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CHAK-STATISTICAL ANALYSIS OF DENTAL EXAMINATIONS OF ACTIVITY DISORDERS IN THE LOWER JAW

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Abstract:

Various manifestations of CHPJB BFBS lead to changes in the activity of the SCC, nasopharynx, TJT muscles, auditory, visual and vestibular analyzers, cranial nerves, a serious set. For example, there are both opinions about stopping breathing during sleep, sleep pressure and spinal arteries, that these cases can shorten people's life expectancy to 15-20 years. At the same time, the etiology and pathogenesis of such a wide range of neurosomatic disorders in CHPJB BFBS remain controversial and uncertain .

Keywords: CHPJB BFBS, SCC, nasopharynx, TJT muscles, auditory, visual and vestibular analyzers,

RELEVANCE.

Various manifestations of CHPJB BFBS lead to changes in the activity of the SCC, nasopharynx, TJT muscles, auditory, visual and vestibular analyzers, cranial nerves, a serious set. For example, there are both opinions about stopping breathing during sleep, sleep pressure and spinal arteries, that these cases can shorten people's life expectancy to 15-20 years. At the same time, the etiology and pathogenesis of such a wide range of neurosomatic disorders in CHPJB BFBS remain controversial and uncertain .

To date, there are many publications that provide information on the diagnosis, treatment and prevention of diseases of the mandible (CHPJB), trieradi [5, 6, 11, 16], the researchers also note that among them, the painful dysfunction syndrome CHPJB (SOD) is the most common pathology among people who go to dentists, and the main reason for the formation of the pathological process is the calculation of violations in the dental system [1, 7, 9].

It is known that the complexity of the diagnosis of CHPJB ODS is associated with the absence, diversity and non-continuity of symptoms, with a clear picture of the mechanism of occurrence of this pathology [2, 8, 12], Therefore, today they conduct a series of research methods that take into account the clinical-functional, anthropometric, immune-microbiological and equipment research methods to identify

CHPJB BFBS-induced ogric syndrome is the most common pathology associated with a violation of the work of chewing muscles, primarily the lateral wing muscle [7, 13, 17]. Patients often resort to the phenomena of "noise" in the movements of the lower jaw (p/j), pain in the chewing muscles when chewing or speaking for a long time, chewing disorders, tinnitus and a sense of noise in them [14, 16, 18]. Complaints that patients make are associated not only with morphological and activity changes in the CHPJB, but also with the addition of organs and tissues of the entire chewing apparatus to the pathological process, in a number of cases, this pathology is the consequence of emotional changes in a person [3.4.9.10].

Patients with CHPJB pathology often do not receive timely and proper medical care, on top of which, the same dental orthopedic methods in the treatment of chpjb pathology are considered pathogenetic and the most effective [1.3.8], Therefore, to date, chpjb has been plagued with the most complex and pressing problem in the treatment of patients with ogrics [2.4]. Many of the sleep arteries experience systemic disorders in the body after compression of the marotaba, carried out in animals and described in detail in the literature. They are manifested by silks, sharply expressed in all indicators of the work of the central nervous system, heart, lungs, increased arterial pressure, slowing of blood flow, an increase in the amount of NV, erythrocytes and leukocytes in the peripheral blood, an increase in the amount of sugar in it, etc. The results of functional studies in children and adults with dental anomalies are of particular interest [6.8]. With the ultrasound method of dopplerography, it was found that the average speed of blood flow on the surface of the pelvis and upper jaw on the anomalous side increased by 1,5 times compared with the intracranial side. 12 months after treatment, it was observed that the average speed of blood flow in the arteries of the right and left facial areas was normalized. Unfortunately, internal sleep was conducted without taking into account the state of the arteries and the CHPJB. Therefore, it can only be assumed that the change in blood flow in the external sleep artery is associated with the compression of the internal sleep artery of the CHPJB.

The act of sucking is a necessary stage in the development and formation of TJT and especially the CHPJB [5.7]. In artificial breastfeeding, the mechanical

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load on the TJT elements changes. This calls for changes in the order and time of teeth eruption, as well as disturbances in the formation of CHPJB, remaining from the development of p/j when prognathy is formed and developed [9.11]. Due to this, for the formation of CHPJB, which carries out physiological activity, it is necessary to develop artificial breastfeeding regimes, which are close to the breastfeeding regime in the breast [4.5].

The analysis of our country and foreign literature showed that the CHPJB pathology occupies one of the first places in the structure of the main dental diseases, the number of patients in the last decade has been increasing without deviation; the frequency of occurrence of pathology is from 19.6% to 76% [7].

According to the majority of authors, chpjb dysfunction is mainly threeraydi in women, the contribution of their references is 70-80%, and the most common age of the disease is 14-40 age range [5.9].

The results obtained are attributed to clinical practitioner specialists either with high "medical activity", or with violations of the hormonal background in women of reproductive age they found an increase in the free fraction of androgens and the free testosterone index. A second group of authors suggested that the high point of disease manifestas coincided with the period of sexual maturity and early reproduction. Also during the examinations, more than 50% of female patients with CHPJB dysfunction were diagnosed with intracranial and orthognathic teething [11].

