

RESULTS OF THE DENTAL EDUCATIONAL PROGRAM IN PRIMARY SCHOOL CHILDREN OF THE CITY OF TASHKENT



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АННОТАЦИЯ

Цель исследования: Обосновать необходимость проведения и изучить эффективность стоматологической образовательной программы для учащихся младших классов в профилактике кариеса зубов и заболеваний пародонта. **Материал и методы:** Объектом исследования явились 175 учеников младших классов общеобразовательных школ №240, №259 и №302 города Ташкента. Предметом исследования была стоматологическая образовательная программа, «Ослепительная улыбка на всю жизнь».

Результаты: В результате проведения образовательной стоматологической программы у школьников младших классов прирост кариеса не наблюдался, интенсивность кариеса зубов по индексу DMF снизилась с $4,13 \pm 0,23$ до $3,09 \pm 0,20$ $p < 0,05$, индекс гигиены улучшился и составил $1,50 \pm 0,09$ $p < 0,05$. Полученные нами результаты свидетельствуют о достижении поставленной цели и выполнении обозначенных задач.

ABSTRACT

Objective of the study: To substantiate the need for and study the effectiveness of a dental educational program for primary school students in the prevention of dental caries and periodontal disease.

Material and Methods: The object of the research was 175 pupils of the elementary grades of secondary schools №240, №259 and №302 in the city of Tashkent. institutions (people). The subject of the study was a dental education program, "A Dazzling Smile for Life."

Results: As a result of the educational dental program, the increase in caries was not observed in primary schoolchildren, the intensity of dental caries according to the DMF index decreased from 4.13 ± 0.23 to 3.09 ± 0.20 $p < 0.05$, the hygiene index improved and was 1.50 ± 0.09 $p < 0.05$. The results obtained by us testify to the achievement of the set goal and the fulfillment of the designated tasks.

Keywords: dental caries, oral cavity, dental diseases, prevention programs, dental status, the prevalence of caries, caries intensity.

The problem of dental caries and the need for its prevention remains relevant at the present time [1], due to the high prevalence and intensity of this disease among children and adults [2]. The defeat of teeth with caries begins during the period of their eruption and is characterized by rapid progression [3].

The highest incidence of carious lesions falls on the period when the formation and growth of the organism occurs [4]. According to various authors, in children aged 7 to 12 years, the percentage of damage to the permanent molars of the upper and lower jaws is the highest in comparison with other teeth [5].

The greatest prevalence and intensity of caries are observed in the area of the fissures of the chewing teeth, which is facilitated by the anatomical shape of the fissures, their depth, width, low level of mineralization in comparison with other areas of the enamel of the tooth crown, as well as poor washing with saliva [6].

The results of numerous studies have shown that in children at the age of 6, about 50% of carious lesions develop on the chewing surface of the first permanent molars, at the age of 7-9 years, the prevalence of fissure caries is 80% [7], and by the age of 12 it reaches 90% [eight].

The activity of caries development on the chewing surfaces is highest at the age of 7-9 years, and proximal caries - from 11 to 13 years [9]. However, despite the fact that the proportion of fissure caries decreases with age, and at 18-19 years of age its prevalence is almost 50% [10].

The most important and requiring special attention link in the implementation of the prevention of major dental diseases is the hygienic education of children and adolescents, dental educational work and teaching the rules of oral hygiene [11, 12, 13]. Currently, in general, dental prophylaxis programs do not have a clear organizational, legal and financial basis, and their regulation is insufficient at the state level [14, 15, 16, 17]. In a market economy, the implementation of preventive programs is limited to the maximum regional level, in the absence of a state organization and targeted funding for such programs [18].

In the former Soviet Union, there was a lot of experience in providing dental care to children in school dental offices, but now there is a real threat of death of school dentistry [16]. The crisis of school dentistry is the widespread closure of school dental offices, which leads to a sharp decrease in the coverage of planned rehabilitation and medical examination of the child population, an increase in

dental morbidity. The main reasons for this phenomenon are the lack of an appropriate legislative framework, the complexity of licensing these offices, often the lack of motivation for school administration to operate on their basis of school dental offices [16, 19]. Thus, at present, the development and implementation of school dental programs, as the most adapted to modern conditions and having the ability to use the available resources of school dental offices, is acquiring special relevance. There is a need to develop a clear scheme and procedure for work, planning the volume and range of care provided, as well as a qualified assessment of the effectiveness of the program for the prevention of dental diseases in adolescents in a school dental office.

