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**STUDY OF THE ORAL CAVITY CLINIC IN E-CIGARETTE SMOKERS AND THEIR
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ABOUT ARTICLE

Key words: Well known, smoking remains, tobacco smoking and various human diseases.**Received:** 13.02.2024**Accepted:** 18.02.2024**Published:** 23.02.2024**Abstract:** Today, global research on the impact of smoking on human health and the problem of creating methods necessary for the prevention, diagnosis and treatment of diseases caused by this harmful habit are among the main directions for improving public health in Russia and in the world as a whole. Despite the fact that for many years the main harmful effects of tobacco smoke components on human health have been well known, smoking remains one of the most important public health problems in many countries of the world [1]. In many previous studies, scientists have presented a strict relationship between tobacco smoking and various human diseases. Smoking is often the cause of cardiovascular diseases, malignant neoplasms, diseases of the respiratory tract, gastrointestinal tract and genitourinary system. Not only smokers, but also non-smokers are under the influence of tobacco smoke substances [1]. Inhalation of air contaminated with tobacco smoke, or "secondhand smoke", undoubtedly causes diseases in non-smokers that are characteristic of those who smoke standard medium-strength cigarettes. [This is why quitting smoking is an important medical and social issue.

INTRODUCTION

We are now living in an era of modernization, when new products are being created for human use. The items on which a person's life depends are in great demand. Computers, mobile phones, smartphones and televisions are developing rapidly. The basis of this modernization is to give a new look to what

already exists. Recently, a new type of product has appeared on the Russian market, called a mega-novelty - an electronic cigarette. Surprisingly, e-cigarettes have quickly gained popularity, and many sites present them to their audience as "safe". Are e-cigarettes really harmless? I decided to explore this issue. The purpose of the study is to determine how e-cigarettes affect oral health. The objectives of the study: - to study the statistics of the prevalence of tobacco smoking; - to study the history and causes of the appearance of electronic cigarettes; - to study the device and the principle of operation of electronic cigarettes; - to study their chemical composition and effect on the condition of the oral cavity; - compare the condition of the oral cavity of smokers and non-smokers; - compare changes in the oral cavity of e-cigarette users to identify patterns of changes in the oral cavity of e-cigarette users.

MATERIALS AND METHODS

The study was conducted on the basis of the Department of Therapeutic. The study involved 50 people aged 18 to 30 years, whose dental condition was determined (Green Vermillion, hygiene index, measured by the CPI index). The subjects were divided into several groups: 1) non-smokers (10 people) 2) smokers of only electronic cigarettes without nicotine (10 people) 3) smokers of electronic cigarettes with nicotine (10 people) 4) combined electronic cigarettes with nicotine and regular cigarettes of medium strength (10 people) 5) only regular cigarettes of medium strength. Smokers (10 people) Methods: - survey; - examination; - assessment of the CPI index; - assessment of the Green-Vermillion index; Results of the study 1. Subjective picture: in order to understand the subjective picture, the subjects were asked about their complaints about the oral cavity. Most of the complaints concerned oral odor, plaque, discoloration of teeth and bleeding gums. The frequency of complaints is presented in the form of a diagram. The results showed that the subjects from group 5 made the most complaints. Next, palpation of the submandibular and cervical lymph nodes, examination of the red border of the lips, the front and back of the mouth and the oral cavity itself, identification of local traumatic factors such as sharp corners of teeth, fillings and missing teeth were performed. When examining periodontal tissues, bleeding, enlargement and swelling of the gums, suppuration, the presence of supra- and subgingival tartar, soft plaque, tooth mobility (I, II and III degrees), the presence of fistulas of periodontal and periodontal ligamentous origin are noted. On objective examination, the type of bite was noted (orthodontic, neutral, direct, bilateral, prognathism, deep bite, open bite, cross bite) and the presence of defects in the epithelium of the oral mucosa and foci of hyperemia. [6] In the presence of erosions and ulcers, their size, the presence of plaque on the surface of the lesion, the color of the plaque and the degree of its adhesion to the underlying tissues, as well as the hardness of the edge of erosion or ulcer were evaluated. The attachment and size of the coccyx were also studied. The tongue was examined for

