

MIKROBIOTSENOZ POLOSTI RTA UBOLNIX DETEY S VROJDENNIMI DEFEKTAMI NEBA

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Rezultati uranoplastiki v znachitelnoy stepeni zavisyat ot funktsionalno-metabolicheskoy aktivnosti tkaney rotovoy polosti. Mikrobiotsenoz polosti rta yavlyaetsya vajneyshim pokazatelem funktsionalno-metabolicheskoy aktivnosti tkaney rotovoy polosti. [1,7]. Odnoy iz naibolee znachimix prichin oslojneniy yavlyaetsya nagnoenie rani, privodyashee k chastichnomu ili polnomu rasxojudeniyu shvov rubtsovoe zajivlenie posleoperatsionnoy rani sposobstvuet, v svoyu ochered nebno-glotochnoy nedostatochnosti. [1,4,5,6,8]. Vrojdeniyy defekt neba vlechaet za soboy narushenie ryada funktsiy i sistem organizma: tak, ostraya respiratornaya virusnaya infektsiya vstrechaetsya u 61% takix bolnix, retsidiviruyushiy xronicheskiy bronxit, revmatizm, anemiya, gipovitaminoz i drugie zabolevaniya u – 76,1% eto znachitelno uxudshaet rezultati xirurgicheskogo lecheniya rasshelini neba. [9,10,11,12,13].

Obrazovanie posleoperatsionnix defektov mnogie avtori svyazivayut s pogreshnostyami v operativnoy taktike i nesovershenstvom metodik operativnogo lecheniya, provedeniyam pervichnoy uranoplastiki bez ucheta sostoyaniya rezistentnosti organizma rebenka. Vajnyuyu rol igraet obespechenie effektivnogo uxoda za ranoy polosti rta posle operatsii. [14,15,16,17].

TSel issledovaniya.

Obosnovat effektivnost primeneniya probiotikov u detey s vrojdennoy rasshelinoy verxney gubi i neba do i posle uranoplastiki dlya profilaktiki i kompleksnom lechenii posleoperatsionnix oslojneniy.

Materiali i metodi issledovaniya: obsledovano 3 grupp detey posle uranoplastiki s primeneniem traditsionnogo posleoperatsionnogo uxoda za ranoy(p-20) i traditsionnogo posleoperatsionnogo uxoda za ranoy s primeneniem probiotikov Baktolor (p-20) i Florbiolakt (p-20) v vide oroshenie i prinimat vnutr do i posle operatsii.

Rezultati: sovremenniy etap razvitiya stomatologii xarakterizuetsya vnedreniem novix effektivnix mer profilaktiki i diagnostiki, chto stalo vozmozhnosti blagodarya otkritiyam, sdelannim pri izuchenii mexanizmov formirovaniya patologicheskix sostoyanii. V znachitelnoy mere eto obuslovljeno intensivnim razvitiem meditsinoy mikrobiologii, molekulyarnoy biologii i genetiki.

Poluchennye dannie pri etix issledovaniyax privedeni v tabl. №1. Iz tablitsy vidno, chto v norme u zdorovykh detey flora polosti rta dovolno raznoobrazna. Pri etom v anaerobnoy gruppe mikrobov preobladayut laktobakterii ix kolichestvo sostavlyayet $lg /4.85 \pm 0.4/$ KOE/ ml. V fakultativnoy gruppe prevaliruyushee kolichestvo prinadlejit streptokokkami, pri etom vedushee polojenie zanimayut *Str.salivarius*. Gruppa gramotritsatelnix mikrobov takix kak esherixiy, protey i klebsielli visevayutsya v neznachitelnix kolichestvax.