Purpose of the study

To develop and evaluate the effectiveness of the prevention program "Dazzling smile for life" in order to preserve and strengthen the health of children of primary school age, the city of Tashkent.

Research objectives

To study the dental status of primary school children at baseline and in dynamics after 6 months and one year after the program.

Evaluate the effectiveness of the "Dazzling Smile for Life" program for children of primary school age.

Materials and research methods

The object of the research was the junior schoolchildren of educational institutions (175 people). The subject of the research was a dental educational program conducted in 2-3 grades of secondary schools №240, №259 and №302 in the city of Tashkent.

Children participating in the educational program were included in the main group (84 people). Children, for whom the educational program was not carried out, made up a comparison group (91 people).

In this article, we will focus on the change in clinical indicators in children obtained as a result of the implementation of this program.

The participants in the study were persons whose legal representatives signed a voluntary informed consent. Dental examination of children was carried out using a set of dental instruments under artificial lighting.

Clinical studies carried out as a result of the work were: examination, determination of the prevalence of caries, determination of the intensity of caries by the DMF+df index, the hygienic state of the oral cavity was determined by the index

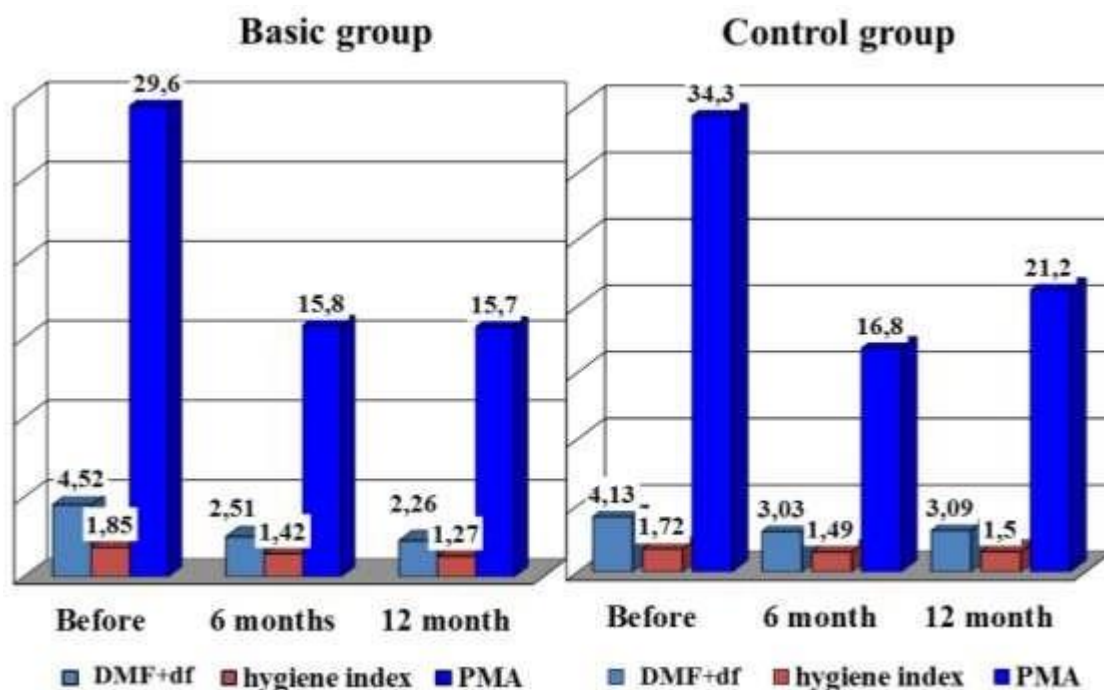


Figure. Results of the dental education program for primary school children (M + m).

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УДК: 616.314.18-002:009.7-071+612-017

<https://doi.org/10.34920/min.2021-3.034>

КЛИНИКО-ИММУНОЛОГИЧЕСКАЯ ОЦЕНКА БОЛЬНЫХ ПУЛЬПИТОМ С БОЛЕВЫМ СИМПТОМОМ



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