

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ  
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



## **МАТЕРІАЛИ**

**105-ї підсумкової науково-практичної конференції  
з міжнародною участю  
професорсько-викладацького персоналу  
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ  
присвяченої 80-річчю БДМУ  
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Матеріали підсумкової 105-ї науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) – Чернівці: Медуніверситет, 2024. – 477 с. іл.

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У збірнику представлені матеріали 105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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**Results.** When collecting the anamnesis data, it was found out from the words of the patients that exacerbations of PTD coincided with exacerbations of chronic pancreatitis, mainly in the spring-autumn period. A significant prevalence of PTD was established: in 75.48% of patients in the research group, which exceeded the indicator in the control group by 1.4 times ( $p=0.015$ ). Chronic generalized catarrhal gingivitis prevailed in the structure of PTD in patients with chronic pancreatitis – in 81.1 % of people, which is in 1.35 times more than in the control group ( $p<0.05$ ). Chronic generalized periodontitis was found in 18.9 % of patients against 10 % in the control group. Chronic generalized periodontitis of the first degree of severity was found in 71.5 % of people with periodontitis, second degree of severity – in 28.6 %. When studying the structural and functional state of the periodontal tissues of patients, an index assessment was performed. The average value of the PMA index in patients was  $(0.37\pm 0.18)$ , which corresponded to the middle degree of inflammation, and exceeded the indicator in the control group by 1.9 times ( $p<0.01$ ). It was established that the average value of CPI in patients was  $(2.7\pm 0.24)$ , while in the control group the indicator was 2.3 times lower ( $p<0.05$ ). The average depth of periodontal pockets was  $(2.8\pm 0.07)$ . Bleeding of the gums was found of 1st - 2nd degrees. Assessment of the hygienic status of the oral cavity showed an unsatisfactory level of hygiene in all patients. The value of the OHI-S index in the patients of the research group was  $(1.77\pm 0.13)$ , which indicates the need for professional hygiene and correction of individual hygiene.

**Conclusions.** A high prevalence of periodontal tissue diseases in patients with accompanying chronic pancreatitis was established – 75.48 %. In the structure of periodontal tissue diseases, inflammatory forms prevailed – 81.1 %. The simultaneous exacerbation of periodontal tissue diseases and chronic pancreatitis indicates comorbidity of the course of these diseases, and requires further research to identify common pathogenetic links of development for individualized prevention and treatment.

**Rozhko V.I.**

## **FEATURES OF THE MORPHOLOGY OF THE ROOT CANALS OF THE LOWER PERMANENT INCISORS BASED ON THE CBCT ANALYSIS**

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**Introduction.** Endodontics is the most complex branch of dentistry. One of the fundamental foundations of successful endodontic treatment is knowledge of root canal anatomy. Undetected and untreated root canals are the main problem in endodontic treatment in 42% of cases. Among the causes of unsuccessful endodontic treatment, a special place is also occupied by diagnostic errors, which are associated with a low level of visualization of the root canal system and knowledge of their morphological features. Answers to most of these questions were provided by cone beam computed tomography (CBCT). This method makes it possible to obtain a three-dimensional image in mutually perpendicular planes: axial, sagittal and coronal. From the point of view of anatomical structure, lower incisors are the most simple and stable. However, these teeth have a wide range of individual characteristics and a complex internal structure, which often causes iatrogenic errors and complications during endodontic treatment.

**The aim of our study** was to evaluate the anatomical and morphological features of the root canals configurations of the permanent incisors of the lower jaw based on CBCT data.

**Material and methods.** We analyzed 50 computer tomograms of the maxillofacial system in patients for the period from 2022 to 2023. Totally, 200 permanent teeth were studied: 100 central and 100 lateral incisors.

**Results.** Our research revealed that in most cases, the lower central incisors are single-rooted with one canal: on the left (31 teeth) in 60% of the examined teeth and on the right (41 teeth) in 64%. The structural variant of one root, two canals and one apical opening occurs in 40% of the 31 teeth, in 36% of the 41 teeth. The presence of an additional channel in the central incisors is

most often found in the variation corresponding to types 2, 3 and 6 according to the Vertucci classification. According to our study, the lateral incisors are more stable and rarely have an additional canal (the 32 teeth in 28% of the examined patients, the 42 teeth in 30% of the patients). In two-channel lateral incisors of the lower jaw, the channels are located vestibulo-lingually. A double-rooted lateral incisor is quite rare; however, we managed to record such a case.

**Conclusions.** According to CBCT, single-root single-channel incisors of the lower jaw are the most common. On average, every third central and lateral incisor is single-rooted, two-channel, which ends with one apical opening. Only 1% of the lateral incisors of the lower jaw have two roots. CBCT is a unique method of studying variants of the root canals anatomy of permanent teeth and for planning successful endodontic treatment.

**Soltys O.M.**

## **OPTIMIZATION OF LOCAL TREATMENT OF PERIODONTAL TISSUE DISEASES WITH A COMPOSITION BASED ON DECAMETHOXINE**

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**Introduction.** The state of the protective and compensatory mechanisms of the periodontal complex determines the degree of prevalence, duration and intensity of inflammatory and dystrophic processes in the periodontium and other similar organs of the oral cavity and nasopharyngeal region. The goal of therapy for patients with the specified pathology is to achieve stable remission, and then long-term stabilization of periodontal tissues, which is accompanied by the absence of an inflammatory process. After the end of the first and second phases of treatment, continuous maintenance therapy is recommended. For the maintenance therapy of periodontal patients, both general and local means are recommended, aimed both at increasing the resistance of the immune system and at preventing inflammatory components in periodontal tissues. To optimize the treatment of inflammatory and inflammatory-dystrophic diseases of periodontal tissues, we recommend an antiseptic composite solution DEPS in the composition of selected optimal doses of individual biologically active drugs that have found clinical use in medicine and veterinary medicine.

**The aim of the study** was improving the scheme of treatment and prevention of periodontal diseases in workers of the woodworking industry of Chernivtsi region, who in the process of professional activity have long-term contact with unfavorable factors of the production environment.

**Materials and methods.** 70 workers of the woodworking industry with diagnosed chronic generalized periodontitis of the I degree were treated (35 people - the main group (A); 35 people - comparison group (B)), age - from 25 to 45 years. To compare the results of laboratory studies, an additional survey of 25 healthy individuals of the same age with an intact periodontium were conducted. They formed the control group (C). Clinical examination of patients was performed according to standart methods: subjective (complaints, medical history, life history) and objective (examination, periodontal indices, determination of the level of gingival attachment). Laboratory methods of research included determination of urease and lysozyme activity in saliva, degree of dysbiosis of oral cavity. As maintenance therapy, patients of the main group were prescribed the proposed composition DEPS.

**Results.** After the treatment, a significant improvement in the hygienic status of patients in both groups was observed, but difference between groups A and B in the indicators of oral hygiene after treatment was no statistically significant ( $p_{A2-B2} > 0.05$ ). There was a significant improvement in periodontal indices after treatment in patients of both groups (PMA index according to C. Parma, bleeding index according to Muhlemann in Cowell I. modification, Russell periodontal index, PSR-test), but the indicators in patients of the main group were significantly better -  $p_{A2-B2} < 0.05$ . In patients of the main group (A) the level of attachment loss decreased by 1.83 times, comparison group (B) - by 1.71 times. The difference in levels of attachment loss after treatment between groups A and B is statistically significant ( $p_{A2-B2} < 0.05$ ).