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Modern Methods of Treatment of Acute Herpetic Candidiasis Stomatitis in Children

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Abstract

According to foreign literature, the development of candidiasis stomatitis occurs against the background of pronounced dysbiosis - it also causes gross dysbiotic diseases in the intestine, caused by a lack of Bifidobacteria and the presence of Association of microorganisms of various forms. The lack of Bifidobacteria and other dairy bacteria leads to an unobstructed colonization of the body by conditionally pathogenic microflora, primarily fungi - not only the intestine, but also other parts of the body that come into contact with the external environment (nose, mouth, ears) can be damaged.

Introduction

Candidiasis stomatitis is often accompanied by diseases such as biliary dyskinesia, gastritis, enterocolitis and chronic duodenitis have been found from scientific sources.

Carbohydrate metabolism disorders are a favorable background for the development of candidiasis stomatitis, therefore candidiasis stomatitis often becomes the first clinical sign of asymptomatic diabetes mellitus. According to a number of authors, a combination of diabetes mellitus and candidiasis stomatitis can reach 20-100% .

In diabetes, the increase in fungi is facilitated by hormone shifts, disruption of metabolic processes in tissues and a weakening of the body's resistance. One of the mechanisms of origin of disease complications is the effect of free radicals on oral tissues, the neutralization of which is significantly reduced in diabetes mellitus.

In addition to diabetes, systemic risk factors for candida stomatitis include smoking, Itsenko-Cushingo syndrome, eating disorders, in particular vitamin v deficiency, as well as malignant tumors such as leukemia. Taking antibiotic agents for a long time and in high quantities increases the risk of developing candidiasis stomatitis due to changes in the microflora of the oral cavity, violation of the integrity of the mucous membrane and salivary properties. Chemotherapeutic agents that have a toxic effect on the oral mucosa can be caused by methotrexate, doxorubicin, cyclophosphamide and vincristine agents that cause colonization of epithelial tissue atrophy, necrosis by fungi, bacteria and viruses. Candidiasis stomatitis can complicate the course of HIV infection.

The significant spread of acute herpetic candidiasis stomatitis and its more severe course are also characteristic of the process of dissemination, which reduced the activity of protective mechanisms. Many authors say that metabolic changes observed in early childhood and old age stimulate the development of stomatitis prone to candidiasis.

Scientific literature according to sources, local factors include partial adentia, the presence of removable and non-removable orthopedic and orthodontic devices in the mouth, the harmful effects of poor-quality fillings, poor oral hygiene, the presence of dental caraches, as well as chemical damage, damage to the mucous membranes.

The role of acute herpetic candidiasis stomatitis Candida separate fungi, the effect of microorganisms to reduce its local factors oral mucosa is provided by acute and chronic diseases.

Failure to follow oral hygiene in patients with acute herpetic candidiasis stomatitis increases the likelihood of candidiasis stomatitis, which is associated with a decrease in local immunity of the oral cavity.

It is known that the presence of dentures in the mouth can also be one of the causes of the pathogenicity of yeast-like fungi, especially defects or insufficient hygienic treatment. Candida determination on the oral mucosa was detected in 28-75% of patients with prosthetics. Colonization of yeast-like fungi can occur on the surface of prostheses that are temporarily and permanently removable and not removable, while the penetration of the lining coating is possible until its damage. Roughness and porosity, as well as poor maintenance of dentures, favor the penetration of oral microorganisms into the base and the formation of plaque on its surface, which includes carbohydrates, proteins, exfoliated epithelial cells, leukocytes, etc. Dental prostheses are covered with dental residues, food residues. Often, food residues are stored under the removable plate prostheses of the upper jaw, as a result of which favorable conditions are created for the vital activity of fungi, especially the genus Candida albicans, and the development of candidiasis.

Research objective. acute herpetic candidiasis in children consists in the Prevention of severe pathologies by early diagnosis of stomatitis.