Researchers at the time of epidemiological examination of patients, 22% of all surveyed identified ida-joint dysfunction. In the second group of studies, 90% of patients with CHPJB dysfunction bring harmony with the defects of the dental row with different location and length [11.13]. When patients with pathologies of the joints are examined [10] found that 75,7% of them had different pathological changes on the side of the ida TCT. And the close pathogenic link between the pathological absorption of teeth and structural changes in the bone elements in the joint is also associated with a decrease in the number of teeth [2.6] caught up. Head author determined that in patients with the form of decompensation of pathological absorption of solid tissues of teeth when occlusion is low in height, chpjb dysfunction is observed.

But the proven OAD hypothesis comes under argumentative criticism; the authors fairly point out that almost 90% of patients with intracranial and orthognathic teethlamga disorders of occlusion occurring in the case are not the only and even the main factor in the development of CHPJB dysfunction [7]. On the other hand, in clinical practice, even chpjb dysfunction was associated with a low occlusion height, expressed deformities and a meeting of patients whose length and location did not develop in a variety of defects.

Based on the analysis of the studied literature, it becomes clear that the morphological changes in the body and development of articular dysfunction and their inherent intra-articular structures are carried out through neuromuscular [8]. Discoordination in the activity of chewing muscles, hyperphaemia of individual muscles, spasms of which can arise both under the influence of Oas and psychosomatic pathology, only proposing to the conclusion that the complement mexanizms of the organism are in a fully depleted state. Meyer and all also choked; they suggest that the pathogenetic joint is associated with each other in the development of joint dysfunction and indicate three factors that bind to each other: a violation of neuromuscular function, a violation of the occlusion-articulation relationship in the dental rows, a violation of the relationship of the elements of the joint.

The Researcher R. D. Kinniburgh and co-founder [11] have shown that long-term abnormal movements of the lower jaw can lead to degenerative changes in one or both joints, while such movements of p/J do not necessarily have to be associated with Oas.

In another study, small changes in occlusion occur over time when chewing muscles and CHPJB tend to flatten, while large changes occur in occlusion injury, when chewing muscle pathology and chpjb function are disrupted, resulting in tug-of-war (392), the presence of occlusion surfaces before the second author's deadline, and the interaction between chewing muscle injury S. Sato and co-founder. [12] puts forward the idea. A. S. minagi (J. C. tuerp, S. minagi [13]. E. at the time of examination of patients with CHPJB dysfunction. Tapaka and co-founder [13] 32.5% of patients with disorders in the first joint, 38.5% in the left Joint, -29% in both joints registered complaints; 74.4% of patients observed pain in the pelvis and lateral wing muscles. The authors identified the most frequent meeting of chewing, hyperbalance contacts and defects of dental rows with different positioning and length on one side in patients with CHPJB dysfunction during the examination [16.17]. With the deformation of the alveolar tumor, the grinding of the teeth as a result of chronic general parodontitis, as well as a decrease in the height of occlusion, the pathological absorption of hard tissue in the teeth is much less than threeraydi.

Pathological absorption of teeth, a clear correlation was found between a violation of the function of the chewing muscles and dysfunction of the CHPJB, in other studies, a decrease in the height of the occlusion with different location and length, morphofunctional deviations developed in patients with defects of the dental rows with distal silc.

Thus, based on the previously expressed data, it can be concluded that Oas is able to call the

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development of CHPJB dysfunction not independent, but only through the neuromuscular joint, while other researchers present a psychosomatic ome [18]. Despite the reliability of the information provided, most physicians are of the opinion that psychological stress is neglected during the examination and treatment of patients with CHPJB dysfunction []. This, in turn, reduces the effectiveness of treatment-diagnostic and prophylactic measures.

Authors (D. Schulz and o. Winzen [2.8] they say that mental stress leads to muscle overload, resulting in their spasm and pain over time. Similar occlusion disorders lead to proprioceptive changes, which lead to overload, spasm and, finally, pain in the muscles through the reflex. The authors proved that individuum loses the ability to adapt under the influence of various emotional and physical loads, which leads to the development of chpjb dysfunction. Research conducted by other authors has proved that in patients with CHPJB dysfunction, the contraction strength of the chewing muscles is less than that of the norm, which protects the joint from further deterioration[8]. In this way, almost the entire pathology of the joint is again emphasized by the fact that the ability of the muscle to reduce is associated with the loss of coordination.

When we analyzed the open literature, we found data on the relationship between the development of dysfunction of the CHPJB and the anatomical inclination of the skull and spine [9.11]. Unfortunately, such information is scarce and does not have a clear picture of the individual peculiarities of the anatomopographic structure of the CHPJB. In addition, research in recent years has shown that connective tissue dysplasia, which is associated with a hereditary defect of structures of mesenchymal origin, is also of great importance in the development of chpjb dysfunction [10]. The authors of the series argue that the occurrence of chpjb dysfunction and its possible complications depend on the degree of weight of connective tissue dysplasia. Heredity a lack of vitamins, especially B1, B6, C and other vitamins, is also of great importance in the formation of CHPJB dysfunction, which worsens metabolism and impairs the sensitivity of Trigger points kuchaytiradi; in the absence of Vitamin C in particular, collagen synthesis is disrupted ;siysiy, potassium, iron deficiency increases the sensitivity of myofassial trigger points.

