral mucosa can occur in such a serious disease as pemphigus with the formation of bleeding erosions; are you afraid of dentists with dental caries? Do not despair. As a consolation, we will tell you that our ancestors had a much worse time when they had toothache. An employee of the Institute of the History and Ethics of Medicine in Cologne conducted a study on how people were engaged in the prevention and treatment of caries in the 19th century. It turns out that in the "good old days", sick teeth were smoked with smoke or simply pulled out, and dog urine was used as an anesthetic. Which person today did not have to suffer from the regular appearance of bubbles or sores on the lips? They cause a lot of trouble, they hurt when eating, they can't be painted over with lipstick and cream. At

best, it will all go away within 7-10 days, and at worst they will appear on the gums, palate, tongue and even in intimate places. It all starts with the oral cavity and in short it can be called stomatitis. Stomatitis — this term does not to a small extent define the full breadth of pathological processes of the oral mucosa, which the patient and the dentist have to meet in practical work. Viral diseases are most often diagnosed. One of the leading places among them is herpetic stomatitis, which is caused by the herpes simplex virus and affects the skin, mucous membranes of the oral cavity, eyes, genitals, etc. Clinically, herpetic infection manifests itself in two forms in the oral cavity:

- 1) chronic recurrent herpes;
- 2) acute herpetic gingivostomatitis. Chronic recurrent herpes manifests itself in the form of single or groups of closely spaced rashes — small bubbles on the red border of the lips, the mucous membrane of the palate, eyes, genitals, the skin of the lips, the wings of the nose. Usually, the appearance of these lesions is accompanied, as a rule, by a burning sensation. Further, the elements merge and form erosive surfaces and painful sensations from irritants occur when eating. A feature of herpes infection is the lifelong carriage of the virus after the disease. Acute herpetic stomatitis is a disease of viral etiology that occurs in both adults and children. Recently, acute herpetic stomatitis has been considered as a manifestation of primary herpes simplex virus infection in the oral cavity. The first elements of the lesion in acute herpetic stomatitis resemble aphthae, which occur against the background of edematous, hyperemic, inflamed oral mucosa. The disease is contagious for people who have not previously been infected with the herpes simplex virus.

Mostly stomatitis, which is 70%, affects children aged 1 to 3 years and adults at a young age. The disease begins with complaints of general malaise, an increase in body temperature to 37-37.5 ° C, an increase in regional lymph nodes, hypersalivation is observed. The mucous membrane of the mouth, especially the gingival margin, is swollen and hyperemic. At the same time, bubbles filled with serous fluid appear on it, which then quickly open and merge in erosion with a scalloped edge along the periphery, covered with fibrinous plaque. The whole process of aft formation lasts 4-5 days. At the same time, the patient complains of pain when eating, burning, itching. If oral care is insufficient, then catarrhal changes (swelling, hyperemia) can turn into ulcerative ones. With proper care and treatment, a recovery period begins by day 8-10. If the disease progresses, the number of erosive elements does not decrease, but increases, the general condition of the patient worsens, weakness, headache, adynamia are observed, body temperature rises to 39-40 ° C, then this may be due to low reactivity of the body, decreased immunity.

All medications should be taken as prescribed by a dentist, with the observation of the picture of the general blood test before treatment, during and after it. Self-medication should be excluded. The eruption of the wisdom tooth is difficult. A violation of normal eruption is most often observed with eight teeth of the lower jaw – the teeth of "wisdom". As a rule, it occurs due to a lack of space in the lower jaw, since all the others

have already appeared before the wisdom tooth, without "leaving" enough space for it. The delay in eruption creates conditions for the development of an inflammatory process that develops from a local focus into a spilled one, fraught with serious consequences. The disease is associated with a permanent injury to the edge of the gum above the bumps of the wisdom tooth, where an ulcer forms, which, with an abundance of bacteria in the oral cavity, causes inflammation.

Bleeding gums is the result of a disease of the mucous membrane of the gum and may be a consequence of not only a local, but also a general ailment of the body. Bleeding usually occurs when brushing your teeth. Sometimes eating can cause blood to appear in the mouth. It flows from the edge of the gum when its mucous membrane is inflamed (see gingivitis). Special attention is required in cases where oral care is sufficient, but vascular changes in the gums persist or reappear, and bleeding continues. The reason for this may be various general diseases: blood, endocrine, acute respiratory infections, influenza, beriberi, etc. Swelling and an increase in the volume of the interdental papillae of the gums often accompany pregnancy. In cases where the disease worsens, bleeding occurs even with a small injury, or even without it at all, on its own. Treatment and medical supervision are necessary. Oral hygiene should be maintained at home.

