ETIOPATHOGENESIS OF PURULOUS INFLAMMATORY DISEASE OF THE FACE AND JAW AREA AND MECHANISMS OF ITS ORIGIN

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Abstract: Globally, new approaches are being developed to identify the immunopathogenetic aspects of the application of new methods of diagnosis and treatment of purulent-inflammatory diseases of the maxillofacial area. This attitude with treatment and of the disease prevention to get different methods comparative justification done is increasing. Patients immune system parameters and clinical appearances between dependence evaluation, as well as face - jaw area purulent-inflammation diseases and of injuries end different stages separately important have.

Key words: face-jaw area, purulent-inflammation, sepsis, phlegmon , mouth cavity, surgery.

The face is the area of the jaw purulent infection problem there is not only medical, perhaps social is also important. This of diseases pathogenesis and prevention get each bilaterally learned although purulent infection the problem of treatment efficient methods work coming out but face - jaw area solution not done [13].

Last in years purulent-inflammation of the maxillofacial area (YJS). of diseases progressive growth with hurt patients number increase is currently being monitored all of patients Outpatient dental referrals support more than 20% organize is enough and from 40 to 60% in the face -jaw sections . of sepsis increase shape occurs in 18.5% of patients and wide spread out phlegmon with scientist and their complications are 50% reaches [20].

The results of the study show that in the clinical presentation of purulent-inflammatory diseases, new and simple manifestations appear, which significantly complicate their diagnosis. The course of the purulent-inflammatory process develops due to characteristic changes in the immune system . Patients with phlegmon of the face -jaw area are characterized by a slightly weak activation of the general immune system, despite the high activity of the local immune state . Other from the side , face - jaw phlegmon slowly pass in cases of immunity to himself typical feature mouth of the cavity local immunity phagocyte of connection superior participation with post-infection immunity of scarcity formation , though of changes correlative dependence of the body immunity of the situation all in parts parameters observation possible .[13] Face - jaw area purulent-inflammation diseases with hurt of patients traditional in treatment Polyoxidonia apply mouth of the cavity local immunity and common

immunity status approach take will come , that's it as a result of patients common situation a little get better and heal efficiency increases and of patients in the hospital to stay term decreases [14].

Today, from 40 to 60% of the total number of patients with purulent inflammatory disease of the face-jaw region, who turn to the outpatient department of surgical dentistry, are patients with acute and chronic purulent inflammatory diseases. Of these, more than 50% of the patients admitted to maxillofacial surgery departments are patients with purulent inflammatory diseases. The problem of improving methods of prevention, diagnosis and treatment of purulent inflammatory diseases of such patients remains one of the most urgent problems. In recent years, the number of cases of slow, hyporeactive forms of the inflammatory reaction has been steadily increasing. it is desirable that it often develops at the expense of local and general complications [5]

When analyzing the frequency and structure of purulent-inflammatory diseases of the face-jaw area, the medical history of patients with purulent-inflammatory disease was studied. Microorganisms spectrum account received without purulent-inflammation of diseases some reasons determined . Purulent-inflammation diseases treatment term to quality effect doer factors confirmed [18].

Face - jaw area purulent-inflammation diseases odontogenic inflammation with diseases (YJSYY). depends being yearning processes dentist and maxillofacial surgeons in practice important medical and social problem is 60-67 % organize is enough As mentioned , the face - jaw area purulent-inflammation diseases sharp purulent-inflammation diseases in the composition being their growth tendency up to 70% increased is going Sharp odontogenic inflammation severe diseases (O'OYK). evening in the process the disease heavy in passing pain component of the patient common situation , emotional status and get well leaving separately place occupies With that pain character , intensity , provoking factors learning (O'OYK) passing away character to evaluate possibility gives , this while of the face -jaw area purulent inflammatory (ILD) diseases with hurt optimal therapy in patients choose enable confirms [19]

Sugary diabetes in the background coronavirus infection as a result surface came purulent-necrotic wounds treatment endocrinologist in the presence of wound of the process to go objective reflection bringer criteria control under done increase need So as a result of COVID-19 in QD of the face-jaw area purulent-inflammation of diseases pass to himself typical and atypical often heavy complications and even to death take will come . Sugary of diabetes decompensated stage inflammation hearths efficient treatment almost possible it's not . new treatment algorithms work exit with QD hurt in patients face and jaw area purulent inflammation diseases development etiopathogenetic mechanisms to learn separately attention focus should be (Azimova

ML Po'latova Sh.K.)

