

FEATURES OF THE CLINICAL COURSE OF CHRONIC RECURRENT APHTHOUS STOMATITIS

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Annotation. Chronic recurrent aphthous stomatitis is one of the most widespread diseases of the oral mucosa. The prevalence of recurrent aphthous stomatitis, according to various authors, ranges from 10 to 40% in different age groups of the population. Over the past 10 years, there has been a marked trend towards an increase in the number of patients with recurrent aphthous stomatitis, and with its severe form. Recurrent aphthous stomatitis occurs against the background of sensitization of the body to conditionally pathogenic microorganisms of the oral cavity, viruses, food or microbial allergens. Studies have shown that bacterial allergies develop in patients with dysbiosis of the distal gastrointestinal tract.

Key words: Stomatitis, aphthaea, erosion, pain.

Introduction. HRA is a chronic inflammatory disease of the mucous membrane characterized by the appearance of aft, occurring with periodic remissions and frequent exacerbations.[8] The leading role in the etiopathogenesis of HRA is attributed to infectious and allergic factors. These formations on the oral mucosa bring significant discomfort to a person, especially during conversation or eating - a burning sensation, up to severe pain, enlargement of regional lymph nodes, and, in severe cases, an increase in body temperature [2].

Currently, experts are discussing the etiology and pathogenesis of this nosology, which does not allow achieving a lasting therapeutic effect in treatment, and, consequently, reducing the number of relapses.[7]

The prevalence of HRA is incredibly high, but if HRA is defined as more than two spontaneous episodes per year, then the average prevalence in the population is about 10%. Which are either the leading element of this pathology, or a symptom of a general pathology (peptic ulcer of the stomach and duodenum, liver, chronic gastritis, systemic diseases, dermatoses, diseases of the cardiovascular system). Patients, as a rule, show violations of the immunological status of a local and general nature, correlating with the severity of the clinical course. With long-term pathology of the gastrointestinal tract, erosive and ulcerative lesions of the mucous membrane of the stomach and small intestine usually develop, which is combined with the appearance of aphth on the oral mucosa. The incidence of SNORING in children may be higher than in adults.

Materials and methods. The study involved 50 people, they were divided into 2 groups: The study period was 3-6 months after treatment. There were 30 patients in the main group and 20 patients in the comparison group. As part of local therapy, chronic foci of oral infection were identified during the study, patients were rehabilitated, and professional, rational oral hygiene was carried out. As well as training in the specifics of individual oral hygiene, followed by controlled brushing of teeth. Local treatment included the use of drugs with analgesic effect, antiseptic treatment of pathological foci and oral cavity, and the use of proteolytic enzymes.

Results and discussion. The main element of the mucosal lesion in HRA had erosive and ulcerative elements in the form of aphthae. Analysis of the clinical manifestations of the disease made it possible to differentiate between different variants of its course, which is determined by the number and condition of AFT and the severity of symptoms of general intoxication.

Conclusions: Thus, the presented research results obtained in patients with chronic recurrent aphthous stomatitis allow us to assess the clinical course and conduct comprehensive treatment. In patients with HRA, quality of life indicators are reduced: the physical component of health and the mental component.

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