Occurs primarily due to unsystematic oral hygiene. Food particles remaining after ingestion in the interdental spaces, as well as in carious teeth, the deflated epithelium of the mucous membrane are exposed to bacteria that are abundant in the oral cavity. There is a breakdown of proteins of food and epithelium and their subsequent rotting, which causes the appearance of odor. In addition, it can be caused by an inflammatory process in the tissues surrounding the tooth, damage to the mucous membrane of the oral cavity, tongue, and, in rare cases, stomach disease (gastritis). Prevention and elimination of odor is mainly reduced to regular oral care. In the morning and evening, it is necessary to brush your teeth: the movement of the toothbrush should be both horizontal and vertical to thoroughly remove food residues from the interdental spaces. This is facilitated by the use of toothpicks and mouthwash with water after eating. Effective use of solutions of odorous substances: mint, special deodorants. In case of diseases of the mucous membrane of the oral cavity, tissues around the tooth, as well as the stomach, special treatment is indicated.

Toothache is an unpleasant and often unbearable sensation caused by irritation of sensitive nerves. The role of stimuli can be a blow, burn, injection, inflammation, injury, etc. It is usually a manifestation of a tooth disease. In case of violation of the integrity of the hard tissues of the tooth (enamel, dentin), pain occurs only when taking cold or hot water, sour or sweet food. With the removal of these irritants (rinsing the mouth with warm water), the pain stops. In cases where it occurs on its own, often intensifies at night and spreads to the areas surrounding the tooth, acquiring a diffuse character, it should be assumed that we are talking about the occurrence of acute inflammation of the dental pulp — the pulp of the tooth. In this case, the pain can be prolonged and often painful.

However, the pathogenic lesion continues, spreading to the entire dental pulp, including the pulp in the root canals of the tooth, and then to the surrounding tissue. The transition of purulent inflammation beyond the tooth is called acute periodontitis. At the same time, the pain sensation is characterized by an independent occurrence, precise localization in the tooth area, touching it, especially tapping, cause a sharp increase in pain. Painkillers can reduce it and even remove it. But it is impossible to count on a cure without the participation of a dentist, it is necessary, and in the coming days to prevent possible severe complications — abscess, phlegmon, osteomyelitis. Thus, being the most frequent signal indicating a tooth disease, toothache at the same time can also be the result of injury, when the breakage of a part of the crown exposes the dental pulp (pulp), rich in nerve endings. The slightest touch to it causes the sharpest pain.

Only a dentist can help with this. It should be borne in mind that a jaw tumor, inflammation of the maxillary sinus, nerves, and a disease of the central nervous system can create the impression of toothache. Therefore, pain in the maxillary region should be evaluated by a doctor to identify its cause, and not be considered only as dental. Dietary supplements in the prevention of diseases of the teeth and oral cavity The main properties of teeth — mechanical strength and chemical resistance to food substances — are due to the normal ratio of organic and mineral components. The imbalance of these substances, on the one hand — proteins, and on the other — the inorganic compound hydroxyapatite creates prerequisites for tooth decay.

Naturally, calcium plays an important role in the laying of teeth — at the beginning of milk, and then permanent in children and should enter the body in sufficient quantities during these periods. It is important that the diet has a balanced ratio of calcium and its synergist magnesium, as well as vitamins, especially C and D. In particular, vitamin C is absolutely necessary for the formation of connective tissue, participating in the synthesis of collagen protein. On average, an adult should consume about 1 g of calcium per day. Throughout life, the need for calcium can vary: children and adolescents need more calcium than adults, and it also increases in old age. But, undoubtedly, everyone needs calcium at all times. Unfortunately, many of them have an unpleasant taste. To soften it, you can add peppermint, green mint or licorice, which will also increase the effectiveness of bitterness and promote their deeper penetration into the gums. Regular massage of the gums helps to maintain their tone and helps to keep healthy teeth until old age. For massage, it is useful to use oils, such as sesame or coconut. If bleeding gums do not fit into the framework of a local disorder, then the cause should usually be sought in a high level of Pitta, and the provoking factor may be increased acidity, fever in the liver or stomach. In this case, the goal of treatment is to eliminate the relevant disorders.

The results of the study suggest that going to the dentist these days would have seemed like an easy walk to our ancestors compared to what they had to endure. Up to the XVIII century, says the author of the study, Ms. Sylvia Timpe, people went to the dentist only in case of pain and if they had money (there was no medical insurance then). People

were sure that caries does not appear from improper nutrition and insufficient care, but from certain "toothworms" and "bad juices". The belief in "toothworms" was especially widespread in the Middle Ages. Given such ideas, it is not surprising that sick teeth were pulled out or smoked with smoke, and, of course, no modern means of anesthesia were used. Sugar did not play a significant role in the diet of people who lived in the XVIII century. When, starting from the 19th century, dishes became more "refined", sugar became more widely used, and white bread replaced coarse black bread, the incidence of caries also increased. After it was found that the acids leading to the destruction of tooth enamel are formed as a result of fermentation of starch and sugar-containing food, proper nutrition was also taken into account as a factor that leads to caries. In fact, at the end of the Second World War, when the amount of sugar in food decreased due to hunger, there was a decrease in cases of caries. But targeted dental hygiene was still a long way off. Even in Modern Times, the use of urine for oral and dental hygiene was widespread in folk medicine. So, people used toothbrushes that are widespread today only once a week, or even once a month.

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