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COLLECTION DE PAPIERS SCIENTIFIQUES

SUR LES MATÉRIAUX DE LA CONFÉRENCE SCIENTIFIQUE ET PRATIQUE INTERNATIONALE

PROBLÈMES ET PERSPECTIVES D'INTRODUCTION DE LA RECHERCHE SCIENTIFIQUE INNOVANTE

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ІНТЕНСИФІКАЦІЯ КАТАЛАЗНОЇ АКТИВНОСТІ ДЕЯКИХ ШТАМІВ БАЗИДІЄВИХ ГРИБІВ Науково-дослідна група: Приседський Ю.Г., Решетник К.С., Перестюк Ю.С.	57
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caries after 1 year in children whose parents visited a dentist for preventive purposes was about 12%, and after 1.5-2 years - up to 18%.

Conclusion. After treatment with general anesthesia, dynamic monitoring of children is required at least once every 3-4 months for the purpose of preventive measures and overcoming stomatophobia in the child. When choosing filling materials, it is necessary to give priority to standard crowns (in case of destruction of 2 or more surfaces), composite materials of light curing (especially in case of damage to more than 3 surfaces of the tooth), glass-ionomer cements can be used - in case of damage no more than one tooth surface (chewing). Professional hygiene is required, with a mandatory recommendation of using toothpastes with fluoride at least 1000ppm. Parents should be advised to use floss or flosses to more thoroughly clean the approximate surfaces, in order to prevent the occurrence of approximate caries (from 4 years), especially during alternating occlusion. Parents should be encouraged to use additional mineralization of tooth surfaces at home (fluoride-containing rinses, Toth-Mousse, etc.). It must be explained that there is necessity of required mouth rinsing while receiving medicines in the form of syrups.

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CONDITION OF PSYCHOLOGICAL ADAPTATION OF FAMILIES OF PATIENTS WITH DEMENTIA

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UKRAINE

Topicality: Dementia (dementia) – acquired mental defect with a predominant disorder of intellectual function. It causes memory impairment, mental capacity, the ability to navigate time and space, as well as the ability to recognize people and objects. The ability to carry out daily activities and interact with others is also gradually diminishing. Among other things, the patient suffers from anger, suspicion and even outbursts of aggression. Subsequently, in addition to cognitive impairment, physical abilities are also damaged [1]. According to many authors, dementia is a major factor that limits the ability of older people. This condition is considered one of the most difficult for the patient himself, and for his family and for society as a whole [2].

Objective. To determine the state of psychological adaptation of families of patients with dementia

Materials and Methods: We surveyed 59 families: 59 dementia patients and their families took part in the study. Patients were treated at KNPC Choir "Regional Clinical Psychiatric Hospital # 3". The following psychodiagnostic methods were used in the study: questionnaire "Type of family attitude to therapy with psychotropic drugs" (NB Lutova, OV Makarevich, 2011), "Scale of a structured interview to determine the attitude of family members to illness (psychiatric diagnosis)) by a relative" (VA Abramov et al., 2009).

Results: we obtained the following results by the method "Scale of a structured interview to determine the relation of family members to illness (psychiatric diagnosis) in a relative" we obtained 49,15% of families with adequate attitude to the illness of a loved one, 18,64% from dramatic attitude to illness and 32.21% with negative (destructive) attitude to illness. According to the questionnaire "Type of family attitude to therapy with psychotropic drugs": the hostile type was in 15.25% of families, the removed type - 35.6% of families, manipulative type - 28.81%, supporting un - 20.34%.

Conclusions: Such data suggest that not all family members are able to correctly assess the illness of an elderly relative, so we consider it advisable in the future to develop a system of psychological support and correction of undesirable forms of attitude to the disease and treatment of psychotropic agents in patients and their family members.

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