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RESULTS ON THE DYNAMICS OF QUALITATIVE AND QUANTITATIVE CHANGES IN MICROORGANISMS IN PATIENTS WITH TITANIUM SPLINT

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Relevance of the topic. It is known that the oral cavity is characterized by an ecological biotope, in which there are favorable conditions for the survival and reproduction of many species of micro-organisms, guruches. According to the tariff of some scientists, the oral cavity is at the same time a ham thermostat, a ham food muxit [1].Charorat, moisture, creates conditions for the adgesia and reproduction of bacteria that fall into the oral cavity of various tissue structures with food, water, air.

Healthy people make up the bulk of the oral cavity microflora of the streptococci generation, specifically the salivary streptococci. In Grammusbat staphylococci, however, St.epidermidis.Of the microorganisms studied, the sluggishest Colonization Resistance will be possessed by Gramnegative rods, while fungi from Candida seeds have been anicized to be able to colonize only in the slugs of the tongue and gums.[3].

Oral cavity is the main factor providing normal microflora resistance, which is an integral part of the microecological system. Thanks to this, in recent years, dentists have been greatly interested in studying the resistance of colonization of different parts of the oral cavity.[6].

The purpose of the scientific study: to study the qualitative and quantitative changes in the microflora of the oral cavity of patients with a broken lower jaw bone, a tire-fixator and a titanium miniplastine.

Verification material and methods. For scientific study, 41 patients with a broken lower jaw were selected, which were divided into 2 guruhas: 1st Guruh (n=20)patients were worn with Inter-jaw tire-fixator – Tigershtedt tires, 2nd Guruh (n=21)patients were osteosynthesized with broken fragments titanium miniplastina. In the scientific center of emergency ambulance of Andijan region and in the private clinic of Andijan shaharprof Med Service, a surgical procedure was carried out, and they took 1-15 days to observe the facial jaw.For qualitative and quantitative microbiological examination of the oral microflora of these patients, 1 ml of saliva was taken to a test tube with a pre-sterile 5 ml of saline solution poured through a sterile nasal suction Doser and the necessary dilutions tayorlandi.So 0.1 ml of lacquer dilutions were taken and planted in appropriate differential-diagnostic nutritionists.Elective food is a typical food that is widely used in microbiology as an mukhit muxites applied:

bloody agar-for hemolytic cocci and sticks;

egg yolk salt agar (jsa) - for pathogenic staphylococci;

Endo muxite-for enterococci and escherichians from Enterobacteria

"Saburo" was applied to grow fungi of the muxit Candida species.

This food not only grows microorganisms, but also anicizes the pathogenicity factors of some of them. For example, 5% blood agar to study the erythrocyte degradation property of microorganisms; it was studied by planting in agar (decomposing the leucitin contained in egg yolk)with egg yolk to determine leucitinase activity. After the patient's saliva was planted in the appropriate food muxites, the plantings were put in a thermostat on t-370 for 18-24 hours. Saburo muxiti, on the other hand, was kept for 2-3 days in the room for the collection of yeast fungi. The sowing period of microorganisms, namely the number of colonies that germinate on the surface of the food mucite after incubation, and the identification of the lambs are the following indicators: - microrganismsnimorphologikvatinktorialbelgi;

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- culturalchases;

- studied on biochemical properties

Basically, the oral microflora is determined by 2 different microbiological methods orcali: microscopic and Bacteriological Methods. The main representatives of the oral cavity were studied for the differentiation of bulgan coccus (coccus, in turn, are bulged into species with respect to morphology, location and tinctorial properties), their morphological and tinctorial signs were painted in a gram method by preparing an extract from the collected colonies.

A bacteriological, i.e. cultural, method was used, in which the microscopic method made it clear that it could not provide complete information in the identification of microorganisms. The colonies in which the patient's saliva grew in dense food mucilages after planting in the respective ozic mucilages were separated from the selected colonies by pure dressing after macroscopic study of biochemical and pathogenicity factors anicized.

When evaluating the results of quantitative examination of the oral microflora, the following formula was used:

 $\mathbf{K} = \mathbf{A} \ge 200 \ge \mathbf{R}$

K-colony expressed in the dressing unit (KXKB) micdor

A-the number of colonies growing in the last dilution

200-planting orcali with melons coefficient

Statistical processing was carried out on the material to estimate the average arithmetic quantity, their errors, the content of the obtained material.