Naryadu s etimi issledovaniyami nami takje provedeni kolichestvennie i kachestvennie issledovaniya flori rotovoy jidkosti u detey bolnix vrojdennoy rasshelinoy guby i neba do operatsii. Poluchennye dannie pri etix issledovaniyax predstavleni v tabl. №2. Kak vidno iz tablitsi v mikroekologii polosti rta u bolnix detey do operatsii, nablyudaetsya sindrom povishennogo rosta mikrobov. Tak, v anaerobnoy gruppe mikrobov, otmechaetsya ix dostovernoy snijenie, osobenno eto virajeno u laktobakterii. V to je vremya v fakultativnoy gruppe mikrobov proisxodit sushestvennie sdvigi vo flore polosti rta u etix detey v storonu vozrastaniya. Pri etom osobenno nastorajivaet rost patogennix stafilokokkov, tak kak imenno eto kultura obladaet bolshim naborom fermentov patogennosti kotorie vidimo i budet opredelyat monitoring sostoyaniya polosti rta.

Tablitsa №1.

Xarakteristika flori rotovoy jidkosti u detey bolnix vrojdennoy rasshelinoy gubi i neba

№	Gruppa mikrobov	Norma	U bolnykh do operatsii
1.	Obshee kolichestvo anaerobov	6.10 ± 0.4	$4.15 \pm 0.2^*$
2.	<i>Lactobactillus spp.</i>	5.0 ± 0.3	2.0 ± 0.1
3.	<i>Peptococcus</i>	4.15 ± 0.2	$6.10 \pm 0.3^*$
4.	Obshee kolichestvo aerobov	5.65 ± 0.3	7.30 ± 0.4
5.	<i>S.aureus</i>	0	1.60 ± 0.1
6.	<i>S.epidermidis</i>	4.10 ± 0.2	5.30 ± 0.3
7.	<i>S.salivarius</i>	4.85 ± 0.3	2.10 ± 0.1
8.	<i>S. mutans</i>	2.30 ± 0.1	3.45 ± 0.2
9.	<i>S.mitis</i>	2.60 ± 0.1	$4.30 \pm 0.2^*$
10.	<i>E.coli</i>	1.10 ± 0.1	2.30 ± 0.1
11.	<i>Proteus</i>	1.60 ± 0.1	$3.45 \pm 0.2^*$
12.	<i>Klebsiella</i>	1.0 ± 0.1	2.15 ± 0.2
13.	<i>Candida</i>	1.10 ± 0.1	$3.10 \pm 0.2^*$

14.	<i>Actinomyces</i>	1.30 ± 0.1	2.45 ± 0.1
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Primechaenie * - dostovernost dannykh k grupe kontrolya (*-P<0,05)

Naryadu s etimi mikrobiologicheskimi issledovaniyami, nami provedeno izuchenie u odnix i tex je bolnix detyax sostoyanie faktora porajennogo uchastka. Poluchennie dannyx etix issledovaniy provedeni v tablitsa №.2, iz kotoroy vidno, chto zdes flora takje raznoobrazna i visevayutsya kak grampolozitel'naya, tak i gramotritsatelnaya flora i gribi roda *Candida*. Pri etom, kak pravilo, chashe vsego visevayutsya ix assotsiatsii. Pri analize chastoti visevaemosti i vstrechaemosti mikrobov okazalos *Str.pyogenes* (90%) i samoe nizkoe chastotu sostavili shtammi *enterobacter* (20%).

Sleduyushuyu grupp nashix issledovaniy sostavili bolnie deti s vrojdennoy rasshelinoj gubi i neba, kotorim v usloviyax statsionara provedena tselenapravlen'naya terapiya.

Dlya etogo bolnie deti bili ob'edineni v 3-x gruppax:

1. Pervuyu grupp sostavili 20 bolnix detey kotorim provedena traditsionnaya terapiya.

2. Vtoruyu grupp sostavili 20 bolnix detey, kotorim krome traditsionnoy terapii proveli spetsialnoe lecheniya putem ispolzovaniya probiotik Florbiolact dlya orosheniya polosti rta i priema vnutr.

3. V tretyu grupp voshli 20 bolnix detey kotorim, probiotik Bactolor ispolzovali dlya orosheniya polosti rta dlya priema vnutr peros.

