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## АКТУАЛЬНЫЕ ВОПРОСЫ СОВРЕМЕННЫХ НАУЧНЫХ ИССЛЕДОВАНИЙ



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# MACЪАЛАХОИ МУБРАМИ ТАХКИКОТХОИ ИЛМИИ МУОСИР АКТУАЛЬНЫЕ ВОПРОСЫ СОВРЕМЕННЫХ НАУЧНЫХ ИССЛЕДОВАНИЙ CURRENT ISSUES OF MODERN SCIENTIFIC RESEARCH

Материалы XVII научно-практической конференции молодых ученых и студентов ГОУ "TГМУ им. Абуали ибни Сино" с международным участием

### TOM-2

(стоматология, теретические дисциплины, фармация и фармакология, тезисы на иностранных языках)

ment of herniology, based on the use of implants made of monofilament fibers, problems arise when using them. The disadvantage is that it is impossible to directly saturate monofilament prostheses with antibacterial drugs. The presence of a "dormant" ligature infection in the hernioplasty zone, the increasing resistance of the main hospital strains leads to ineffectiveness of antibiotic prophylaxis and, as a result, an increase in the probability of purulent-inflammatory wound complications.

Currently, the clinic is working on the practical use of an implant made of monofilament filaments (polypropylene) with antibacterial properties. Antibacterial agents can be incorporated into the structure of the thread, or fixed to it using polymer coatings (matrices) or low-molecular-weight mediators. This monofilament prosthesis is coated with a polymer impregnated with a cephalosporin antibiotic. Polyvinyl alcohol (PVA) is used as a carrier matrix for an antibiotic of a given concentration, the solution of which prolongs the action of antibiotics due to the formation of easily mobile complexes due to hydrogen bonds [5]. Polymerizing, the PVA solution forms a film on the implant, which, undergoing gradual fragmentation, ensures long-term diffusion of the antibiotic into the surrounding tissues. The results of studying the antimicrobial properties, strength characteristics and tissue response to implantation of this endoprosthesis showed that its antibacterial effect persists for up to 5 days, and the implant itself meets all the requirements for modern plastic materials for hernioplasty.

**Results of the study.** The first performed operations allow us to speak about the prospects of using the developed technique in PVG surgery.

**Conclusions.** Thus, the use of the developed implant with antimicrobial action provides reliable prevention of postoperative purulent-wound complications in the surgical treatment of patients with PVH, providing reliable treatment results.

## Achilova N.G. Normurodov B.K. THERAPEUTIC TACTICS WITH A PATIENT WITH OSTEOPOROSIS IN THE CLIMACTERIC PERIOD WHEN PLANNING DENTAL IMPLANTATION

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The problem of osteoporosis is widespread and has a medical and social significance in terms of importance, therefore, it is recognized by WHO, which included this disease in the list of key issues in the framework of the World Decade of Bones and Joints (2000-2010). Clinical studies Clin Cardia (2009) proved that taking statins for at least one course, for 1-2 years, reduces the risk of complications of osteoporosis by 38% and modulates the activity of osteoblast cell membranes. Many scientists in domestic and foreign literature have indicated the effect of hypoestrogenemia on the course of osteoporosis and periodontitis in elderly and senile women.

**Purpose of the study.**Development of preoperative preparation and a complex of therapeutic and prophylactic measures when planning dental implantation in patients taking into account osteoporosis in the climacteric period.

Materials and methods of research: All patients (n = 30) were divided into 3 groups according to the severity of inflammatory periodontal diseases, which was assessed clinically and radiographically according to the classification of the American Academy of Periodontology (AAP) [1]. The control group (n = 8) consisted of patients of the same age group without periodontal disease, whose mucous membrane was harvested during interventions not related to dental implantation.

Surgical treatment was assessed by clinical signs: the presence of a pain symptom, the timing and state of wound epithelialization, early postoperative complications and the degree of osseointegration of dental implants. The degree of osseointegration was monitored by X-ray research methods (dental radiography, panoramic tomography) at each stage of treatment. Complex therapy consisted in the use of hormone replacement and osteostimulating drugs in preoperative preparation.

**Results of the study**: We found that patients in group 1 of the study (15 people) are characterized by changes in type III of the AAR classification, for patients in group 2 (7 people) - type IV, respectively. It should be added that at the time of treatment, 5 patients of group 2 had a history of type II diabetes mellitus.

**Conclusion.** Early postoperative complications (edema and hyperemia of soft tissues) were observed in 25% of patients (7 people), and 75% of complications (6 people) were patients with concomitant diabetes mellitus. Complications were treated according to standard local treatment regimens with postoperative antibiotic therapy. The timing of insertion of the healing caps varied from 7 to 14 weeks (p < 0.05). Cervical resorption ranged from 0 to 1.5 mm.

#### Achilova N.G., Nazarova Sh.Kh. FEATURES OF DENTAL IMPLANTATION IN WOMEN DURING MENOPAUSE

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Heard Reserch - Associate Professor Pulatova B.Zh.

