

ЎЗБЕКИСТОН РЕСПУБЛИКАСИ СОҒЛИҚНИ САҚЛАШ ВАЗИРЛИГИ



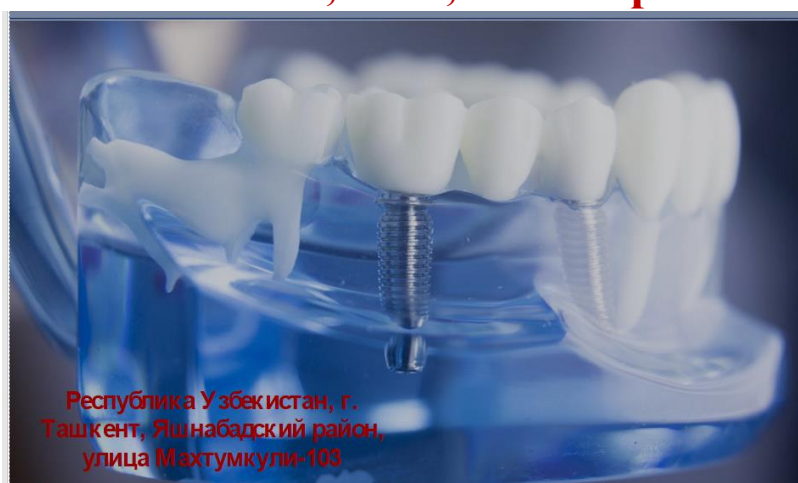
ТОШКЕНТ ДАВЛАТ СТОМАТОЛОГИЯ ИНСТИТУТИ

*ГОСПИТАЛЬ ОРТОПЕДИК СТОМАТОЛОГИЯ КАФЕДРАСИ
ФАКУЛЬТЕТ ОРТОПЕДИК СТОМАТОЛОГИЯ КАФЕДРАСИ
ПРОПЕДЕВТИКА ОРТОПЕДИК СТОМАТОЛОГИЯ КАФЕДРАСИ
ОРТОДОНТИЯ ВА ТИШЛАРНИ ПРОТЕЗЛАШ КАФЕДРАСИ*

**«ОРТОПЕДИК СТОМАТОЛОГИЯ ВА
ОРТОДОНТИЯНИНГ ДОЛЗАРЪ МАСАЛАЛАРИ»
НОМЛИ ҲАЛҚАРО ИЛМИЙ-АМАЛИЙ
КОНФЕРЕНЦИЯНИНГ**

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Тошкент, 2023, 10 ноябрь



Тошкент-2023

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COMPARATIVE ANALYSIS OF MEASURING MAXILLARY TRANSVERSE DEFICIENCY ACCORDING TO PONT INDEX AND YONSEI TRANSVERSE INDEX

Saidova M.D., Bakhshillayeva S.A., Nigmatov R.N., Nigmatova I.M.

Relevance. One of the frequently observed congenital anomalies of the development of the facial skull is maxillary transverse deficiency, which leads to significant functional impairments and aesthetic defects. It is recognized that maxillary transverse deficiencies are a significant component of many malocclusions.[1] Today, cone beam computed tomography (CBCT) is one of the orthodontics' most dynamically developing three-dimensional diagnostic tools. In this regard, we believe the use of CBCT for diagnosing transversal measurements of the skeletal structures of the jaws is auspicious.

The study of various methods for analyzing transversal insufficiency of the upper jaw and determining their effectiveness provides the opportunity to choose an appropriate diagnostic method and is the key to further adequate and successful treatment. The perspective of using the resistance center in the analysis can be useful for clinicians to understand the nature and severity of the discrepancy.

Aim. A comprehensive analysis of two methods for calculating the narrowing of the upper jaw and determining their effectiveness by comparing data obtained at the clinic of the Tashkent State Dental Institute during the research project.

