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RELATIONSHIP AREAS OF IGNITION PROCESS ZONES PROSTHETIC BED FABRICATED WITH THE QUALITY OF MANUFACTURE OF COMPLETE REMOVABLE DENTURES WITH THE HELP OF DOPED PACKAGING MATERIAL

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Introduction. It is well known that the optimal restoration of the lost functions of the maxillofacial system in case of complete tooth loss is an urgent medical and social problem of modern orthopedic dentistry.

One of the ways to solve this problem is to improve the properties of the packaging material by adding various modifiers to it [1].

For this purpose, in order to objectively assess the functional effectiveness of removable lamellar prostheses of a complete set of teeth, a study of changes in the interalveolar height of the ridge was conducted, taking into account the atrophic processes of the tissues of the prosthetic bed of the upper and lower jaws [2].

The purpose was a comparative assessment of the results of the indicator of clinical criteria for assessing the quality of removable orthopedic structures of dental prostheses made with the help of doped packaging materials.

Research materials and methods. To solve the tasks, 55 patients aged 45 to 75 were examined and treated.

In connection with the tasks, the study included patients with complete loss of teeth of I-IV degrees of atrophy of the jaws according to I.M. Oxman, I-X class of the mucous membrane according to Supli and I-IV zones of compliance of the mucous membrane according to Lund.

Clinical, biometric, macrohistochemical, and methods of researching issues of biomechanics of the oral cavity by means of mathematical calculation were carried out

to study changes in the topographical and anatomical features of the jaws based on the results of the treatment of patients [3].

A macrohistochemical study was used to objectively assess the clinical condition of the mucous membrane of the prosthetic area.

Research results and their discussion. The total area of zones (Table 1) of inflammation on the day of application of the removable lamellar prosthesis in patients of the second study group was 3582 mm², in patients of the 3rd group 1454 mm², and in patients of the 1st (control) group - 1132 mm².

Table 1

Total area of inflammation zones of the mucous membrane
of the oral cavity under the influence of removable dentures, mm²

A period of time	1 group)	2 group	3 group
1 day	1132±3.35 mm ²	3582±5.27 mm ²	1454±0.39 mm ²
1 month	791±5.63 mm ²	1897±2.97 mm ²	1292±4.02 mm ²
6 months	642±4.42 mm ²	1692±5.03 mm ²	1022±3.21 mm ²

After 1 month, these indicators decreased in the patients of the 2nd group to 1897 mm², in the patients of the 3rd group - to 1292 mm², and in the patients of the 1st group - to 791 mm².

After 6 months of using removable dentures, the total area of inflammation zones in of the 2nd group was 1692 mm², in patients of the third group - 1022 mm², and in patients of the 1st group - 642 mm². The indicator of the total area of inflammation zones in group 2 is 2.1 times higher than in group 1, and 1.3 times higher than in the third group.

From the analysis of the results of the study, it can be concluded that under the removable lamellar prostheses made in 1 study group with the help of doped packaging material without the use of insulating varnish, less total areas of inflammatory reaction zones were observed on the day of fixation of ZOK.

Also 6 months after the fixation of the ZOK, there was a significant decrease in the total area of inflammation zones of the mucous membrane of the prosthetic bed under the bases of removable lamellar prostheses in 1 (control) group. This indirectly testifies to the functional value of removable orthopedic structures of dental prostheses, made with the help of alloyed packaging developed material using modifiers with proportions of KE-10-01: 1.8%, PVA - 1.67%, BS-65-GP- - 1.62% and PVA - 1.1% in the first studied group of patients.

Conclusions. According to the indicator of integral efficiency in the manufacture of removable structures of dental prostheses, the use of alloyed packaging material "ORTHOGYPS»(1 studied group) is significantly superior to dental plaster mixtures widely used in domestic dental practice, which are an integral component during the

laboratory stages of manufacturing high-quality removable orthopedic structures of dental prostheses.

The degree of intensity of the atrophic processes of the tissues of the prosthetic bed was the lowest in the first studied (control) group. The second and third studied groups of patients were characterized by steady growth of atrophy of alveolar processes.

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