Material vav styles. In 2020-2023, 118 sick children aged 3 months to 15 years with acute herpetic candidiasis stomatitis were taken at the children's therapeutic dentistry Polyclinic of the Tashkent State Institute of Dentistry. Patients with acute herpetic candidiasis stomatitis in children were examined through objective, subjective and dental examination methods (RMA, OHI-S, PHP indexes), as well as clinical - functional methods.

Results. The examined patient was carried out in the methods of basic and dental indicators in children. Basic and additional examination methods were used for the sick children under examination. In the case of an oblique examination, attention is paid to the condition of the organs of the oral cavity and the formation of the mucous membrane. In the subjective examination, however, a survey was carried out asking the parents of their children (transitional criteria of the condition during pregnancy, types of childbirth, types of nutrition of the child). From the methods of dental examination, an examination was carried out through the methods presented in the plan.

A patient with the diagnosis of acute herpetic candidiasis stomatitis found out children based on the history of the disease, the duration of the symptoms and whether the patient had them before. The Association of signs of the disease with food, medicines, oral hygiene products (such as toothpaste, dental detergents) and other substances (in particular, professional exposure to chemicals, metals, vapors or dust) was wrapped. When reviewing systems, they observed symptoms of possible causes such as chronic diarrhea and weakness (inflammatory bowel disease, genital organ diseases, weight loss, restlessness, and fever (unspecific chronic diseases).

In children with acute herpetic candidiasis stomatitis, hyperemia, blisters and blisters were observed in the oral cavity, in some cases erratic derivatives.

Figure 1. Candidiasis lip in lip areas on an obeactive examination in children with

acute herpetic candidiasis stomatitis diagnosis.

The clinical examination included the identification of complaints and the collection of Anamnesis. It was noted in the identification of complaints: fever, rash (erosion, aphthias), pain (temperature, mechanical stimulus, spontaneous pain); bleeding (when brushing teeth, during food or on its own). When collecting life history, the emergence of risk factors for the development of the disease, such as the presence of harmful habits (biting lips, cheeks, "constantly hands in the mouth", "the child pulls everything into his mouth"), determining the recurrence of the disease, the nature of nutrition, allergic condition, heredity, causes of previous and accompanying diseases were studied. All the collected information was recorded on the medical card of the dentist of the children's therapeutic dental clinic. Analysis of anamnestic data focused on the presence of diseases of the LOR organs, infectious diseases such as chickenpox, hepatitis, anemia and allergic diseases.

The examination began with an external examination, palpation of regional lymph nodes. The condition of the mucous membrane, its color, area (swelling level), the presence and localization of the elements of the area and the nature of the saliva were assessed. The depth of the vestibule of the oral cavity, the degree of attachment of the frenulum, lips and tongue were assessed.

A patient with acute herpetic candidiasis stomatitis was found to have a higher incidence rate in girls compared to boys when children were examined through primary and dental indications. The intergroup distribution of children with acute herpetic candidiasis stomatitis by age, gender is given.

In our work, we used the generally accepted parodontal index (PMA) in Parma modification to assess the condition of the parodont tissue of the oral cavity organs during the study of patients with acute herpetic candidiasis stomatitis in children. Milk's condition was assessed on each tooth after staining with a Pisarev-Schiller mixture, pre-protected with vata andalikes and dried. The inflamed areas of the gums are stained brown with glycogen, which is formed in the tissues as a result of the predominance of anaerobic processes of exchange in the tissues. After the study was carried out, the score was calculated as an index using the assessment criteria.

The simplest criterion for assessing the hygiene of children with acute herpetic candidiasis stomatitis under examination in the oral cavity is the tooth surfaces covered with tooth decay, expressed in numbers. The Green-Vermilon method was used for this.

G.Green and I.R. Wermillon (1964)proposed a simplified index of OGI-s (Oral Hygiene Indices-Simplified) oral hygiene. The following tooth surfaces are studied to determine OHI-S: face, tongue, and (6/6)/(6/6)lab1|1.

On all surfaces, tooth decay is determined first. The amount of carash on the surfaces of the teeth is determined in the following way: with a mixture with iodine, six permanent tooth surfaces are painted – the lip surfaces of the upper central incisors, the face surfaces of the Upper first permanent large root teeth, the tongue surfaces of the lower first permanent large

root teeth.