Mikrobiologicheskie issledovanie provedennie v pervoy grupe bolnix kotorie poluchali traditsionnuyu terapiyu cherez 3 sutok predstavleni v tabl. №3. Iz kotoroy vidno, chto kolichestvennie sdvigi vo flore polosti rta ne tolko ne uluchshilis, a naoborot uxudshilis, eto kosnulos kak grampolozitel'noy, tak i gramotritsatel'noy flori. Eti izmeneniya mojno traktovat, kak sindrom izbitochnogo rosta mikrobov, to yest proizoshlo razvitie disbioza. Po vidimomu eto uxudshenie svyazano s operatsionnim stressom u bolnogo, a takje razvitiem posleoperatsionnogo vospaleniya polosti rta.

U dannoy grupe bolnix privedena mikrobiologicheskie issledovaniya cherez 3 i 7 sutok posle operativnogo vmeshatelstva. Poluchennie dannie pri etix issledovaniyax provedeni v tablitsax 3.Iz tablitsi, gde predstavleni dannie mikrobiologicheskix issledovaniya provedennie na 3-sutki posle operatsii. Iz kotoroy vidno, chto provedennaya terapiya s ispolzovaniem Florbiolast v vide orosheniya v tselom okazala pozitivnoe vliyanie, no eto vliyanie bolshie otrazilos na grampolozitel'noy flore i pochni ne kosnulis gramotritsatel'noy flory i gribov. [18,19,20].

V to je vreme u bolnix kotorim provedena oroshenie polosti rta probiotikom Bactolor takje privedo k pozitivnim sdvigam, xotya eti izmeneniya bolshe kosnulis gramotritsatelnoy flori i pochtu ne zatronuli grampolojitelnoy floru.

Odnako, u etix je bolnix poluchavshix spetsialnoe lechenie orosheniem polosti rta probiotikami Bactolor i Florbiolast tolko na 7 sutki posle operatsii pokazali virajennie pozitivnie sdvigi, xotya sleduet zametit, mi i zdes vidim odnotipnie sdvigi ot ispolzovaniya probiotikov. Tak, Florbiolast dostoverno uluchshil sostoyanie v polosti rta grampolojitelnyx mikrobov, togda kak Bactolor uluchshil sostoyanie gramotritsatelnoy flori. U etix je bolnix, t.e. na 3-sutki posle operatsii, kotorie poluchali spetsialnoe lechenie kak vidno iz tablitsi proizoshli pozitivnie sdvigi vo flore polosti rta, po sravnenii s bolnimi poluchavshimi traditsionnoe lechenie no eti sdvigi fakticheski nedostoverni. [21,22].

V tretej gruppe bolnix poluchivshix posle operatsii, kompleksnoe lechenie takje na 3 sutki, otmecheni pozitivnie sdvigi vo vsej flore polosti rta, odnako eti sdvigi yeshe daleki ot kontrolnix pokazateley.

Vo vsex trex gruppax bolnix s vrojdennoy rasshelinoj gubi i neba kotoryim okazana terapevticheskaya pomosh nami provedeni mikrobiologicheskie issledovaniya na 7-sutki posle operatsii.

Tablitsa №3.

Sravnitel'naya xarakteristika flory polosti rta u detey s vrojdennoy rasshelinoj gubi i neba do i posle operatsii na 3-sutki

№	Gruppy mikrobov	Kolichestvo mikrobov v 1 ml slyuny(lg /M±m/KOE/ml)				
		Kontrol	U bolnyx do operatsii	U bolnyx posle operatsii na 3 sutki		
				Tradits. lech	Spets. lech	Kompleks .lech
1.	Obshee kolichestvo anaerobov	6.10 ± 0.4	4.15±0.2 *	3.30 ± 0.2	3.60 ± 0.2	5.10 ±0.3**
2.	<i>Lactobactillus spp.</i>	5.0 ± 0.3	2.0 ± 0.1*	1.30 ± 0.1	3.0 ± 0.2	4.0 ± 0.2
3.	<i>Peptococcus</i>	4.15 ± 0.2	6.10 ± 0.3	7.15 ± 0.5	6.15 ± 0.4	6.0 ± 0.4
4.	Obshee kolichestvo aerobov	5.65 ± 0.3	7.30±0.4 *	8.30±0.6 *	7.15 ± 0.5	6.15 ± 0.3

