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EXPERIENCE WITH THE USE OF BACTERIAL LYSATES IN MODERN MEDICINE

Tolibova M.I.

Bukhara state medical institute

Among drugs that stimulate immune processes and specifically activate immunocompetent cells (T- and B-lymphocytes) and additional immunity factors (macrophages, secretory immunoglobulins, etc.). There are immunomodulators of microbial origin containing lipopolysaccharide complexes (prodigiosan, pyrogenal), bacterial ribosomes in combination with membrane proteoglycans (ribomunal). Among immunocorrective drugs, immunomodulators of microbial origin are of interest, which are divided into three main groups - purified bacterial lysates, immunostimulating membrane fractions and bacterial ribosomes in combination with membrane fractions.

Specially created for dental practice, Imudon (manufactured by the international pharmaceutical company Solvay Pharma) belongs to the group of purified bacterial lysates. The drug is made from a mixture of lysates of strains of the most common bacterial and fungal pathogens of pathological processes in the oral cavity. Among them are *Lactobacillus acidophilus*, *Str. aureus*, *Kl.pneumoniae*, *Corinobacterium*, *Pseudodiphthericum*, *Candida albicans* and others. The drug is a polyvalent complex of antigens that can cause the formation of antibodies. Imudon increases FAN, increases the content of lysozyme in saliva, stimulates the formation of immunocompetent cells and the amount of sIgA. Grigoryants L.I. and Badalyan V.A. (2000) recommend taking up to 10 tablets per day for an acute process in the oral cavity with an average duration of up to 10

days. In chronic diseases - up to 6 tablets per day for 10-20 days, for the prevention and treatment of postoperative complications

140 The introduction of IRS-19 through the mucous membranes of the upper respiratory tract is justified by the anatomical, physiological and immunological conditions in the nasopharynx. Due to these anatomical and physiological conditions, IRS-19 can penetrate extremely quickly and intensively through the mucosa into the body, thereby causing an immediate mobilization of defense mechanisms in the mucosa and triggering the effective production of antibodies.

The local immune system responsible for protection against infection on the surface of the mucous membranes can also be subject to a wide variety of disorders. These disorders can be either primary or secondary. Along with primary disorders of the immune system, secondary disorders are the most common cause of chronic recurrent respiratory tract infections in children. The risk of infection is particularly increased due to the fact that the factors responsible for impaired mucociliary defenses also impair the immune system. This applies to both external factors and infectious pathogenic microorganisms, which include bacteria and viruses.

When immunity is deregulated under the action of a bacterium, suppression of the immune system can occur, due to both secretion products and endotoxins released during bacteriolysis. As a result of the use of IRS-19 in patients with diseases of the upper respiratory tract and certain dental diseases, a number of authors have achieved a high therapeutic effect and reduced the development of disease relapses. Since the drug IRS-19 has a good therapeutic effect in diseases of the upper respiratory tract and ENT organs, it would be advisable to investigate the effect of this drug in diseases of the oral cavity, in particular, odontogenic periostitis of the jaws in children, because diseases of the oral cavity are caused by the same microorganisms that occur and for the diseases mentioned above. In addition, children after surgery in the oral cavity refuse to suck imudon. In the available literature, we did not find information on the study of the effectiveness of the IRS-19 drug in the treatment of odontogenic periostitis of the jaws. In this regard, the study of the effectiveness of the drug IRS-19 in children with odontogenic periostitis of the jaws was of particular interest to us.

Conclusion: Being very active physiologically, it forms the entrance gate for most infectious agents and serves as a kind of collection point for them in case of congenital or acquired immune deficiency. Due to the indicated anatomical and physiological conditions, IRS-19 can penetrate the mucous membrane extremely quickly and intensively, thereby causing an immediate mobilization of the protective mechanisms in it, triggering the effective production of antibodies. Only with the help of surgical intervention can the damaging factor itself be eliminated and, thus, the body's defenses be given the opportunity to recover.

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THE ORAL MUCOSA CORONAVIRUS PATHOLOGIES IN CHILDREN

Turaeva F.A.

Bukhara State Medical Institute

Annotation. The persistence and recurrent nature of such inflammatory lesions requires not only the usual hygienic measures for the care of the oral cavity and teeth, but also appropriate justified therapy aimed at stimulating the protective forces of the oral mucosa.

Relevance of the topic. Macrophages, through the release of cytokines, play a major role in the protective mechanism, causing an increase in the level of T-lymphocytes. The occurrence of non-specific infectious and inflammatory diseases of the pharynx and upper respiratory tract occurs due to an imbalance of local and systemic immunity. The leading role in local immunity is played by cytokines acting on biochemical messengers that regulate the stimulation and inhibition of inflammatory reactions that initiate an immune response. Cytokines are produced by lymphocytes and macrophages embedded in the epithelium of the mucous membrane, the source of cytokines in saliva is serum transudate and salivary glands. Cytokines are also produced by the epithelial cells of the mucous membrane themselves when they come into contact with a microbe. It is important to note that the content of cytokines in saliva does not correlate with their level in the blood, which indicates the autonomy of local immunity. Viral infection can serve as an initiating factor for the attachment of a bacterial