HYGIENIC ANALYSIS OF THE CONSUMPTION OF CARBOHYDRATES AND PRESERVATIVE PRODUCTS IN PATIENTS WITH PERIODONTISSIS

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Relevance of the problem

In today's era of development, one of the urgent problems of modern nutrition is to prevent diseases by promoting healthy eating among various segments of the population, as well as to create conditions for preventing the complications of various nutritionally related diseases that arise due to a lack of animal proteins and fats, vitamins and minerals in the daily diet [1,2,3,5,7].

The modern stage of development of clinical dentistry is characterized by a high level of fundamental and practical work on the prevention, diagnosis and treatment of periodontal disease. At the same time, despite the scale of research conducted in our country and abroad, many aspects of this complex pathology remain unclear.

The importance of the quality of diagnosis and prognosis of the course of the disease for the prevention of periodontal inflammatory diseases and the selection of rational treatment is determined by several factors. Firstly, the total volume of periodontal disease affects 85-90% of the adult population, and gingivitis and periodontitis - 92-95%. Secondly, these lesions are characterized by the progressive nature of the process and clinical manifestations in various forms. Untimely detection of these diseases, poor-quality diagnosis and inadequate treatment lead to unsatisfactory results for dentists and patients. This makes the implementation of periodontal disease diagnostic methods an urgent problem [1,2,3,5,7].

As a result of the lack of vitamins A, E, D, K, as well as calcium, selenium and trace elements in the daily diet of patients with periodontal disease, a sharp increase in the incidence of the disease occurs, and the need for preventive measures aimed at its prevention has been repeatedly emphasized in the works of a number of authors [1,2, 4].

Hygienic analysis of the diet of patients with periodontal disease is one of the urgent problems facing professionals in the field.

The aim of the study is to analyze the status of carbohydrate-rich foods in the diet of patients with periodontal disease in the winter-spring season of the year.

Materials and Methods

The studies were conducted at the beginning, middle and end of each month in the winter-spring season of the year, during the general season, at the beginning, middle and end of the month, 54 (on average 9 per month) meals were analyzed on the basis of the analysis of the composition and quantitative and qualitative indicators of carbohydrate-rich products (bread and bakery products and fruits and vegetables) in their composition.

The patients' daily diet and its physiological composition were carried out according to the requirements of SanNvaQ 0007-2020 "Average daily rational nutrition standards aimed at ensuring healthy nutrition for age, sex and professional activity groups of the population of the Republic of Uzbekistan" [6] sanitary norms and rules. The amount of the chemical composition of the daily diet was carried out according to the "Chemical composition of food products" [4].

The statistical processing of the research results was carried out using the personal computer application package "Statistica for Windows 7.0".

Results and Discussion

The daily diet of 155 men aged 30-60 years diagnosed with periodontitis and the level of consumption of products high in carbohydrates were hygienically analyzed. The studies were carried out in the winter and spring seasons of the year.

In the diet of patients, bread and bakery products, flour, high-grade wheat flour, rice, wheat bread were consumed excessively during the day in the winter and spring seasons of the year, while cereals and rye bread included in the composition of bakery products were consumed significantly less than the established physiological norm.

In the daily diet of patients, wheat flour accounted for 123.3% in the winter season and 113.3% in the spring season, which was on average (118.3%).

Among bread and bakery products, the consumption level of premium bread was 195.4% in the winter season and 197.6% in the spring season for men, while rye bread was 52-67% during the day in the same order.

It was found that cereals (semolina, millet, buckwheat, oatmeal, lentils, pearl barley) were insufficient in the daily ration, and their consumption level was 24.0-40.05.

It was found that the consumption level of confectionery products was 2.2-2.3 times higher in the winter-spring season.

Fruits and vegetables are also sources of carbohydrates. The daily consumption during this season was 31.2-42.25, while the consumption level of pumpkin was 17.5-137.5%.

The amount of melon products and other vegetables was also low, and the consumption level of some fruits and vegetables was significantly lower. This indicates a low level of

consumption of fruits and vegetables by the population, taking into account national traditions.

Grape consumption in the spring season was 5-7% in the patients under control, and in the winter season it was 60-70%. The level of consumption of dried fruits was 18.4-28%.

The physiologically insufficient intake of cereals and fruits and vegetables from carbohydrate-containing products in the daily diet of patients led to a deficiency of vitamins A, C, and B.

Conclusion

Our research shows that if patients with periodontitis do not replace the products that are significantly below the physiological norm in their daily food consumption, the disease creates additional conditions for the development of oral cavity and other diseases, as well as the development of complications of the disease.

References

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