

ASPECTS OF DENTAL DISEASES IN PATIENTS WITH CHRONIC HEPATITIS B.(LITERATURE REVIEW).

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ANNOTATION

The focus of this review is on the prevalence of hepatitis B infection and its various oral manifestations, consequences, and clinical course. Briefly summarized information about the presence and nature of the relationship between the composition of periodontal microorganisms and concomitant somatic diseases: in atherosclerotic plaques in cardiovascular diseases, with pathology of the gastrointestinal tract, respiratory system and other organs and systems.

Key words: hepatitis B, oral cavity, liver dysfunction.

Relevance. To date, as a result of numerous clinical and experimental studies, the relationship between changes in the oral cavity and pathology of internal organs has been established. In modern dentistry, interest in the study of concomitant pathologies is explained by the accumulation of new arguments, the emergence of new information in the system of the whole organism. In this regard, questions about the connection of diseases of internal organs, in particular the liver and oral organs, are relevant. The development of mucosal lesions and inflammatory diseases of the periapical tissues of the oral cavity (in particular, complications arising after tooth extraction) aggravates the course of the underlying disease and represent the features of therapeutic and preventive measures [1,5,13,16].

Currently, inflammatory diseases of the dental system are considered not as an isolated pathology, but as a complex of diseases affecting the body weight. Timely assessment of the state of dental diseases and the choice of modern rational treatment

by a specialist is the most important problems of dentistry [2,3,9,11].

Viral liver lesions occupy an important place in assessing the state of dental health of patients. At the same time, dentists and doctors of other specialties do not pay due attention to the condition of the oral cavity in liver diseases [4,5,11,13]. There are very few developments on dental tactics for managing patients with hepatitis. In countries with a high level of dental service, there is also no accumulated experience on this problem. The widespread spread of hepatitis, in particular hepatitis B, requires in-depth dental research.

The aim of the study was to study the literature data concerning the state of the oral cavity in dental diseases and their prevention in patients with chronic hepatitis B.

A thorough review of the literature was conducted, in which most of the articles published in peer-reviewed journals related to the topic of hepatitis B in dentistry participated. The review itself began with a search for relevant keywords related to hepatitis B infection, such as hepatitis transmission, oral manifestations of hepatitis and dental treatment of hepatitis B in various search engines. The focus of this review is on the prevalence of hepatitis B infection and its various oral manifestations, consequences and clinical course.

The search was also aimed at infection control measures and strategies for transmission and post-exposure prevention of HBV viral infection.

Hepatitis is an inflammation of the liver, which is a vital organ, participates in metabolism, produces bile necessary for digestion of food and helps the body to get rid of residual substances. Due to inflammation, these liver functions may be impaired. Hepatitis is caused by viruses, alcohol, drugs, medications and other factors. Hepatitis can be caused simultaneously by several factors [3].

Viral hepatitis is a widespread infectious disease that occupies one of the first places among human viral diseases. According to the World Health Organization [6], every third inhabitant of the planet is infected with this

an insidious virus. It should be noted that the incidence of viral hepatitis has increased dramatically in large cities of our Republic. As for the incidence of viral hepatitis B, Uzbekistan also has a tense epidemiological situation with a steady upward trend, especially in recent years. Adolescents and young people generally occupy an important place in the structure of the registered morbidity (80%). Viral hepatitis B is currently associated with the majority of deaths (this infection ranks 2nd among the causes of death from infectious diseases) and most cases of chronic liver diseases, including cirrhosis and primary liver cancer [5].

About 30-50% of adults and children develop a clinical disease typical of

hepatitis B after initial exposure to hepatitis B. The incubation period for hepatitis B is usually 60 to 150 days. Early symptoms that occur before jaundice include symptoms such as malaise, fatigue, and anorexia for 1-2 weeks. In the acute phase, typical clinical signs and symptoms include nausea, vomiting, abdominal pain and jaundice. In some cases, skin rash, joint pain and arthritis may occur. Acute hepatitis B turns into a chronic hepatitis B infection in 30-90% of people infected with infants or young children, and in adolescence or adulthood, <5% of infected people may develop a chronic infection. Chronic hepatitis B infection leads to chronic liver diseases, including cirrhosis of the liver and hepatocellular carcinoma.

Manifestations in the oral cavity

A special place in domestic and foreign literary sources is reserved for the study of manifestations of liver diseases in the oral cavity [12]. The study of the oral cavity in liver diseases is of interest to clinicians (A. G. Kucher 2016), since the painful processes that develop in the liver mainly provoke organic and functional disorders in the oral mucosa and periodontal [14]. Often, patients with hepatitis complain of burning and tingling in the area of the tongue and lips. Burning sensation and mucosal soreness are often accompanied by a feeling of itching, which is especially pronounced in the palate [13].

