

prevents contracture and ankylosis in the temporal-mandibular joint, respiratory and thromboembolism complications, normalizes emotional state, possibilities at home and at work.

Thus, the methods of physical rehabilitation used in a comprehensive treatment of inflammatory processes of the maxillofacial area during the early postoperative period produce a positive effect on resolution of an inflammatory exudate, prevent development of marked scars, increase general nonspecific response of the body and provide restoration of the functions lost.

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CLINICAL ASPECTS OF DENTAL DISEASES IN CHILDREN WITH ENOCRINE PATHOLOGY

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In recent years, the problem of the prevalence of thyroid pathology, its impact on health and intellectual development of the population has become extremely relevant.

The aim of our study was to investigate the clinical features of dental diseases in children with thyropathology. For this purpose, a dental examination was performed among children aged from 12 to 15 years who had thyropathology (diffuse non-toxic goiter, autoimmune thyroiditis, hypothyroidism). The control group consisted of somatically healthy children of the same age.

The highest prevalence of dental caries has been reported in children with hypothyroidism and diffuse nontoxic goiter. The rate was over 90% and was probably higher than in the control group ($p < 0.05$). There was a high level of caries intensity in both somatically healthy and children with concomitant pathology of the thyroid gland. However, in children of the control group, the CPV index and its individual components were probably lower ($p < 0.05$). This figure in hypothyroidism was characterized as very high. Complications of dental caries in children with thyropathology were recorded 2 times more often than in the control group ($p < 0.05$),

Non-carious dental lesions occurred in 27.85% of children with thyroid disease, which was much more common than in somatically healthy children ($p < 0.05$). The main form of hard tissue damage was systemic hypoplasia, which occurred in more than 70% of cases.

Periodontal tissue diseases were diagnosed in the vast majority of examined children. Their prevalence in diffuse nontoxic goiter, autoimmune thyroiditis and hypothyroidism significantly outweighed the control group ($p < 0.05$). The structure of periodontal diseases was dominated by chronic catarrhal gingivitis, which accounted 83-89% of cases.

The study revealed a high prevalence of dental anomalies and deformities in children with endocrine pathology (72.87%). In the group of comparison, this figure was 51.67%. The highest rate was registered in hypothyroidism (80.00%). Analysis of the frequency of detection of various anomalies and deformations of the dental area showed that the highest level of morphological disorders was observed in diffuse nontoxic goiter and hypothyroidism. Among orthodontic problems, anomalies of teething came forward, which were found in 57.14% of examined children with hypothyroidism and in 45.92% with diffuse non-toxic goiter.

Thus, the prevalence of dental disease in children with thyroid pathology is high and it demands the development of treatment and prevention programs.

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FREE RADICAL OXIDATION PECULIARITIES AND ANTIOXIDANT PROTECTION PARAMETERS OF THE ORAL FLUID IN CHILDREN WITH CHRONIC CATARRHAL GINGIVITIS WITH UNDERLYING DIABETES MELLITUS

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The research objective was to study free radical oxidation peculiarities and antioxidant protection parameters of the oral fluid in children with chronic catarrhal gingivitis with underlying diabetes mellitus.