Results of the examination. The oral cavity is characterized by an ecological biotope, where a huge number of species and groups of microorganisms live and laugh for copulation. As can be seen from the table with the results of the examination, it was observed that in the 1st group of patients with an inter-jaw tire fixator, the amount of microorganisms in the content of 1 ml of saliva increased compared to meior. On the 1st day of examination in patients, the amount of saprophytic staphylococci, streptococci is 1.5-2 times; on the 7th Day 2 - 3 times; on the 14th day, it was observed that ham increased 2-3 times, yani7, 05±0.2; 10.5±0.5 KXKB / ml (in meior 3.15±0.3; 3.30±0.1 KXKB/ml), while enterococci were observed to increase from 4.30±0.2 to 7.75 ± 0.3 . It should be noted that the intestinal rods not found in meior were found at 1.75 ± 0.1 ; 2.66±0.2 KXKB/ml between the 7th and 14th days after the practice of jarroxism. Fungi of the Candida type, on the other hand, were observed to increase by 2-3 times. In 10% of patients, lingual staphylococci, hemolytic streptococci, basillae were identified, which are not found in meior. Based on the data from yukori, it can be concluded that the oral cavity microbiocenosis of patients 1, in which the tire fixator is installed, is impaired, which in turn leads to the occurrence of various diseases of maxillary inflammation. It should be noted that after the installation of the tire, patients were found to have proportionally increased microbial indicators on the 7-14 day.Dysbalance of microorganisms can lead to an increase in the lameness of the oral mucosa, a change in the maxillary resistance, an unstable setting of a tire fixator with a foreign body smeared jaws and, ultimately, a negative effect on the healing effect.

Microbiological examination of the oral cavity of 2-group patients with titanium plate installed on the lower jaw in accordance with the purpose of scientific examination. In this group of patients, Ham oral microbiocenosis was examined for saliva on 1-7-14 days in dynamics. Microbiological indicators of these patients received positive results in comparison with patients with 1 gurukh, i.e. with an inter-jaw tire fixator. In particular, the amount of fungi belonging to the staphylococci, enterococci, Candida type did not exceed the amount of meyori indicators. But, the amount of Streptococci from the norm on the 1st day-1,5; There was a 2-fold increase from 7-14.

Enterobacteria representative bulgan escherichians did not germinate, that is, the effect of "sterile ozic mukhitis" was observed in Endo ozic mukhitis. It is worth noting that if the meiori of

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Streptococci increased, it was found that patients in ham, 1st group were inferior to their krsatkichs. In particular, the amount of Streptococci was found to be 1.5 times lower than on days 1-7-14, i.e. 7.0 \pm 0.3 to 5.0 \pm 0.2; 9.7 \pm 0.7 to 6.7 \pm 0.4; 10.5 \pm 0.5 to 7.1 \pm 0.3. The last years have established the conclusion that the violation of normal microbiocenosis of a person in accordance with it can be seen as a pathogenetic mechanism in the development of one disease or another, as a key factor in some cases. Based on the analysis, it can be concluded that there was a violation of oral microsenosis in patients with Group 1.In this, qualitative and quantitative dysbalance of saprophytic, conditionally -pathogenic microorganisms was determined. Hattoki, a language not found in meior, has been found to grow staphylococci, hemolytic streptococci, escherichians.From this, an external observation showed that patients lose weight due to impaired oral dating, impaired diet. This means that the origin of oral cavity dysbacteriosis leads to a violation of the intestinal microflora is not free from extimol. The results of the examination were observed to be a slight violation of the microflora of the oral cavity in patients with the installation of Group 2, titanium plate.Of the microorganisms examined, phacate streptococci were found to have a 2-fold increase in mycorrhoea compared to meiore, but 1.5-fold lower in 1group patients.Colgan micro-organism mycdor is practically unchanged.Compared to the first group, it was observed that patients of the 2nd group did not grow pathogenic microflora, including pathogenic staphylococci, hemolytic streptococci, escherichians.

It can be concluded that the treatment of a fracture of the lower jaw with titanium mini plates gives a positive result compared to the treatment of jawsaroshina from a microbiological point of view.

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