МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»

М А Т Е Р І А Л И

105-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
присвяченої 80-річчю БДМУ
05, 07, 12 лютого 2024 року

Конференція внесена до Реєстру заходів безперервного професійного розвитку, які проводитимуться у 2024 році № 3700679

Чернівці – 2024

УДК 001:378.12(477.85)
ББК 72:74.58
М 34

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.

ББК 72:74.58

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.

ISBN 978-617-519-077-7

After preparation of the abutment teeth, an impression of the dentition defect was taken with silicone material, a plaster model was cast, which was studied in a parallelogram, the boundaries of the occlusal onlays were outlined with a chemical pencil, and the model was prepared for duplication. After preparing the silicone duplicate, refractory models were cast, on which a wax reproduction of the adhesive structure was made according to the generally accepted method with the reflection of retentive elements. The wax composition was replaced with metal according to the generally accepted method, the cast metal frame was freed from the casting system and machined and sandblasted. Then, a ceramic artificial tooth was fabricated on the intermediate part of the frame, and Maxcem EliteTM double-retention cement was used to fix the structure.

Conclusions. The proposed method provides an increase in the strength and durability of bridges of adhesive fixation to the hard tissues of abutment teeth with a minimum thickness of the retention layer with a simultaneous increase in their aesthetic characteristics.

Tkachyk S.V.

TREATMENT OF FRACTURES OF THE ZYGOMATIC-ORBITAL COMPLEX USING EXTRA-ORAL REPOSITIONING-FIXING DEVICES

Department of Surgical Dentistry and Oral Surgery
Bukovinian State Medical University

Introduction. Fractures of the zygomatic-orbital complex (ZOC) are one of the main causes of hospitalization into the maxillofacial department with fractures of bones of the middle facial area. Patients with this pathology constitute from 2,4% to 24% of the total number of in-patients. In recent decade, the number of victims and severity of injuries of the facial skeleton have increased.

The aim of the study. To increase the effectiveness of treatment of patients with fractures of the zygomatic-orbital complex by means of improvement of diagnostic methods and development of a new surgical method of reposition and fixation of bone fragments.

Materials and methods. Case histories, clinical, radiological, rheographic, electromyographic, electroodontodiagnostic and statistical methods.

Results. Late referral for specialized medical aid occurs rather often in clinical practice (within the period of more than 10 days). In most cases, the main reasons of late referral are untimely and inadequate diagnostics of this injury. Concomitant pathology from the side of the central nervous system sometimes prevents surgery in the early period after getting trauma.

With the aim to improve the quality of diagnostics of ZOC fractures, the development of additional objective methods of examination of this group of patients remains rather relevant. It will enable to perform objective monitoring of treatment and evaluate the results obtained.

Modern methods of treatment of ZOC fractures are divided into surgical, surgical-orthopedic and orthopedic. Nowadays, in the majority of cases surgical methods of reposition of bone fragments are recommended followed by their fixation by means of a bone wire suture or a bone plate with screws.

The main disadvantages of the surgical fixation are extensive detachment of the soft tissues and periosteum in the area of fracture. It leads to additional injury and causes the necessity to perform additional surgery in order to remove fixators. In case an injury happened long ago, one-step/one-moment reposition of bone fragments is not always possible.

Due to this fact, the use of combined (surgical-orthopedic) methods of treatment is relevant. Their advantages may include extra-focal nature of fixation, simple installation and absence of the necessity of repeated hospitalization to remove fixators. Nevertheless, the design of most such devices is quite piled up and uncomfortable, and their constituent parts are complicated to make. Choosing a support point for repositioning is not always acceptable.

Conclusions. Improvement of extra-oral repositioning-fixing devices, indications and contraindications for the use of surgical-orthopedic method of treatment of ZOC fractures depending on the character of injury and the term of its limitation will enable to improve the quality of medical aid and make the period of social rehabilitation shorter.