In 1928, G. A. Rapoport noted that the color of the mucous membrane of the soft palate has great diagnostic value, since it is this area of the oral cavity from an embryological point of view that is one with the lower gastrointestinal tract, including the liver [7].

As well as lichen planus, Sjogren's syndrome and sialadenitis, cheilitis, smooth and atrophic tongue, xerostomia, bruxism, crusted perioral rash, oral soreness, some forms of oral cancer can also be observed [8].

In addition, patients with cirrhosis of the liver may have thrombocytopenia due to hypersplenism or interferon treatment. In patients with liver diseases, hemostasis disorder may manifest in the mouth in the form of petechiae or excessive bleeding of the gums with minor trauma. This is especially suggestive if it occurs in the absence of inflammation. Therefore, special attention should be paid during any type of surgery, oral or otherwise; severe bleeding may occur as a result of a lack of clotting factors.

The relationship between hepatitis B and the state of the oral organs is due to metabolic disorders, hemodynamics, immunological and neuroregulatory disorders and shifts in microbiocenosis. The processes occurring in the oral cavity are directly or indirectly related to the influence of both external and internal factors, therefore, the peculiarities of local changes in the oral cavity can affect other organs of the body, and the state of the body can affect the state of the oral cavity [].

Consequently, due to the existence of a close functional connection between the affected organs, a dependent course is characteristic of the combined pathology diseases. In this case, the concomitant pathology of chronic hepatitis of viral etiology is of interest in this regard.

As E. V. Udovitsky and L. V. Groholsky (2013) point out, in pediatrics and dentistry, an important role is played by the characteristic of the upper surface of the tongue, which has long been considered a mirror of the state of the entire human body [9].

Changes in the language in liver pathologies, according to clinicians, [13] doctors consider it a significant task to clarify the norm and pathology in the anatomy of the papillary cover of the tongue for the diagnostic reliability of liver diseases. Manifestations of pathologies in the area of the tongue can be expressed in unnatural coloration of the mucous membrane, the appearance of desquamation areas, the proliferation of individual epithelial areas and the formation of furrows on the back of the tongue. Manifestations of pathologies of internal organs on the back of the tongue are caused by microcirculation disorders, at the same time there is an increase in the processes of epithelial hardening and the rate of its desquamation increases [11].

The red border of the lips and the oral mucosa in patients with hepatitis are dry and thinned. There may be cracks on the lips with delayed recovery of the epithelium, a tendency to infection, and there may also be manifestations of candidomycosis. In weakened patients, mycotic mucosal lesion is chronic [10]. It is noteworthy that with hepatitis, aphthous rashes may occur on the oral mucosa, which has been proven experimentally.

During the observations of S.A. Khachatryan (1959) and Ya. I. Gorenstein (1972), the relationship between viral hepatitis and foci of odontogenic infection was revealed [1]. The latter can affect the course of acute hepatitis and have an effect during convalescence. The authors believe that dental examination and therapy of odontogenic infectious foci during the medical examination of patients with viral hepatitis B is an important factor in terms of preventing residual hepatitis phenomena.

Also, in liver diseases, there are changes in periodontal disease [5]. N. N. Garaza (2013) drew attention to the fact that patients suffering from chronic forms of hepatitis may have three degrees of severity of gingivitis: mild, moderate and severe

It is known that in chronic liver diseases, secondary immunodeficiency is formed, which is of great importance for the oral mucosa and the whole organism as

a whole, therefore, the importance of the problem of studying the oral mucosa in patients with liver pathology requiring timely and constant correction becomes clear. Of interest is the fact that infection with hepatitis viruses is also possible through the oral mucosa, for example, when kissing. It has already been proven that hepatitis B viruses are transmitted by all body fluids - up to 30% of the hepatitis B virus. In this regard, the role of oral mucosal examination for the prevention of transmission of the virus between parents and children and between spouses becomes obvious [13].

The issues of combined lesions of the oral cavity and internal organs among the problems of dentistry currently occupy a prominent place, as they allow us to reflect the essence of the genesis of diseases manifested in the oral cavity. These changes are often the first signs — markers of emerging general somatic pathological processes, the study of which allows for early diagnosis of many diseases of internal organs [11]. Even after the introduction of many programs and strategies, hepatitis continues to be a health problem in dental settings. Thus, this study examines aspects such as the usual oral manifestations of hepatitis B, so that a doctor can properly diagnose, prevent and control the transmission and progression of this deadly disease.

Conclusion. Hepatitis can have a serious effect on blood clotting and other significant correlations and extrahepatic oral manifestations. Thus, preventive oral hygiene measures should be implemented to reduce the need for dental surgery. Prevention is an important aspect in the fight against the spread of this viral infection as an epidemic. Knowledge of the facts, proper awareness, proper behavior and attitude to the clinical aspects of infection and to patients are crucial to prevent the spread of these infections.

Further publications will be devoted to this topic, given the lack of information in the published literature about patients with chronic viral hepatitis B for oral surgery.

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