Phlegmon is treated with surgery the way know and take Boryl a di. Phlegmon a the beginning is fine stage , limit canned a tive methods and physiotherapists muol a j a l a r, dry hot , nurl a r yard a mid a stop the inflammation from spreading around the wound chor a -t a dbirl a ri o′tk a zil a di. However The inflammation is developing next to it tomong a j a d a ll a shs a , und a a lb a tt a operation do it Operation do a nd a operation section by doing to open ker a k, a ks hold a x surgery a uchr a b tur a dig a n hol a t, i.e cosmetic point a i n a z a rd a n small section a by doing so , it is on the side of the fire lightning speed a rivoshl a nib gogig a biological I am a slave a ql-f a ros a ti It does not affect the patient a situation heavy a shib ket a ver a di, h a tto sepsisg a ch a a sor a tl a nib own v a qtid a h a qiqi mut axa ssisg a uchr a m a s a scientist bil a n tug a shi can Purulent space cut open a nd a , pus Chich a rib t a shl a b , antiseptic modd a l a r bil a n obdon processing give a di v a t a mpon or dren a j left a di. Z a h a rl a nish certain a niql a ns a , a lb a tt a detoxifying a sion ter a piya v a Antibiotic therapy hand , purulent x surgery gold legitimacy a enter a n [23]

The face is the area of the jaw purulent-inflammation diseases treatment problem current being remains The face is the area of the jaw purulent inflammation diseases with hurt of patients the number decrease to the trend have it's not . The face is the area of the jaw neck phlegmon with hurt patients the number increased it's going on current one how many spaces across distributed , often of such development with together with sepsis, mediastinitis , brain hard curtain of the bark cavernous sinus thrombosis and another heavy complications will come . Current at the time face - jaw area and of the neck purulent-inflammation diseases with hurt patients treatment for standards work developed and to practice app done they are enough level being antibacterial , detoxification , inflammation against therapy, homeostasis systems purulent drainage own into takes These are microorganisms to antibiotics resistance , virulence and of variability increase with dependent .[20] Purulent the oven in treatment purulent surgery the way with take throw away damage reduce big important have. The face is the area of the jaw of the neck purulent-inflammation diseases with hurt patients in treatment of treatment cosmetic the results improvement, life to quality directly effect doer rough and deformation doer of scars prevention get to the goal is compatible .[21]

Metabolic diseases and of the organism immunological of reactivity decline with together chronic somatic of diseases the presence of the face - jaw area slow purulent-inflammation diseases development important from the factors is one This is the process homeostasis from the trail issuer factor be service it does of the organism adaptive compensator reactions to the situation negative effect shows .[22] of antigens chronic of influence important result a lot organs and in tissues macrophages and belongs to of cells progressive activation being , this to inflammation against answer

and to inflammation against of proteins activity between unstable cooperative mutually to the effect take will come . It is chronic inflammation of the process slowly development for is the basis . This is the case local immunity system high activity with in tissues many inflammation of cytokines , others inflammation of signs , especially of coagulation structural parts and viral of infection existence with separate stands .[15]

Last ten in annuals purulent-inflammation development pathogenesis learner researchers the number increased is going face -jaw and neck in the field occurring in diseases endogenous intoxication of the body syndrome important role plays Endogenous intoxication is many p component , polyetiological process to the organism last intermediate metabolic product toxic effect with is described [4]

Purulent inflammation with diseases (YYK). hurt patients all surgery 1/3 of the intervention reach , dentistry and facial and jaw surgery to achievements despite the patients this category no less continue is doing this from surgery next of complications most of them purulent infection with dependent .[12]

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The face is the area of the jaw purulent-inflammation diseases clinical of signs appearance basically of the body to himself typical didn't happen and to himself typical reactivity status with is determined . This of patients the majority part humoral, cellular or combined immunity deficiency to the situation have and this without inflammation usually hyperic in type develops [1, 4, 7]

The face is in the area of the jaw purulent-inflammation of processes appear to be and development, secondary immune deficiency with together, slow of

inflammation clinical signs with is described . Metabolic diseases and of the organism immunological of reactivity decline with together chronic somatic of diseases the presence of the face - jaw area slow purulent-inflammation diseases development important from the factors is one This is the process homeostasis from the trail issuer factor being service it does of the organism adaptive compensator reactions to the situation negative effect shows . Infectious , allergic , autoimmune diseases due to secondary immunity deficiency most of the time such in patients purulent-inflammation of processes primary chronic the passing of development help will give . Ours take went research to information apparently , sugary diabetes , food digestion to do system diseases and chronic alcoholism separately place holds of antigens chronic of influence important result a lot organs and in tissues macrophages and belongs to of cells progressive activation being , this to inflammation against answer and to inflammation against of proteins activity between unstable cooperative mutually to the effect take will come . It is chronic inflammation of the process slowly development for is the basis. This is the case local immunity system high activity with in tissues many inflammation of cytokines, others inflammation of signs , especially of coagulation structural parts and viral of infection existence with separate stands Pathogen of the factor firmness and inflammation diseases has been in patients observable chronic endogenous intoxication not only immunity in the system functional the situation increases , perhaps it also damages him .[17]

