

МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ УЗБЕКИСТАН



МИНИСТЕРСТВО ВЫСШЕГО ОБРАЗОВАНИЯ, НАУКИ И ИННОВАЦИЙ РУЗ



ТАШКЕНТСКИЙ ГОСУДАРСТВЕННЫЙ СТОМАТОЛОГИЧЕСКИЙ ИНСТИТУТ



СБОРНИК ТЕЗИСОВ

томография является современным доступным методом исследования, которая в дополнении осмотру ротовой полости может помочь в диагностике многих заболеваний, а иногда и впервые их выявить.

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## ANALYSIS OF SOME ASPECTS OF MEDICAL CARE DEFECTS IN TREATMENT OF FRACTURES OF THE LOWER JAW

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**Introduction.** Fractures of the mandible (mandible) account for 60-80.8% in the structure of traumatic injuries of the facial skull. According to the literature, there is a steady trend towards an increase in their frequency next to an increase in the frequency of severe fragmentation, multiple fractures and combined injuries.

The purpose of the study. To study the frequency, nature and causes of defects in medical care during surgical treatment of HPV and to determine possible directions for their prevention and improvement of the quality of dental care.

**Materials and methods of research.** The medical documents of 72 patients with HPV of various localization were examined, 127 osteosynthesis operations were performed in medical institutions of Samarkand and the Samarkand region for the period from 2012 to 2017, who were treated by medical institutions for complications or unsatisfactory treatment results.

**Results.** Men (83%) of the most able-bodied age prevailed - from 20 to 50 years (82.5%). The main etiological factor of PNH was household trauma (in 76% of cases). Other causes of their occurrence were transport (in 17%), sports (in 2%), industrial (in 3%) injury, as well as gunshot wound (in 1%) and iatrogenic injuries (in 1%). Unilateral fractures were detected in 35 (43%) patients, bilateral and double fractures - in 39 (48%), triple and fragmentary fractures - in 7 (9%). PNH was combined with traumatic brain injury in 29.3% of the victims, fractures of other bones of the facial skull - in 10%, fractures of the bones of the trunk and limbs - in 10%, facial wounds - in 8.5%, damage to other organs and systems - in 7%. In 6% of the victims, severe combined trauma was noted, accompanied by traumatic shock of varying severity.

Conclusions: The main mistakes were: incorrect determination of indications and contraindications for osteosynthesis; inaccurate reposition of fragments during surgery, unreliable fixation of fragments, lack of sufficient stability; unjustified increase in invasiveness of intervention, incorrect tactics with respect to teeth located in the fracture line; the appointment of an inadequate load regime on the dental system after surgery. The most common error was insufficient stability of fixation of fragments, it was admitted in 26% of observations and was the main prerequisite for the occurrence of secondary displacement, slowing down the consolidation and formation of false joints, infection attachment, loosening and displacement of fixing screws, and required the removal of fixing elements in the distant post-traumatic period.

ИЗУЧЕНИЕ ЭФФЕКТИВНОСТИ ЛЕЧЕНИЯ ПАТОЛОГИИ ДИСТАЛЬНОГО ПРИКУСА С ИСПОЛЬЗОВАНИЕМ АППАРАТА TWIN-BLOCK

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