years.Obtained results and discussion: Appearance of complaints of 12 patients (50%) was associated with stressful situations, 8 patients (19.2%) - with prosthetics, 2 patients (4.8%) - with concomitant diseases, 1 patient (2, 4%) - with a previous viral disease or recurrence of herpes, 1 patient (2.4%) associated the appearance of pain in the tongue due to illness or death of relatives due to cancer of the tongue or oral mucosa. When complaints were detected, carcinophobia was established in 87.5% of patients.

When examining the cavity, we identified a number of local risk factors - trauma to the oral mucosa with sharp edges of the teeth (33% of patients), tartar deposits (34%), irrational designs of prostheses (33%), the phenomenon of galvanism (10%), allergic reactions to bases of prostheses made of acrylic plastic (5%), a decrease in the interalveolar distance with increased abrasion of teeth (46%), complete or partial loss of teeth (67%), dysfunction of the temporomandibular joint (28%), parafunction of the masticatory muscles (11%).

Conclusions: When examining the cavity, we identified a number of local risk factors - trauma to the oral mucosa with sharp edges of the teeth (33% of patients), tartar deposits (34%), irrational designs of prostheses (33%), the phenomenon of galvanism (10%), allergic reactions to bases of prostheses made of acrylic plastic (5%), a decrease in the interalveolar distance with increased abrasion of teeth (46%), complete or partial loss of teeth (67%), dysfunction of the temporomandibular joint (28%), parafunction of the masticatory muscles (11%).

PREVENTION OF ATROPHY OF THE ALVEOLAR PROCESS OF THE JAW BY FILLING THE HOLE WITH A DEMINERALIZED ALLOGRAFT USING MECHANICALLY ACTIVATED CALCIUM GLUCONATE IN THE POSTOPERATIVE PERIOD.

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Abstract. One of the most frequent operations in surgical dentistry is the extraction of teeth, which leads to defects in the dentition that require orthopedic treatment. At the same time, the natural atrophy of the alveolar process that occurs at the site of the extracted tooth complicates the process of orthopedic treatment, especially when it is necessary to use implants or a removable denture Therefore, there is a problem of maintaining the height of the alveolar ridge after tooth extraction by preventing its atrophy

Aim of the study. To prevent atrophy of the alveolar process of the jaw after tooth extraction by filling the socket with a demineralized allograft using mechanically activated calcium gluconate in the postoperative period.

Materials and methods. A total of 50 patients were under observation (men - 25, women - 25), who underwent 50 operations to remove teeth, 30% of patients were somatically healthy, 25% - with diseases of the cardiovascular system in remission, 35% - with diseases of the gastrointestinal tract in remission and 10% with diseases of the broncho-pulmonary system in remission. The average age of patients was 40 years.

Results. The results of the examination of the 1st main group showed that in none of the cases did the general condition of the patients suffer. day, as well as swelling and hyperemia of the mucosa in the area of the extracted tooth. Regional lymph nodes are not enlarged. It should be noted that in 3 out of 50 tooth extractions, which accounted for 6% of the total number of extractions, a complication was observed in the form of a partial rejection of the allograft fragment 10 days after the operation. After removal of the torn allograft site, healing proceeded without any complications. No other post-extraction complications were observed.

Conclusions. Clinical observations have shown that in order to prevent atrophy of the alveolar process of the jaw after tooth extraction, it is advisable to fill the hole with a crushed demineralized allograft. In order to optimize bone formation, patients need oral intake of mechanically activated calcium gluconate at a dose of 1.0 grams three times a day for a month and incoherent infrared therapy

ДЕНТАЛЬНОЙ ИМПЛАНТАЦИИ ДЛЯ СОХРАНЕНИИ ЗУБО-АЛЬВЕОЛЯРНОГО СЕГМЕНТА ВЕРХНЕЙ ЧЕЛЮСТИ С ПОМОЩЬЮ МЕТОДА “ROOT MEMBRANE”

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Протезирование вторичных адентий, которые длительное время присутствуют в верхней и нижней челюстях, является одной из актуальных проблем стоящих перед стоматологами. Одним из современных методов устранения этой проблемы, является дентальная имплантология. Одним из сдерживающих факторов для широкого распространения имплантации является недостаточный объем костной ткани для установки имплантата. Процесс дентальной имплантации во фронтальную часть верхней челюсти, которая на