The following dental Carache assessment system is used:

0-absence of dental Carache (no staining);

1-Dental Carache covers more than 1/3 of the area of the tooth surface;

2-dental Carache covers an area of more than 1/3 of the tooth surface, but less than 2/3;

3-dental Carache covers more than 2/3 of the area of the tooth surface.

On each tooth, the amount of points is added to the total amount and divided into six (number of teeth).

By the amount of carash detected on the surface of the teeth, three levels of hygiene in the oral cavity can be distinguished: good, satisfactory and bad.

As a good case, it is possible to assess the condition in which the stained Carache is detected on the necks of individual teeth (0-1 points). Satisfactory condition-carash covers the surface of the tooth crown 1/3 and slightly more than 1/3 of the individual teeth (1-2 points). The jaw covers almost the entire surface of the crown, that is, more than 2/3 of all teeth under examination (2-3 points). This index makes it possible to conclude about the hygienic condition of the oral cavity during the period of bite exchange in children.

Index of the effectiveness of hygiene in the oral cavity of the patient

The patient's oral hygiene performance index is used to control the quality of dental cleaning during PHP (Podsadlus, Haly, 1968)training. The presence of Carache on these surfaces of teeth, as in OHI-s (vestibular surfaces 16 and 26, 11 and 31, tongue – 36 and 46), is listed, but in this case, the contamination of several areas (branches) on the studied surface of the tooth crown is taken into account: 1 – medial Compartment; 2 – distal; 3 – medium-occlusion; 4 – Central; 5 – Middle-Neck

Early elimination of complications of acute herpetic candidiasis stomatitis, it was recommended to rinse the mouth with chamomile tincture for 10 days. In addition, the correct selection of hygienic tools and devices and the use of soft dental shotguns were carried out in tughrisi. Along with the methods of dental research, we conducted microbiological research. To do this, oral fluid was taken from all examined children with acute herpetic candidiasis stomatitis by washing (rinsing) the mucous membrane of the oral cavity. For this purpose, test tubes with a solution of 4.5 sterile salt were previously prepared (Efimovich o. I., 2002). The material obtained by this method was considered the first dilution (101), a series of sequential dilutions were made from this material in the laboratory. Subsequently, in the laboratory, under the condition of box rooms, a certain volume is planted by quantitative sectoral planting in the media, intended for the cultivation of aerobic and anaerobic microbes. For this purpose, we used a highly selective differential diagnostic feed environment, such as: anaerobic agar, Endo medium, milk-salt agar, blood agar, Mueller Hinton agar, MPS-4 medium, Saburo Medium etc.

An environment containing blood agar with blaurocca and sodium azide (cab) was placed in a thermostat for 2 days. After the specified time, all fertilized cups were removed

from the thermostat, overgrown colonies were calculated, microscopic data of gram-stained smears, groups and types of isolated colonies of microbes were determined based on the nature of growth in selective and differential diagnostic feeders. The general affiliation of Staphylococcus and micrococcus was determined by the following tests:

- presence of pigment;
- microscopic data;
- glucose breakdown under anaerobic conditions.

To distinguish between the types of staphylococci, we used: under anaerobic conditions, hemolysin, plasmocoagulase, lecithinase and enzyme manitol were identified. In the presence of all these features, the microbes studied were classified as Staphylococcus aureus. Not all other strains of Staphylococcus had similar characteristics.

Conclusion.

1. The patient with acute herpetic candidiasis stomatitis made it possible to early identify the clinical signs of the disease in children and develop preventive measures.

2.After treatment, the dispensary is controlled and re-monitored every 3 months.

3. Patients with acute herpetic candidiasis stomatitis are under the supervision of a pediatric dentist. Carrying out diagnostic analyzes in the early diagnosis of patients with acute herpetic candidiasis stomatitis. Improving the quality of life in children with acute herpetic candidiasis stomatitis by restoring the state of chewy efficiency.

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