The results showed that 37.17±3.97% (n=51) of pregnant women suffered from caries (of varying degrees) from dental diseases. The following cases were periodontitis and gingivitis during the studies - 17.24±3.74% (n=25) and 16.55±3.09% (n=22), respectively. A notable case is that chronic periodontitis occurs in 15.17±2.98% (n=22) among diseases that have been found to be quite common. The remaining dental diseases occurred in 0.69-6.21% of cases. The fact that caries is still the leader among dental diseases today was analyzed as a remarkable case [1.3.5.7.9.11].

We observed results that differed from each other if we distributed dental diseases that we encountered for the first time and among women who had multiple pregnancies. Of the 56 women who became pregnant for the first time, caries was observed in 12 (21.43±3.41%), while 39 of 89 multiple pregnancies (43.82±4.12%) had this pathology. Similar or different results were obtained in other dental diseases.

The difference was observed between women who compared periodontitis (3.93±2.37%, N=5 and 22.47 ± 3.47%, n=20) and chronic periodontitis (8.93±2.37%, n=5 and 19.10±3.26%, N=17), while gingivitis (14.28±2.91%, N=17), n=8 and 17.98±3.19%, N=16) and chronic gingivitis there was no convincing difference (5.36±1.87%, N=3 and 6.76±2.08%, N=6).

A comparative analysis of these indicators showed that caries was 2.04 times less common (R0, 001) than in most pregnant women for the first time, periodontitis - 2.52 times (R0, 001), chronic periodontitis - 2.14 times (R0, 001). On the other hand, no plausible discrepancy was found between women who were compared in terms of the incidence of gingivitis and chronic gingivitis - in favor of those who are more than 1.26 times pregnant, respectively (R0, 05).

Among the groups of women who were compared, tavofut in terms of the frequency of occurrence of these diseases was associated with the number of pregnancies. The reason for this conclusion is the denial of other factors affecting the development of these diseases. Considering that these women are
almost identical in 12 factors, such as age, lifestyle, place of residence, nutritional characteristics, the course of pregnancy, the frequency of occurrence of extragenital diseases, the number of medications used during pregnancy, the absence of dental anomalies and bite, profession, education, environmental exposure is the same for everyone, risks of negative impact on production [2.4.6.8.10.12.14].

Based on the principles of evidence-based medicine and the rules of representativeness, when only one factor differs, the influence of other factors is the same, this factor may be an indirect factor causing the disease. With this in mind, it was proved that the number of pregnancies is a factor negatively affecting the incidence of dental diseases among pregnant women.

Thus, the analysis of the prevalence of oral and laryngeal diseases and traumatic disorders showed that caries (37.17%) was the most common among pregnant women, followed by periodontitis (17.24%), gingivitis (16.55%) and chronic periodontitis (15.17%), while the remaining dental diseases occurred in 0.69-6.21% of cases. It was found that in early pregnancies, the incidence of caries was low by 2.04 times (R0,001) compared with patients with multiple pregnancies, periodontitis - by 2.52 times (R0,001), chronic periodontitis - by 2.14 times (R0,001), while among women who compared the incidence of gingivitis and chronic gingivitis, no significant discrepancies were found. (R0,05). Among the groups of women who were compared, tawofut in terms of the frequency of occurrence of these diseases was associated with the number of pregnancies.

Among the diseases of the oral cavity, the degree to which nocaryotic damage to teeth occurs today is also characteristic. Among the examined pregnant women, the degree of detection of these pathological conditions was also determined during a medical examination. During the study, the degree of occurrence of symptoms such as hypoplasia of tooth enamel, erosion of tooth enamel, wedge-shaped defect and pathological tooth extraction was determined and analyzed. To analyze the results obtained, the examined women were studied by age groups [13.15.17.19.21.23.25.27].

If the wedge-shaped defect (found in hollow teeth and premolars, forming a wedge-shaped defect in their neck) is 6.21 ± 2.00% (n= 9), and the pathological edging of teeth (a change in the anatomy of teeth, accompanied by increased thinning of tooth enamel and dentin) is homogeneous with the previous indicator of 3.45 ± 1.52% (n=5) cases, described erosion of tooth enamel (surface damage) (R<0.001).

All four teeth listed above demonstrate a probable discrepancy between early and multiple pregnancies in the incidence of nocariosis (R<0.001), in all cases their frequency was observed in patients with multiple pregnancies, especially with enamel erosion (5.36% vs. 20.22%) and enamel hypoplasia (1.79% vs. 10.11%).

The results obtained during the dental examination showed that the state of oral hygiene was "good", while those that were interpreted as 22.07±3.44% (n=32) were "satisfactory", those that turned out to be 74.48±3.62% (n=108), in while among pregnant women who participated in the study, it was found that oral hygiene was "satisfactory", "unsatisfactory", although in a small amount (3.45±1.52%, n=32). It was also found that the hygienic condition of the oral cavity is inextricably linked with the low frequency of dental diseases in most "good" and "satisfactory" pregnancies [16.18.20.22.24.26.28.30.31.32].