5.	<i>S.aureus</i>	0	1.60 ± 0.1	2.60 ± 0.1	3.0 ± 0.2	2.60 ± 0.1
6.	<i>S.epidermidis</i>	4.10 ± 0.2	5.30 ± 0.3	6.10 ± 0.4	5.15 ± 0.3	5.0 ± 0.3
7.	<i>S.salivarius</i>	4.85 ± 0.3	2.10 ± 0.1	3.10 ± 0.2	4.0 ± 0.2	4.30 ± 0.2
8.	<i>S. mutans</i>	2.30 ± 0.1	3.45 ± 0.2	3.0 ± 0.2	3.15 ± 0.2	3.0 ± 0.2
9.	<i>S.mitis</i>	2.60 ± 0.2	4.30±0.2 *	5.11±0.3 *	4.60 ± 0.2	4.0 ± 0.2
10.	<i>E.coli</i>	1.10 ± 0.1	2.30 ± 0.1	3.0 ±0,1**	2.0 ± 0.1	2.30 ± 0.1*
11.	<i>Proteus</i>	1.60 ± 0.1	3.45 ± 0.2	4.0 ±0.2*	2.60 ± 0.1	2.0 ± 0.1
12.	<i>Klebsiella</i>	1.0 ± 0.1	2.15 ± 0.2	2.30 ± 0.1	1.80 ± 0.1	2.0 ± 0.1 *
13.	<i>Candida</i>	1.10 ± 0.1	3.10 ± 0.2	5.10 ± 0.3	4.0±0.3* *	3.11 ± 0.2*
14.	<i>Actinomyces</i>	1.30 ± 0.1	1.60 ± 0.1	3.15 ± 0.2	2.60 ± 0.2	2.0 ± 0.1

Primechaenie * - dostovernost dannykh k grappe kontrolya (*-P<0,05;** - P<0,01
Dostovernost dannykh mkejdu vozrastnymi gruppami (*-P<0,05)

Tablitsa №4

Sravnitel'naya xarakteristika flori polosti rta u detey s vrojdennoy rasshelinoy gubi i neba, do i posle operatsii na 7-sutki

№	Gruppy mikrobov	Kolichestvo mikrobov v 1 ml slyuny (lg /M±m/KOE/ml				
		Kontrol	U bolnyx do operatsii	U bolnyx posle operatsii na 7 sutki		
				Tradits. lech	Spets. lech	Kompl. lech.
1.	Obshee kolichestvo anaerobov	6.10 ± 0.4	4.15±0.2 *	4.60 ± 0.2	5.10 ± 0.3	5.60±0.4 *
2.	<i>Lactobactillus spp.</i>	5.0 ± 0.3	2.0±0.1* *	3.11 ± 0.2	4.0 ± 0.2	4.10 ± 0.3
3.	<i>Peptococcus</i>	4.15 ± 0.2	6.10±0.3 *	5.80 ± 0.3	5.10 ± 0.3	4.60 ± 0.2
4.	Obshee kolichestvo aerobov	5.65 ± 0.3	7.30±0.4 *	7.10 ± 0.5	6.70±0.4 *	6.15 ± 0.5
5.	<i>S.aureus</i>	0	1.60±0.1 *	1.20±0.1 *	0	0
6.	<i>S.epidermidis</i>	4.10 ± 0.2	5.30 ± 0.3	5.60 ± 0.3	5.10 ± 0.3	4.60 ± 0.2
7.	<i>S.salivarius</i>	4.85 ± 0.3	2.10 ± 0.1	3.0 ± 0.2	4.0 ± 0.2	4.30 ± 0.3
8.	<i>S. mutans</i>	2.30 ± 0.1	3.45 ± 0.2	4.0 ± 0.2	3.30 ± 0.2	3.0 ± 0.2
9.	<i>S.mitis</i>	2.60 ± 0.2	4.30 ± 0.2	3.60 ± 0.3	3.10 ± 0.2	3.0 ± 0.1
10.	<i>E.coli</i>	1.10 ± 0.1	2.30 ± 0.1	2.60 ± 0.2	2.0 ± 0.1	1.60 ± 0.1
11.	<i>Proteus</i>	1.60 ± 0.1	3.45±0.2 *	3.10±0.2 *	2.60 ± 0.1	2.30 ± 0.1
12.	<i>Klebsiella</i>	1.0 ± 0.1	2.15 ± 0.2	2.30 ± 0.1	2.0 ± 0.1	1.80 ± 0.1