Endocrine restructuring during menopause leads to an imbalance in mineral metabolism, which can serve as an important factor in the formation of postmenopausal osteoporosis and the ineffectiveness of the use of dental implants. Changes in hormonal levels put menopausal women at risk of developing a disease such as osteoporosis - a decrease in bone density. In order to avoid all the complications and threats that this disease carries, doctors prescribe a number of medications to women. Dental studies have shown that taking bisphosphonates for menopause can cause complications during dental implantation.

Objective of the study: Carrying out dental implantation in patients after menopause and studying its stability.

**Material and research methods**. Clinical studies were conducted in 13 women, who were divided into three groups: the first group - women during menopause with osteoporosis (age 40-50 years) - 2 patients; the second group - women during menopause without osteoporosis - 5 patients, the third group - women of the same age with normal menstrual function and without osteoporosis - 6 patients All patients of a homogeneous social group, without pronounced pathology of occlusion and

crowding of teeth. To determine the presence of osteoporosis, bone mineral density (BMD) was studied using a DPX-NT Ge Lunar dual-energy X-ray densitometer.

Results: The dynamics of the Ca content in the oral fluid reflects the course of destructive processes developing in osteoporosis. In the patients of the first group, the increase in the concentration of Ca in saliva at all subsequent stages of the study remained below the control value. In patients of the second and third groups, the calcium content in the blood at the subsequent stages of the study (II - IV) did not differ from the control value.

**Conclusions:** In women with postmenopausal osteoporosis, significant disorders of mineral metabolism are noted, which are manifested in changes in the content of the main macronutrients in the oral fluid, which are characterized by a decrease in the concentration of calcium and phosphorus and an increase in magnesium. Dental implantation and restoration of the dentition reduce the severity of these disorders, although these indicators do not completely normalize.

#### Akhmedova D., Sherov Sh., Boymatov A. FUNDAMENTALS OF SPEECH CULTURE IN MEDICINE

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**Purpose of the study.** How to develop the speech culture of future medical students in English lessons.

**Material and research methods.** The culture of speech is, above all, the spiritual culture of a person and the level of his general development as a person; it testifies to the value of the spiritual heritage and cultural heritage of mankind.

We can say that the culture of speech is an expression of love and respect for the mother tongue, which is naturally associated with the history of the native country and its spiritual wealth.

And in addition to the main components of cultural speech - literacy and compliance with generally accepted norms of the literary language - language tools such as vocabulary, phonetics and stylistics are also decisive. The perception and understanding of each other's communication participants plays an important role in the process of interaction between the medical worker and the patient. These processes are primarily influenced by psychological attitudes.

The medical profession requires a professional not only professional skill, but also great emotional dedication. "Combustion" does not mean the devastation and disappearance of forces - they gradually resume when they receive satisfaction from their work, awareness of their skill in the profession, with increased skill and constant personal development. The doctor constantly deals with the death and suffering of other people. Therefore, the problem often arises for the doctor to "not include" his feelings in the situation, which does not always succeed. Чистая речь — залог здоровья общества

All this language chaos occurs for one single reason - an insufficient level of speech culture.

**Results of the study.** Therefore, the expected result of the speech culture is an understanding of the content of the message; emotional evaluation -- separation of emotions and assessments, empathy -- psychological, emotional understanding; an arguing speech is the commission by the addressee of an action to which he was encouraged.

- In order to achieve the desired results, the speech process itself must be properly organized and implemented. The culture of speech is not only the choice of the best language or speech means from the options that exist in this situation, but also the creation of whole text using them.
  - Therefore, a culture of speech as a process is a culture of text creation. It includes many aspects of speech:
  - Culture of the process of reckoning, the process of communication;
  - A culture of language as the main means of speech;
  - - culture of knowledge of non-verbal means of speech;
  - Culture of speech-text product creation;
  - a culture of perception of the text in the process of its creation in oral speech or as a result in written speech;
  - - culture of response to utterance;
  - - culture of attitude to written texts.

**Conclusion.** Thus, speech culture manifests itself:

- - in setting the goal of speech, taking into account certain conditions of communication and ethical motives of speech;
  - in choosing the means to achieve this goal;
  - - in the choice of forms of response to the real or potential speech of the interlocutor.

All the components of speech, therefore, can be considered as elements of the culture of speech, the culture of communication and culture as a whole. Therefore, the culture of speech is an area of manifestation in speech activities of the physical, material and spiritual culture of the person and society.

## Alifshoeva N.N., Tadjidinov T., Aleluia D. FEATURES OF THE NEUROSYPHIIS PRESENTING WITH DEMENTIA. CASE PERORT.

Departure of neurology, psychiatry and medical psychology named by M.G.Gulomov ATSMU.Tajikistan. Scientist supervisor – c.m.s. Ganieva M.T.

The purpose of the study. Study the clinical features of neurosyphilis in 20 year old male patient.

Material and methods of the study. A 20-year-old male patient was admitted to our clinic with complaints of cognitive deficits, aggressive behavior, gait disturbances and sleep disorders for approximately 5 years.

**Results of the study**. The patient was normal at birth. At the age of 11 years, he had an incident of drowning, after which he displayed signs of febrile seizures, vomiting and high blood pressure at night, for a course of few days. Further he

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