

PERIOSTITIS

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Introduction: From the multitude of inflammatory odontogenic processes located within the mouth, periostitis occurs quite frequently. This is due to complications that arise from the patients' neglect, as a result of complications of a nonqualitative endodontic treatment and not the last one - the social-economic conditions. Thus, the concern about prevention and early treatment of dental maxillary diseases is still a key priority.

Purpose: This study aims to make an analysis of contemporary data of specialized literature to highlight a common form of inflammatory diseases of the oro-maxillo-facial region, namely periostitis and to study the proper clinical cases.

Materials and methods: We carried out a selective literature review analysis concerning statistics, etiology, clinical evolution, diagnosis and treatment of patients with periostitis and presented our own clinical cases.

Results: According to data of the Department of Oro-maxillo-facial Surgery (OMFS) in Chisinau, the infection ranks first among facial nosologic entities. Periostitis represents 29.7%, thus ranking first among patients with odontogenic infections, according to data of the Department of OMFS from 2003 [Stoica I. and S. Ababii]. Patients with odontogenic abscesses are ranked second - 17.9%, and patients with pericoronitis are ranked third - 10.2%.

If in 2002 the number of patients with odontogenic inflammatory processes was 410 patients, then in 2003 this number was 637 patients - representing 54% of all inflammatory processes. Thus the number of patients increased by 227 (55.4%).

We also found that in 2002 the male / female ratio was 1.3 / 1, while in 2003 this ratio was 1/1.

We want to mention that the number of visits in the first 24 hours from the onset of the disease increased: in 2002 - 4.5%; in 2003 - 11.6%. The number of visits markedly decreased in over 72 hours from the onset of the disease: in 2002 - 84%; in 2003-43.6%.

According to the localization of the process we have marked: vestibular - 85.6%, palatal 5% and lingual 9.4%.

Recommendations: Visit to the dentist twice a year, timely examination and treatment of the oral cavity diseases and referral to the specialist in case of infection will lead to considerable reduction of odontogenic inflammatory processes.

Conclusions:

1. Periostitis ranks first among odontogenic infections.
2. The process is more commonly located vestibularly.
3. Inflammatory processes occur mainly in men.

Keywords: periostitis, inflammation, odontogenic, frequency.

USING THE METHODS OF ORAL CAVITY'S HYGIENE IN PROPHILAXY DISEASES

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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.