CONCLUSION.

Thus, the analysis of literature data, the polyethylene description of ZHPB dysfunction was confirmed. The condition of the muscular apparatus, Oas, a change in the height of the lower third of the face, neuroendocrine control and emotional sphere are directly related to the development of this disease. In one or more of these cases, a violation of balance in interactions leads to the appearance of dysfunction of the CHPJB. Therefore, in the case of chewing muscles, occlusion of teeth and in the case of the structure of the CHPJB, it is necessary to constantly support the corresponding unit, aiming at its performance in the norm of the TJT.

LIST OF USED LITERATURE.

1. Astanov, O. M., & Gafforov, S. A. (2021). Diagnosis and treatment of patients with maxillary-mandibular joint dysfunction without pathology of inflammatory-dystrophic origin. Annals of the Romanian Society for Cell Biology, 25(1), 5721-5737. Retrieved from www.scopus.com
2. Eronov Yo. K. Discase incidence and statistical indicators in children with cerebral palsy // International enginuring journal for research development .Vol. 5 Issue 4.2020. - P 31-32
3. Eronov Yo. K. Implementation of comprehensive prevention of dental caries in children with cerebral palsy // International Journal of Human Computing Studies Vol 2 № 6 2020. JHCS - P 22-24
4. Eronov Yo.K. Indications for oral hygiene in stch children with cerebral palsy // International Journal of teguated Education Vol 3, Issue VI, June, 2020.-P. 26-27
5. 5.Eronov Yo. K. Evalution of stomatological investications in children diagnosed with cerebral palsy. "Актуальные вызовы современной науки" Украина выпуск 4(48) Часть-1.-P. 45
6. 6.Eronov E.K.Criteria forevalution of oral hygiene behaviorin children withcerebral palsy //"Актуальные вызовы современной науки" Украина выпуск 4(48) Часть-1.- P.45
7. Eronov Yo. K. Oral hygiene in sick children with cerebral palsy // "Actual problems of children's denristry" India 22 may 2020.-P.19-20
8. Eronov Yo. K. Caries and stastical indicators in children with cerebral palsy. "Actual problems of children's dentistry" // "Actual problems of childrens denristry" India 22 may 2020. - P. 26-27
9. 9.Мирсалихова Ф.Л. Минимально инвазивный метод лечения кариеса зубов у детей. // «Стоматология детского возраста и профилактика» Москва.2018 2-70.С 9-12
10. Мирсалихова Ф.Л. Отстроченное пломбирование при кариесе постоянных зубов у детей с несформированными корнями. // «Клиническая стоматология» Москва, 2018 1/85/ январь-март. С 4-7
11. Мирсалихова Ф.Л. Минимально щадящий подход к лечению кариеса зубов у детей. //

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12. Олимов С.Ш. Значение метоболических паказателей слюны в развитии зубочелюстных аномалий у детей с метоболическим синдромом.// "Стоматологик касалликларни даволашда ва профилактикасидаги долзарб муаммолар" илмий амалий конференцияси Бухоро 2016.- 33бет.
13. Олимов С.Ш., Бадриддинов Б.Б., Тожиев Ф.И. О гистологическом статусе протезного ложа у больных сахарным диабетом.// 88-я всероссийскаянаучно-практическая конференциястудентов и молодых ученых Казань. 2014 г. С 375.
14. Олимов С.Ш., Бадриддинов Б.Б. Улучшение лечения среднего кариеса постоянных моляров у детей.// 89-я всероссийскаянаучно-практическая конференциястудентов и молодых ученых Казань. 2015 г. С 410.
15. Олимов С.Ш., Бадриддинов Б.Б. Роль нормальной микрофлоры в развитии болезней пародонта у детей.// 89-я всероссийскаянаучно-практическая конференциястудентов и молодых ученых Казань. 2015 г. С 411.
16. Олимов С.Ш., Microbial spectrum and iocal state of rezistence Oral cavity of workers gas processing plantce.// "Стоматологик касалликларни даволашда ва профилактикасидаги долзарб муаммолар" илмий амалий конференция
17. Бухоро 2016 34-бет.
18. Саидов Акбар Ахадович. Олимов Сидик Шарифович. The volue of matrix metalloproteases and connective nissue markers in the patoloji of temp-jav joint in children // Journal of Critical Reviews (скопус). Vol.7 Issue 17 2020 p44-49
19. Раджабов А.А., Раджабов А.Б., Темирова Н.Р., Камалова Ш.М. Оценка результатов первичной хейлопластики у детей с врожденной двусторонней расщелиной верхней губы и нёба// Электронный научный журнал «Биология и интегративная медицина». - 2017. - № 5. - С. 36-46.