Material and methods. A survey of 20 patients with a narrowing of the upper jaw aged from 8 to 20 years inclusive was carried out. All patients were divided into 2 equal groups depending on age: Group I - 8-14 and Group II - 14-20 years old underwent comprehensive orthodontic diagnostics, including photo diagnostics, taking impressions, and digitizing dentition models into 3D computer models, calculations of anthropometric parameters, and CT calculations. Using the Pont method of measuring models, a biometric analysis of jaw models was carried out using measuring points, the width of the dental arches in patients was calculated, and their CT images were examined to determine parameters using the Yonsei method.

Results and its discussion. A group of those examined using the Pont method showed normal width of the dentition in 62.3% of cases in group I and 73.7% in group II, despite the presence of crowding of the dentition, tooth rotation or dentoalveolar protrusion. In group I, in those examined according to the Yonsei transverse index, the average value was -4.56 mm (with the norm being -0.39 ± 1.87), which indicates a pronounced skeletal narrowing of the upper jaw; in group II, Yonsei values averaged -7.35 mm.

Conclusions. At the present stage of the development of innovative technologies, their introduction into practice in the diagnosis of dental anomalies, including narrowing of the upper jaw, is a requirement of the time. In some cases, the Pont index cannot provide reliable predictions for individual planning of orthodontic treatment. Modern methods of analyzing transversal jaw discrepancy make it possible not only to objectively determine the degree of anomaly but also to

identify their compensated forms. This means that when examining patients with occlusion anomalies, the use of CBCT at the present stage for diagnosis and planning is mandatory. In each individual case, it is essential to access the balance in the transverse dimension of the maxilla and mandible in order to establish the desired occlusal contact. Taking into account the initial inclination of the lateral teeth and their centers of resistance, as well as the prospect of using the center of resistance in the analysis in combination, will allow one to correctly assess the degree of narrowing of the upper jaw and choose a rational protocol for the orthodontic treatment method.

References:

1. da Silva Filho O.G., Santamaria M. Jr., Capelozza Filho L. Epidemiology of posterior crossbite in the primary dentition // J Clin Pediatr Dent. — 2007. — V.32. — P.73–78.
2. Graber LW, Vanarsdall RL, Vig KWL. Orthodontics: Current principles and techniques. Philadelphia, PA: Elsevier Mosby; 2012
3. Kee-Joon Lee, Sung-Hwan Choi, Tae-Hyun Choi, Kyung-Keun Shi, and Byeong-Tak Keum. Maxillary transverse expansion in adults: Rationale, appliance design, and treatment outcomes. Seminars in Orthodontics, Vol 24, No 1, 2018: pp 52–65.
4. Аржанцев, А. П. Методики рентгенологического исследования и рентгенодиагностика в стоматологии / А. П. Аржанцев. — Москва, 2015. — 260 с.
5. Арипова, Г., Расулова, Ш., Насимов, Э., & Акбаров, К. (2019). Эффективность ортодонтического лечения детей с дистальной окклюзией зубных рядов в период смены прикуса. Stomatologiya, 1(2(75), 10–12. Извлечено от <https://inlibrary.uz/index.php/stomatologiya/article/view/1339>
6. Муртазаев С., Туляганов Б., Базаров С., Юлдашев Т., Расулова Ш.Р., Муртазаев С. (2022). Эстетические показатели профиля мягких тканей. https://inlibrary.uz/index.php/medicine_and_innovations/article/view/776
7. Насимов, З., Г. Арипова, С. Муртазаев, Н. Джумаева, Ш. Расулова, и Р. Кадиров. «Построение математической модели для определения параметров зубных дуг по размерам резцов». Медицина и инновации, т. 1, вып. 2, октябрь 2021 г., сс. 93-95, https://inlibrary.uz/index.php/medicine_and_innovations/article/view/76
8. Нигматов Р. и др. Пересечение рядов зубов во время детского обменного прикуса диагностика прикуса цефалометрическим методом //Stomatologiya. – 2021. – №. 1 (82). – С. 38-40.
9. Нигматов Р. Н., Шомухамедова Ф. А., Нигматова И. М. Ортодонтия. /Учебник (на русском и на узбекском языке) Для студентов Стоматологических факультетов медицинских институтов.-2-том //Т.-2021.- 451 с.
10. Нигматов Р., Абдуллаева Н., Абдуганиева Н. Биометрическое исследование при укорочении зубного ряда у детей //Актуальные проблемы

стоматологии и челюстно-лицевой хирургии. – 2022. – Т. 1. – №. 02. – С. 48-49.

