

Introduction: The results of our study, allowed standing out the criteria of choosing different methods of hygiene of the oral cavity and also to appreciate their efficiency. The aim of the study: to make sensitize our population in order to use correct methods of oral hygiene.

Materials and methods: These methods were used on about 20 patients, who accused different symptoms.

Results: Our results showed that a big percent of the manifested accusations of the patients was diminished for about 14-21 days, after an informatisation which was done regarding the correct using of the hygiene methods, also application of correct methods of these types mentions above.

Conclusions: Using the correct hygiene methods of oral cavity, wich shows efficiency in prophylaxy of different stomatological diseases.

Key words: Oral hygiene, water mouth spray, teeth brushing.

PECULIARITIES OF EDUCATION OF CORRECT TOOTH BRUSHING TECNIQUE IN CHILDREN WITH MINTAL RETARDATION

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Introduction: This paper seeks to assess the peculiarities of education of correct tooth brushing technique in children with mental retardation.

Purpose of work: assess the efficiency in the education of correct tooth brushing technique of children with different degrees of mental retardation.

Material and methods:

The study included 82 children aged 7-17 years, institutionalized in auxiliary schools.

Group I covered 31 children with mild mental retardation (*IQ 50-69**),

Group II comprised 28 children with moderate mental retardation (*IQ 35-49**),

Group III represented 23 children with severe mental retardation (*IQ 20-34**)

**ICD-10, World Health Organization, 1992.*

The control group was constituted of 121 healthy children.

The working method included examination, and recording of data in individual prophylaxis sheets. Carious experience was evaluated by estimating the prevalence index and the COA index. Oral hygiene was assessed according to OHI-S 1964 index, G.Green, I.Vermillion, 1964, and the approximale plaque index by Lange, 1975 (API) at an interval of 1 week, 2 weeks, 1 month and 3 months. Health education for children in the form of play was performed at group, micro-group (3-5 children) and individual level; the educational methods were adapted to the age, intellectual development and educational, behavioral, and individual features of children. There has been developed and applied a series of audio-visual material and educational methods for medical and sanitary training of children. Illustrative material was used to ease the process of children's learning of correct brushing technique. Repeated, guided and supported, sessions were conducted for tooth brushing.

Outcomes: The prevalence index of dental caries falls within 83.24-93.45% limits, and the intensity of caries varies from 3.98 to 5.17 for COA index. Poor brushing was noted with all children in the study groups and with 85.95% children in the control group.

Conclusions: The study found that institutionalized children have high morbidity of dental caries, with multiple treatment needs. Children with moderate and particularly with severe mental retardation have limited ability to independently perform tooth brushing and need help from staff in cleaning the oral cavity.

Key words: dental caries, oral hygiene, tooth brushing technique, children with mental retardation.

THE PULPITIS TREATMENT OF PERMANENT TEETH WITH UNFORMED APEX

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Introduction: The variety of clinical forms and the complexity of the pathogenic mechanisms make the pulpitis treatment of permanent teeth with unformed apex to keep being a subject with many unknowns, interesting both the researchers and also practitioners. The anatomic particularities of immature permanent teeth (bulky pulp chamber, relatively low dentine thickness and increased permeability) determine the incidence of pulp inflammation. The aim of pulp therapy is to establish an environment in which apexogenesis can occur. Currently, the optimum material for use in pulp therapy is Mineral Trioxide Aggregate (MTA). Compared with the traditional material of calcium hydroxide, it has superior long term sealing ability and stimulated a higher quality among reparative dentin. The aim of this study is to evaluate the efficacy of various pulpitis treatment methods of permanent teeth with unformed apex.

Materials and methods: The study was realized on 87 patients of 6-13 years old, which are treated for one year period. Gathering of evidence about the patients is done by cards and their radiography and we estimated only treatment of permanent immature teeth. Then we made statistic analyse related to clinical forms of pulpitis, method of treatment and its results.

Results: We have treated 36 immature permanent teeth, from which 1 with indirect capping, 7 with direct capping with $\text{Ca}(\text{OH})_2$, 2 with MTA direct capping, 9 with pulpotomy with $\text{Ca}(\text{OH})_2$, 3 with MTA pulpotomy, 14 with pulpectomy (apexification). According to our analyses both treatment (the ocalexix therapy and the method using MTA) resulted with apexogenesis. But comparing MTA and $\text{Ca}(\text{OH})_2$ at the 12 month recall time, 2 of 9 teeth in the $\text{Ca}(\text{OH})_2$ group were considered failures, whereas none of the teeth treated with MTA failed (0 of 3). Calcific metamorphosis was evident radiologically in 2 teeth treated with $\text{Ca}(\text{OH})_2$ and 2 teeth treated with MTA.

Conclusions: The main objective in treatment of immature permanent teeth is to maintain pulp vitality in order to reach the necessary length of root and to achieve apexogenesis. The indications of pulp therapy depend on whether the pulp is vital or nonvital. Pulp capping is the first treatment of choice if the pulp is considered largely normal. For cases that the coronal pulp tissue has more advanced inflammation, pulpotomy is the next method of choice. The immature teeth with non-vital pulp are treated with a shallow (Cvek) pulpotomy or pulpectomy. While the decision for teeth undergoing apexogenesis or apexification has been determined by the result of pulp vitality, recent clinical case reports show that after conservative treatment, severely infected immature teeth with pulpitis can undergo healing and apexogenesis. Also, clinical assessment has demonstrated MTA is a good substitute for calcium hydroxide in vital pulp procedures.

Key words: pulp therapy, calcium hydroxide, mineral trioxide aggregate (MTA), apexogenesis