

PROBIOTICS IN THE COMPLEX TREATMENT OF PATIENTS WITH FACIAL FURUNCLES

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Abstract. The problem of purulent infection in maxillofacial surgery has been and a remains relevant, which is explained by an increase in the number of patients with inflammatory processes in the maxillofacial region, an increase in the number of cases of severe generalized infections.

Key words: purulent-inflammatory processes, Bactalor, Florbiolact, mediastinitis, boils, carbuncles, furuncles.

Despite the widespread introduction into clinical practice of such methods of treatment as local and general surgery, the use of antibacterial drugs and chemotherapeutic agents, detoxification and corrective therapy, therapy of concomitant diseases, modern physiotherapeutic agents, inflammatory diseases of the maxillofacial region continue to pose a threat to health and human life.

There is also a change in the clinical picture of the course of acute and chronic inflammatory diseases in the maxillofacial region, an increase in the number of complications such as sepsis, mediastinitis, brain abscess, thrombophlebitis of the facial veins and cavernous sinus, bacterial shock. This is accompanied by a change in the virulence of microflora, the emergence of antibiotic-resistant and antibiotic-dependent strains of microorganisms, a decrease in immune defense, which intensifies against the background of dysbiosis of the gastrointestinal tract during antibacterial treatment of purulent-inflammatory diseases of the maxillofacial region, which complicates the course of the disease and complicates the treatment of patients.

Existing diagnostic methods, including clinical ones, do not always allow adequate monitoring of the pathological process, which does not give the doctor a timely, effective correction of the patient's treatment. This applies to microbiological, laboratory diagnostic methods.

These patterns in the course of purulent-inflammatory processes in the maxillofacial region and their clinical laboratory aspects indicate the need to improve existing methods of treatment and diagnosis. All of the above suggests that the problem of infection in patients with purulent-inflammatory diseases of the maxillofacial region and neck remains relevant. This makes it necessary to search for new effective treatments that affect various links in the pathogenesis of inflammation and predict the course of the disease.

However, along with the development of diagnostic methods, it seems relevant to further develop a complex therapy of boils and carbuncles of the maxillofacial region with the inclusion of factors that have their own specific focus both on individual pathogenetic links of purulent inflammation, and on the pathological process and the patient's body as a whole. This creates more favorable conditions for recovery. It follows from this that medicinal products must be compatible with the macroorganism and must have a minimum of contraindications. As such, various biologically active compounds can be considered that have a positive multifactorial effect, both on the pathological process and on the patient's body as a whole.

For this purpose, in our work we used probiotic preparations "Bactalor" and "Florbiolact".

Objective of the study: To substantiate the effectiveness of the use of probiotics in the

complex treatment of boils of the maxillofacial region

Research objectives:

To carry out a comparative analysis of microbiological studies using probiotics "Bactolor" and "Florbiolact" after opening a purulent focus.

Research materials:

Examined 3 groups of children after after the opening of purulent foci

I-group. With the use of traditional postoperative wound care (n-20), II-group of traditional postoperative wound care using probiotics Bactolor (n-20) and III-group Florbiolact (n-20) in the form of washing and ingestion after surgery.

Research methods: clinical, immunological and microbiological (a generally accepted bacteriological method with the study of the cultural and biological properties of isolated microorganisms).

The microflora of a purulent focus was studied in patients with boils of the maxillofacial region using probiotics "Bactolor" and "Florbiolact". In patients with boils of the maxillofacial region after surgery, a significant shift in the qualitative composition of the microflora towards pathogenic species was revealed, as well as quantitative changes in the normal stabilizing microflora of a purulent wound. The use of probiotics "Bactolor" and "Florbiolact" in the form of ingestion and washing the wound in patients after surgery had an antagonistic effect against opportunistic and pathogenic microorganisms, including staphylococci, Proteus and enteropathogenic Escherichia coli and contributed to the restoration of bacteriocenosis of the severity of purulent wounds the inflammatory process caused by dysbiosis, which creates optimal conditions for wound healing.

Conclusions:

1. Comparative analysis of the effectiveness of different antiseptic drugs for treating purulent wounds (furacilin, chlorhexidine, dioxidin, levomekol, dioxycol, miramistin) with the probiotic Bactolor, based on the results of a microbiological study, made it possible to identify the most effective means for treating purulent wounds in the maxillofacial area.

2. The use of the developed therapeutic and diagnostic technique for treating purulent wounds of the maxillofacial region in the complex treatment of patients with boils of the maxillofacial region allows to reduce the time of their treatment in patients with mild severity of the disease - by an average of 1.5 days, in patients with an average severity - for 3 days.

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