13	<i>Candida</i>	1.10 ± 0.1	3.10±0.2 *	4.15±.3*	3.30±0.2 *	2.60 ± 0.1
14	<i>Actinomyces</i>	1.30 ± 0.1	1.60 ± 0.1	1.85 ± 0.1	2.0 ± 0.1	2.0 ± 0.1

Primechaenie * - dostovernost dannykh k grupe kontrolya (*-P<0,05;**-

P<0,01);

Dostovernost dannykh mejdju vozrastnimi gruppami (*-P<0,05)

Выводы:

1. Местное и внутр применение probiotikov Bactolor i Florbiolakt posle uranoplastiki sposobstvuet rannemu snizheniyu mestnix klinicheskix priznakov vospaleniya v rane, tem samym sposobstvuet zajivleniyu rani.
2. Issledovanie myagkix tkaney neba u detey s vrojdennoy rasshelinoy verxney gubi i neba posle operatsii pokazalo, chto pri primeneniye probiotikov Bactolor i Florbiolakt posle uranoplastiki sposobstvuet uluchsheniyu regeneratsii v bolee optimalnie sroki, chem pri traditsionnom posleoperatsionnom uxode.

Spisok literaturi

1. Amanullaev R.A. Chastota rojdaemosti detey s vrojdennoy rasshelinoy verxney gubi i neba v krupnix regionax Uzbekistana i vrojdenneya i nasledstvennaya patologiya golovi, litsa i shei u detey / R.A. Amanullaev // Aktualnye voprosi kompleksnogo lecheniya. — M., 2006. - S. 14-15.

2. Kurbanova S.Yu., Xamidjanova Z.S., Shomurotova R.K., Ergasheva Z.N. Xarakteristika mikroflori bioptata flegmon chelyustno-litsevoy oblasti u detey. *Sovremennaya meditsina: Novie podxodi i aktualnie issledovaniya*. 2018g. Maxachkala. S. 245-251.

3. Kurbanova S.Yu., Shomurotova R.K., Kuldashev A.A. Rezultati mikrobiologicheskix issledovaniy poluchennogo materiala s primeneniem traditsionnogo i netraditsionnogo uxoda za ranoy posle uranoplastiki *Vestnik Yujno-Kazaxstanskiy meditsinskiy akademii. Respublikanskiy nauchniy jurnal*. №1.(85)2019.

4. Kakhramonovich, Turdiev Pakhlavon. "Epidemiology of Psychiatric Disorders." *Texas Journal of Medical Science* 12 (2022): 102-105.

5. Kurbanova, S. Yu, et al. "EFFICIENCY OF DISINFECTION OF DENTAL INSTRUMENTS AND PRODUCTS CONTAMINATED WITH VARIOUS MICROORGANISMS." *Oriental Journal of Medicine and Pharmacology* 2.2 (2022): 13-19.

6. Rakhimov, Z. K., et al. "MICROORGANISMS IN LOWER JAW FRACTURES IN SURVEED PATIENTS." *Journal of new century innovations* 16.3 (2022): 146-149.

7. Sulaymonova, Gulnora Tursunaliyeva, Ruxsora Kurkmasovna Shomuratova, and Feruza Nabieva Axmedova. "Xarakteristika izmeneniy slizistoy obolochki i mikroflori polosti rta pri koronavirusnoy infektsii." *Science and education: problems and innovations*. 2021.

8. Isomiddinovich, Sanoev Zafar, et al. "Toxicological Characteristics Of Skimmianine Under Chronic Administration In White Rats." *European Journal of Molecular & Clinical Medicine* 8.2 (2021): 302-307.