Even in this parameter, there was no practical discrepancy between the first and multiple pregnancies, since the figures are very close to each other, we did not stop at their interpretation and analysis.

Thus, the results of the study of the spread of diseases of the dentition and oral mucosa among pregnant women showed that 6.90% of all pregnant women had hypoplasia of the tooth enamel, while the puncture defect was 8.90%, and pathological hardening of the teeth was detected in 3.45% of cases over the same period. just like the previous indicator, a significant discrepancy (R<0.001) among those
who were pregnant first and most often, according to the parameters of tooth damage by nocariosis was in favor of those who were often pregnant, especially this discrepancy was convincing with enamel erosion (5.36% vs. 20.22%) and enamel hypoplasia (1.79% vs. 10.11%). With oral candidiasis occurring in 1.38% of cases, stomatitis occurred with the same frequency as other dental diseases (19.31%, n=28). For the first time, in terms of the frequency of occurrence of these diseases and among those who were pregnant many times, there was no convincing difference. The state of oral hygiene was "good", which was assessed as 22.07%, "satisfactory" - 74.48% and "unsatisfactory" - 3.45%. For the first time in this parameter and many times among those who were pregnant, no discrepancies were observed. Oral hygiene and the incidence of dental diseases were properly proportional.

The next indicator studied was the determination of the level of artificial venation on the teeth of pregnant women, which amounted to a total of 220, of which 107 (17.24± 3.14%) related to the upper jaw, and 121 (53.07± 3.36%) - to the lower jaw (Table 3.7). The protrusions were evenly spaced between the teeth, and only some teeth had a large proportion of protrusions, the number of teeth in the upper jaw was 26 (11.03±2.60%, n=16), the number of teeth was 25 (8.28±2.29%, n=12) and the number of teeth was 27 (8.28±2.29%, n=12), n=12 teeth and the number 36 on the lower jaw (10.34±2.53%, n=15), number 35 (8.28±2.28%, N=12) and 46-digit (8.28±2.29%, N=12) were compared by teeth. The frequency of formation of sunium plaque on the remaining teeth was about 0.69-7.59% [29.30.31].

dental symptoms were found in 35.17% of pregnant women, with the most common symptoms being night pain (35.17%), related night anxiety (35.17%), bleeding gums (13.10%), sensitivity of teeth to cold and heat (10.34%) and pain in the gums (6.90%).

; in women with multiple pregnancies, dental health disorders were significantly higher by 2.64 times compared to primary pregnancies, it was indirectly proved that such a condition also negatively affects dental health with the number of pregnancies in a woman;

caries is common among pregnant women (37.17%), followed by periodontitis (17.24%), gingivitis (16.55%) and chronic periodontitis (15.17%), while other dental diseases occur in 0.69-6.21% of cases. In those who were pregnant for the first time, caries was detected less often by 2.04 times compared to those who were pregnant often, periodontitis - by 2.52 times, chronic periodontitis - by 2.14 times (R0.001), no convincing discrepancy was found among those who compared the incidence of gingivitis and chronic gingivitis (R>0.05), among the compared groups of women, these;

hypoplasia of tooth enamel due to diseases of the mucous membrane of the teeth and oral cavity was observed in 6.90% of pregnant women, with a puncture defect was observed in 6.21% and pathological tooth extraction in 3.45% of cases in the same way as with the previous indicator, erosion of tooth enamel teeth were characterized;

for the first time in terms of the parameters of tooth damage by nocariosis, and among those who were pregnant many times, a convincing difference was in favor of many pregnant women - enamel erosion by 3.77 times and enamel hypoplasia by 5.65 times became a convincing majority;

stomatitis in the case of oral candidiasis in 1.38% of cases was at the same level as other dental diseases (19.31%), for the first time in the frequency of occurrence of these diseases, and among those who were pregnant many times, a convincing level of discrepancy was not observed;

the state of oral hygiene was "good", which was assessed as 22.07%, "satisfactory" - 74.48% and "unsatisfactory" - 3.45%. There were no discrepancies between those who were pregnant for the first time and many times on this parameter, the level of oral hygiene and the frequency of dental diseases were correctly proportional;
Conclusion. 183 sealed teeth were found in the fetuses, 71.58% of them on the upper jaw and 28.42% on the lower jaw. In the case when the number of teeth covered with sunium was slightly higher (n=220), the index on the lower jaw was higher than on the upper jaw - 46.93% and 53.07%, respectively. And in the case of broken teeth, the difference between these parameters became convincing - 2.10 times for the upper jaw. When we see the teeth of all women in a cross section as a whole (145 women, 4640 teeth), these figures were low, for the first time in these parameters, and there was no pronounced difference among women who often became pregnant.

LITERATURE USED


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