plaque.KPU index The KPU index was used to determine the condition of the oral cavity. The number of teeth removed, carious and filled teeth was studied in a non-smoking group, a group that smoked only nicotine-free e-cigarettes, a group that smoked only nicotine-containing e-cigarettes, a group that smoked both e-cigarettes and standard medium-intensity cigarettes, and a group that smoked standard medium-intensity cigarettes. To check the number of carious and filled teeth, cotton wool was placed in the mouth to isolate it from saliva, the teeth were dried with a pasteur, the roughness of the teeth and softness in some places were checked with a probe, and the teeth were visualized for natural shine. Interpretation with a Student probability coefficient of 0.95, the highest CPP index was -16 in smokers of ordinary cigarettes of medium strength (group 5 subjects), and the lowest -6 in non-smokers (group 1 subjects). The result in the group smoking nicotine-free electronic cigarettes (group 2) was 8. In the group smoking electronic cigarettes with nicotine (the third group of subjects), the result was 12. And in the group that smoked both electronic cigarettes and standard medium-intensity cigarettes (the fourth group of subjects), the result was 14. If we compare the subjective data and the results of objective tests with hygienic indicators, we can conclude that smoking standard cigarettes of medium intensity causes the greatest harm to the oral cavity. In second place after standard cigarettes are electronic cigarettes mixed with nicotine. Moreover, both the group of non-smokers and the group smoking nicotine-free electronic cigarettes show the best results. In other words, nicotine-free e-cigarettes are safe for the oral cavity. But my research doesn't end there. Green-Vermillion Index In addition, using the Green-Vermillion Index (I.G.Green and I.R.Vermillion - OHI-S) I have determined the status of oral hygiene. A group that smokes only nicotine-free electronic cigarettes; A group that smokes only nicotine-containing electronic cigarettes; A group using both electronic cigarettes and standard medium-strength cigarettes; A group smoking standard medium-strength cigarettes Evaluation of the results: when examining the condition of the oral cavity, an assessment of the Green index. The index of the Vermillion index was highest in smokers of standard medium-strength cigarettes (group 5) - 2.1 and lowest in smokers of nicotine-free electronic cigarettes (group 2). In the group of non-smokers (group 1 of subjects), the result was 0.6. In the group smoking nicotine-containing electronic cigarettes (the third group of the study), the result was 1. In the group using both electronic cigarettes and standard medium-strength cigarettes (the fourth group of the study), the result was 1.5. If we back up the subjective data and the results of objective tests with the CPP index, we can conclude that smoking standard cigarettes of medium strength causes the greatest harm to the oral cavity. In second place after standard cigarettes are electronic cigarettes mixed with nicotine. The group of non-smokers and the group smoking nicotine-free electronic cigarettes show the best results. This means that nicotine-free e-cigarettes are safe for the oral cavity. In my study, the results of the Green-Vermillion index in smokers

of nicotine-free electronic cigarettes were better than in the non-smoking group. This is probably due to the importance of a responsible attitude to oral hygiene. However, my research does not end there.

CONCLUSION

My research is very relevant right now. This is due to the fact that the modernization and active use of electronic cigarettes by young people is currently underway. Every day, walking down the street, I see every second teenager with an electronic cigarette in his hands. I have always been concerned about the effects of tobacco on the oral cavity and the whole body, and as a dental student, I decided to study the effects of tobacco on the oral cavity. I've always wondered if e-cigarettes could become an alternative to standard medium strength cigarettes. After conducting several studies and comparing them with data from other scientists, I came to the conclusion that electronic cigarettes without nicotine in the smoking mixture do not have a harmful effect on the oral cavity. Smokers of nicotine-free electronic cigarettes practically did not complain of plaque, bleeding and bad breath. Smokers of nicotine-free e-cigarettes also had the lowest CPI scores. They also had the lowest scores on the Green-Vermilion index.

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