Inflammation of the process development for microorganisms known one quality in terms of quantitative properties have to be need, that is of the pathogen invasiveness factors , as well as inflammation to the hearth entered microorganisms the number account taken need Simple by doing so to speak , local inflammation of the process development for of the pathogen " critical the lower the concentration , the of the microorganism pathogen features so much high will be

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References

1. Rakhimov Z. K. et al. Microorganisms in lower jaw fractures in surveyed patients //Journal of new century innovations. – 2022. – Т. 16. – №. 3. – С. 146-149.
2. Fozilov U. A. Diagnosis And Prevention Of Caries Development In Orthodontic Treatment //World Bulletin of Social Sciences. – 2021. – Т. 3. – №. 10. – С. 97-104.
3. Fozilov U. A. Prevention of caries development during orthodontic treatment //World Bulletin

of Social Sciences. – 2021. – Т. 3. – №. 10. – С. 61-66.
4. Rakhimov Z. K., Kamalova M. Q. Features of the immune status and possibility immunocorrection at post-traumatic inflammatory complications at patients with jaw fractures //Asian Journal of Multidimensional Research (AJMR). – 2020. – Т. 9. – №. 4. – С. 19-22.
5. Abdurazzakovich F. U. The Role and Importance of Obturators in the Optimization of the Treatment of Dental Caries //European Journal of Research Development and Sustainability. – 2021. – Т. 2. – №. 6. – С. 84-86.
6. Fozilov, U. A., and Olimov S. Sh. "Improving The Treatment of Abnormal Bite Caused by Severe Damage To The Jaw." *Journal of Advanced Zoology* 44.S-5 (2023): 370-378.
7. Abdurazzakovich F. U. Development of innovative diagnostic and prophylactic dental obturators aimed at preventing the development of caries and its complications in the orthodontic treatment of patients. – 2021.
8. Fozilov U. A. Evaluation of the efficiency of Demineralizing Agents in Treatment with Removable and Fixed Orthodontic Equipment in Children //International Journal on integrated Education. – 2020. – Т. 3. – №. 7. – С. 141-145.
9. Fozilov U. A. Clinical and Diagnostic Characteristics of the Development of Tooth Decay in Children During Orthodontic Treatment with Removable and Non-removable Equipment //JournalNX. – С. 227-228.
10. Fozilov U. A. Diagnostics and prevention of the development of caries and its complications in children at orthodontic treatment //JournalNX. – 2020. – Т. 6. – №. 07. – С. 276-280.
11. Фозилов У. А. О проблеме скученности фронтальных зубов //Academy. – 2017. – №. 7 (22). – С. 94-96.
12. Temirovich T. T. Current issues in the treatment of acute complicated pneumonia in children. – 2021.
13. Temirovich T. T. The importance of additives that cause respiratory failure in children with pinevmonia //Academicia Globe. – 2021. – Т. 2. – №. 6. – С. 219-224.
14. Temirovich T. T. Features of acute emergency in children with allergies. – 2022.
15. Temirovich T. T. Electric Systol In Acute Complicated Pneumonia Depending On Clinical Syndromes //Journal of Pharmaceutical Negative Results. – 2022. – С. 4805-4811.
16. Temirovich T. T. Assessment of immune system state of children with pneumonia //Journal of new century innovations. – 2023. – Т. 27. – №. 3. – С. 135-141.
17. Sadulloeva I. K. Correlation Relationship of Immunological and Thyroid Parameters in Congenital Heart Diseases in Children //International Journal of Formal Education. – 2022. – Т. 1. – №. 8. – С. 25-33.
18. Саъдуллоева И. К., Карроматова Ф. А. Состояние кортикоидного статуса при врожденных пороках сердца у детей //журнал новый день в медицины. – 2021. – Т. 3. – С. 35.
19. Саъдуллоева И. К., Карроматова Ф. А. COVID-19 билан касалланган оналардан туғилган чақалоқларда интеферон ҳолатининг хусусиятлари //Journal of Science-Innovative Research in Uzbekistan. – 2023. – Т. 1. – №. 2. – С. 175-180.
20. Саъдуллоева И. К. Характеристика госпитализированных детей с врожденными пороками сердца по бухарской области //barqarorlik va yetakchi tadqiqotlar onlayn ilmiy jurnali. – 2022. – Т. 2. – №. 12. – С. 439-443.
21. Sadulloeva I. K. Peculiarities of the functioning of the neuro-immuno-endocreen system in congenital heart diseases in children. – 2022.
22. Саъдуллоева И. К., Карроматова Ф. А. Особенности Новорожденных Родившихся От Матерей С Covid-19 //Central Asian Journal of Medical and Natural Science. – 2021. – С. 362-366.