11. Нигматов Р.Н., Нигматова И.М., Акбаров К.С., Арипова Г.Э., Кадиров Ж.М. и др. «Анализ по Болтону» (ABolton.exe) -Болтон бўйича тахлил (ABolton.exe) //IE – 2023.

12. Расулова, Ш., Арипова, Г., Насимов, Э., Муртазаев, С., Джумаева, Н., & Кадиров, Р. (2021). Построение математической модели с учётом зависимости длины переднего отрезка зубных рядов и ширины верхних резцов (по корхаусу). *Stomatologiya*, (2(83), 44–46. <https://doi.org/10.34920/2091-5845-2021-47>

13. Хабилов Н.Л., Шаамухамедова Ф.А., Арипова Г.Э., Муртазаев С.С., Насимов Э.Э., Мирсалихова Ф.Л. Ортодонтия с детским зубным протезированием//«Стоматология» 5510400 «Adabiyot Uchqunlari» Ташкент – 2016

O'Z VAQTIDA CHIQMAGAN TISHLARNI TASHXISLASHNING SAMARALI USULLARI

Shaamuhamedova F.A., magistr Ne'matova M, Baxtiyorova M
TDSI Ortodontiya va tishlarni protezlash kafedrasi

Tadqiqotning dolzarbligi. Hozirgi vaqtda retensiyaga uchragan tishlarni davolash bu o'z vaqtida va sifatli diagnostika qilish, tishlarni yorib chiqish vaqtini va ularni tish yoyida joylashishini aniq hisoblash bilan boradi. O'z vaqtida chiqmagan tishlarni tekshirishning asosiy vazifasi chaynash funksiyasini tiklash, doimiy tish kurtaklarining joylashishini aniqlash, shuningdek, har bir bemorning tishlari va tabassum chizig'ini estetik jihatdan tiklashdir. Ko'plab retensiyalar ko'pincha yuqori yoki pastki jag'ning alveolyar qismining rivojlanmaganligining sababi hisoblanadi, ko'p tishlar retensiyasi turli kasalliklar, endokrin kasalliklarning natijasi bo'lishi mumkin, bu esa jag'larning o'sishi buzilishiga va deformatsiyasiga olib keladi.. Turli manbalarga ko'ra. barcha yuz-jag' anomaliyalar orasida retensiyaga uchrash darajasi 4% dan 30% gacha (A.K. Korsak, T.N. Terexova, 2015; L.S. Persin, 2006; Yu.I. Jigurt, G.V. Kuznetsova, 2021 yil). Tishlarni o'z vaqtida chiqmasligi mustaqil anomaliya yoki boshqa yuz-jag' anomaliyalarining simptomi ,yoki asorati hisoblanishi mumkin. Doimiy tishlarning retensiyasini og'iz bo'shlig'ini ko'zdan kechirishda va tishlarning o'rtacha chiqish vaqti bilan chiqqan tishlar sonini taqqoslash orqali aniqlash mumkin

Tadqiqot maqsadi: O'z vaqtida chiqmagan tishlarni tashxislashning samarali usullarini ishlab chiqish.

Tadqiqot usullari: klinik, rentgenologik, antropometrik.

Tadqiqot materiallari: TDSI Ortodontiya va bolalar stomatologiyasi protezlash klinikasida smenali 13 yoshdan 20yoshgacha bo'lgan 30 nafar bemor o'rganildi. Barcha bemorlar klinik, rentgenologik, antropometrik va statistik tadqiqotlardan o'tkazildi.