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### UDC 612.312.3-616.31-617.3 SWALLOWING FUNCTION IN PATIENTS WITH EDENTULOUS JAWS DURING USING ADHESIVE MATERIALS TO FIX COMPLETE REMOVABLE DENTURES

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In this article, the study was to monitor and quantify the swallowing function in patients with complete removable dentures, using adhesive materials. The function of swallowing, in our opinion, also predominantly depends on the function of language. In addition to physiological adaptation, there is a psychological, reduced irritability, shyness, disappears barriers to communication. For normal habituation to the prosthesis, the doctor must reassure the patient, explain the rules of using the prosthesis, explain that all unpleasant sensations will pass, and the success of adaptation depends on the additional use of adhesives to improve the fixation of complete removable prostheses, which positively affects such vital functions as swallow.

**Keywords**: swallowing function, complete removable dentures, adhesive materials, physiological adaptation, Kamper horizontal.

Lack of teeth is not only the cause of masticatory and speech disorders, but also causes a disproportion of the parameters of the facial skeleton of the skull, provokes psychological, personal changes, violates social tolerance, changes the nature of nutrition, and, as one of the circumstances of changes in oral fluid, promotes development somatic pathology [1, p.41, 2, p.27].

It is known that almost all functional movements of the soft tissues of the face, below the level of the Kamper horizontal significantly depend on the function and movements of speech [3, p.70, 4, p.39]. Facial expressions, speech, chewing, yawning, coughing, sneezing, breathing, licking, kissing, creating a vacuum and, conversely, inflating the cheeks are associated with tongue movements [5, p.188, 6, p.81]. The function of swallowing, in our opinion, also predominantly depends on the function of language [7, p.321].

**The aim** of the study was to monitor and quantify the swallowing function in patients with complete removable dentures, using adhesive materials.

**Materials and methods of research.** A clinical and laboratory experiment was conducted on the basis of the Department of Orthopedic Dentistry of KhNMU, in which 20 patients took part. The first group consisted of 5 persons aged 60-74 years with edentulous both jaws, using adhesive cream "Stomafix".

The second group consisted of 5 persons aged 60-74 years with edentulous both jaws, using adhesive cream "Corega". The control group included 10 persons with intact dentitions of the same age group. All patients of the first and second groups according to the standard method were made complete removable plate prostheses for the upper and lower jaws. During the delivery of the finished prosthesis was carried out the application of adhesive material. Evaluated the process of swallowing in each patient using a swallowing test according to I.S. Redinov (1992). The patient was asked to put in his mouth 15 grams (teaspoon) of sour cream, pre-colored saffron - food yellow (in the ratio of 0.1 g per 100 g of product). Stir it with your tongue in the

mouth for 10 seconds, and after this time, collect the sour cream in a food lump and swallow. Then the patient was asked to rinse his mouth with three full sips of water and spit all these portions into a vessel in which the resulting amount of liquid was adjusted with distilled water to 200 ml. After that, on the pre-calibrated 20-field shade of the yellow scale was determined by the amount of food left in the mouth. Swallowing test was performed in patients of the first and second groups before the imposition of prostheses, immediately after the imposition of prostheses and after the application of adhesive creams.

**Research results**: in patients with complete absence of teeth of the first and second groups - swallowing test before dentures was  $640\pm54,772$  mg of the substance, which significantly indicates a decrease in swallowing function compared with patients in the control group  $380\pm44,721$  mg of nutrient (p<0,05; t=5,567). When tested with prostheses, the following results were obtained:  $1010\pm67,342$  mg of the substance. After application of adhesive materials, the swallowing test in patients of the first group was  $840\pm59,321$  mg, and in patients of the second group  $837\pm59,315$  mg, this figure in patients of the first group is 1.31 times higher before prosthetics and 2.21 times more than the control group. Patients in the second group were 1.3 times more than before the prosthesis and 2.2 times more than the control group. But the rate when applying the adhesive material and the first and second groups is 1.2 less than without applying the adhesive cream, which indicates an objective increase in the swallowing process.

**Conclusions**. Thus, a removable prosthesis is an irritant that causes excitation in the cerebral cortex, which is presented in the form of reflex reactions. If the stimulus does not receive reinforcement, then the phenomenon of attenuation develops, which manifests itself in the form of a decrease or suppression of excitability and conductivity (I.P. Pavlov).

In addition to physiological adaptation, there is a psychological, reduced irritability, shyness, disappears barriers to communication. For normal habituation to the prosthesis, the doctor must reassure the patient, explain the rules of using the prosthesis, explain that all unpleasant sensations will pass, and the success of

adaptation depends on the additional use of adhesives to improve the fixation of complete removable prostheses, which positively affects such vital functions as swallow.

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