9. Muxamedov, Ilaman Muxamedovich, et al. "Meditsinskaya mikrobiologiya, virusologiya i immunologiya." (2011).

10. Almatov, B. I., N. A. Nuraliev, and S. Yu. Kurbanova. "Posezonnaya dinamika izmeneniya mikrobnogo sostava vodi nekotorykh vodoxranilish Uzbekistana." *Mikrobiologichnyi jurnal* 78, № 2 (2016): 95-102.

11. Orinbaeva, Zuxra Naurizbaeva, Nodira Turgunovna Yodgorova, and Ijobat Abdulbosid Kizi Maxmudova. "Osobennosti laboratornoy diagnostiki VICH-infektsii i gepatita S (obzor literaturi)." *Biologiya i integrativnaya meditsina* 1 (2018): 16-36.

12. Almatov, B. I., N. A. Nuraliev, and S. U. Kurbanova. "Seasonal Dynamics of Mikrobial Composition Variation from Waters of Some Reservoirs of Uzbekistan." *Mikrobiologichnyi Zhurnal (Kiev, Ukraine: 1993)* 78.2 (2016): 95-102.

13. Usanova, Soadat, et al. "Adaptive-Compensatory Changes in the Oral Fluid at Various Degrees of Adentia." *Annals of the Romanian Society for Cell Biology* (2021): 7030-7034.

14. Seytnazarov, M. M., S. Y. Kurbanova, and F. N. Akhmedova. "Features of prevention of infections associated with the provision of dental care." *International journal of Socio-economic and environmental outlook. epra* 7.5 (2020): 30-32.

15. Xudanov, B.O., et al. "Potreblenie shkolnikami bezalkogolnix napitkov i ix erozivniy potentsial (po dannim gravimetrii in vitro)." *Stomatologiya detskogo vozrasta i profilaktika* 19.2 (2019): 25-29.

16. Xudanov B., et al. "TISH PASTALARI TARKIBIDAGI ERKIN FTOR IONLARI KONTSENTRATSIIYASINING KARIIES PROFILAKTIK SAMARADORLIGI." *Stomatologiya* 1.1 (74) (2019): 11-13.

17. Xalilov, I., et al. "Zamonaviy tish yuvish pastalarining og‘iz bo‘shlig‘i a‘zolari kasalliklari profilaktikasi va ularni davolashdagi ahamiyati." *Stomatologiya* 1.4 (73) (2018): 52-56.

18. Xudanov, B. O., et al. "PRIMENENIE TEXNOLOGII FLYUORESTSENTSII V TSELYaX PROFILAKTIKI STOMATOLOGICHESKIX

ZABOLEVANIY V PRAKTIKE ShKOLNOGO STOMATOLOGA." *AKTUALNIE PROBLEMY STOMATOLOGII DETSKOGO VOZRATA*. 2016.

19. Turaev, K. I., O‘. Alimov, and B. N. Xabilov. "REZULTATY MIKROBIOLOGICHESKIX ISSLEDOVANIY PRI ULUCHShENII LEChENIYa XRONICHESKOGO PERIODONTITA U DETEY." *Journal of new century innovations* 16.3 (2022): 156-159.

20. Seytnazarov, M. M., S. Yu. Kurbanova, and G. T. Sulaymonova. "Osobennosti profilaktiki infektsiy, svyazannix s okazaniem stomatologicheskoy pomoshi." *Sbornik materialov IX Mejdunarodnoy nauchno-prakticheskoy konferentsii «Proriteti farmatsii i stomatologii: ot teorii k praktike*. Vol. 27.

21. Kurbanova, S. Yu., et al. "Xarakteristika mikroflori bioptata flegmon chelyustno-litsevoy oblasti u detey." *SOVREMENNAYa MEDITSINA: NOVIE PODXODI I AKTUALNIE ISSLEDOVANIYa*. 2018.

22. Sattarovna, Avezova Guloyim, et al. "Factors, Leading To Chronic Alcoholism." *NVEO-NATURAL VOLATILES & eSSENTIAL OILS Journal| NVEO* (2021): 13765-13770