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**A COMPLEX OF DISEASES OF THE ORAL MUCOSA, RED BORDER LIPS WITH SOMATIC  
PATHOLOGY AND LOCAL FACTORS ORAL CAVITY*****Jabbarova Zarnigor****Assistant of orthopedic dentistry, 5th year student of the Faculty of Dentistry, Samarkand State Medical University, Uzbekistan****Saidov Shaxboz****Assistant of orthopedic dentistry, 5th year student of the Faculty of Dentistry, Samarkand State Medical University, Uzbekistan****Samadov Abdimajid****Assistant of orthopedic dentistry, 5th year student of the Faculty of Dentistry, Samarkand State Medical University, Uzbekistan***ABOUT ARTICLE****Key words:** Dental science, Geriatric patients, Traumatic lesions, oral candidiasis, skin diseases.**Received:** 17.03.2024**Accepted:** 22.03.2024**Published:** 27.03.2024**Abstract:** One of the most important areas of modern dental science and practice is gerontology. To date, a large amount of data on the dental status of the elderly and geriatric population has been published in the literature. It is known that age-related changes in the body affect the condition of teeth, periodontal tissues and hard tissues of the oral mucosa.**INTRODUCTION**

One of the most important areas of modern dental science and practice is gerontology. To date, a large amount of data on the dental status of the elderly and geriatric population has been published in the literature. It is known that age-related changes in the body affect the condition of teeth, periodontal tissues and hard tissues of the oral mucosa. Geriatric patients seek dental care for diseases of the oral mucosa in all taxonomic groups. Traumatic lesions, oral candidiasis, skin diseases, inflammatory (glossitis) and non-inflammatory diseases of the tongue with psychoemotional disorders (glossodynia), precancerous diseases and malignant neoplasms are often found. General (hypertension, diabetes mellitus, diseases of the gastrointestinal tract and hepatobiliary system) and local (insufficient

hygiene, dental defects, irrational prosthetics, galvanic current) adverse factors in the elderly play an important role in the severity of COP and periodontal diseases. An important risk factor in the elderly is multiple sclerosis, which causes undesirable drug reactions that complicate the course of diseases of the oral mucosa. The combination of general and local adverse factors undoubtedly leads both to a deterioration in the course of diseases of the oral mucosa (decreased salivation, microbial colonization) and to a deterioration in the quality of life of this category of patients.

**The purpose of this study was:** to study the incidence of diseases of the oral mucosa in combination with somatic lesions and local factors of the oral cavity in elderly patients.

## METHODS

A study of the dental status of 120 patients (96 women (80%) and 24 men (20%)) aged 55-85 years with periodontal diseases, oral mucosa and red lips was conducted at the clinical base of orthopedic dentistry in Samarkand, who were referred to the department of therapeutic dentistry from other medical centers in Samarkand or visited it independently. Informed consent was received from all patients for examination, treatment and follow-up, and a health questionnaire was filled out. The main tasks of the clinical dental examination were the study of complaints, anamnesis of life and disease, external examination and dental examination. The periodontal examination included the measurement of dental mobility, the presence and depth of clinical pockets, the study of orthopantomograms and index scores such as the simple hygiene index (OHI-s), the bleeding index (SBI) and the periodontal index (PI), and the skin examination were used to determine the primary and secondary morphological elements of the lesion and to fill in a topographic map (according to the Roed-Peterson&Renstrup method, modified by Gileva O.S. For each patient who was diagnosed, an individual topographic map was created reflecting the location of the lesion at the time of initial treatment and the dynamics of observation and treatment. All study participants underwent a physical and clinical examination by a local therapist to identify physical pathology and, if necessary, by a dermatologist, gastroenterologist, endocrinologist or neuropsychiatrist. The results of the surveys were recorded in an individual advisory opinion. Other examination procedures included: - general clinical blood test; - microbiological, cytological and histological examination. Results and discussion: The following categories of diseases were identified during the examination of patients: - periodontal diseases - 90% (108 patients); - diseases of the tongue (glossitis, glossodynia, burning tongue syndrome) - 28.3% (34 patients); - traumatic lesions (trauma, galbanosis, leukoplakia) - 27.5% (33 patients); - skin diseases (CPL, CV, blisters) - 25% (30 patients); - candidiasis - 9.2% (11 patients). Cancer of the mucous membrane of the mouth, tongue and lips: 2.5% (3 patients). Somatic pathology in the examined

patients. Patients with complaints (dryness, burning, pain and difficulty chewing food on the oral mucosa), with clinical symptoms in the oral cavity corresponding to a violation of the microflora, were examined in the clinical diagnostic laboratory of Samarkand, where fungi of the genus *Candida* were found in the biological material. The analysis of the results of microbiological studies showed the presence of two-component microbial associations with different concentrations of *Candida* spp fungi. There are 11 cases in the biological material. *Candida albicans* was often associated with *M. lacunata*, *S. salivarius*, *S. viridans* and *E. faecium* in CFU concentrations. During clinical and microbiological examination, candidiasis was diagnosed in 9.2% (11 patients), hyperplastic in 27% (3 patients), erythematous (atrophic) in 73% (8 patients); candidiasis was complicated by galbanosis in 63.6% (7 patients); Candidiasis was complicated by galbanosis in 14.5% (8 patients). All isolated strains of *Candida albicans* were sensitive to fluconazole, ketoconazole and itraconazole. Based on the analysis of the data of the PKZ and the selected taxonomic groups of the disease of COP, an association was established between the disease of COP and pathology of somatic cells (Fig. 5). Diseases of the gastrointestinal tract, GBS and CCC were associated with tongue lesions (glossitis, glossodynia) and candidiasis. Endocrine and cardiovascular diseases were combined with trauma, squamous cell leukemia and galbanosis (Fig. 8, 9); skin diseases of sores (lichen planus, pemphigus) and precancerous diseases were often recorded against the background of general somatic diseases. Prosthetics of the oral cavity without defects; 20 patients (25%) required prosthetics due to defects in non-removable prostheses, such as perforated artificial crowns, ceramic chips, gum recession and short crowns. Of the 38 patients with complete absence of teeth, 23 (60.5%) had removable dentures without defects, and 15 (39.5%) had removable dentures, such as mismatch of the base of the removable prosthesis and the base of the prosthesis and wear of artificial teeth. Analysis of the biopsy parameters showed that 38 out of 80 patients wore irrational prostheses, and 21 (55.2%) had galvanic currents exceeding 150 mv. This study showed that: - 80% of geriatric patients suffering from COP disease had poor hygiene, 42% had irrational prostheses and 55.2% had galvanosis.

## CONCLUSION

The results of this study provide the basis for: - increasing the level of knowledge of dentists on interaction with therapists.

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