MICROBIOLOGICAL EVALUATION OF TREATMENT EFFICACY OF PURULENT-INFLAMMATORY DISEASES OF THE MAXILLOFACIAL REGION IN CHILDREN AFTER DIFFERENT TREATMENT METHODS

Annotation. The main reason for this is the growth of mono- and multidrug-resistant microbes, adaptogenic changes in virulent factors, and others. Also significant changes on the part of macroorganisms, which is mainly expressed in changes in immune status, under the influence of various environmental and social factors has become one of the reasons for the increase in inflammation of this kind. Thus, according to M. Azimov (2013), the number of patients with odontogenic inflammatory diseases of the maxillofacial region treated in the department of paediatric maxillofacial surgery 3 clinic of the Tashkent Medical Academy for the last 10 years has increased 2-fold.

Purpose of the study: Analysis of microbiological evaluation of the effectiveness of treatment of purulent-inflammatory diseases of the maxillofacial region in children after different treatment methods

Materials and methods of research. Studies of microbial flora were carried out in 72 patients with purulent-inflammatory processes of the maxillofacial region. These studies were conducted in the laboratory of "Clinical Microbiology" at the centre of maxillofacial surgery of the Tashkent State Dental Institute.

Children taken for the study were divided into 3 groups:
I gr. consisted of 10 children healthy group with no pathological processes;
II gr. consisted of 15 children who received traditional therapy;
III gr. consisted of 57 children who underwent special treatment. At the same time this group was divided into 3 groups according to the conducted treatment:
1) the first group of 16 children who were treated with microdacin as a special treatment;
2) the second group of 19 children treated with IRS 19;
3) the third group of 22 children who were treated with a complex preparation: microdacin + IRS 19.

Results of the study: The material from the sick children was taken during the operation of opening phlegmons, disposable sterile syringe by suctioning pus in the volume of 0.1-0.5 ml. The collected material was delivered to the microbiological laboratory within 2 hours. In the laboratory, serial dilutions were prepared from the obtained material. After that a certain volume was seeded on highly selective nutrient media such as: yolk-salt agar, blood agar, Mueller Hinton agar, Sabouraud agar, esculin agar, etc. All these media are obtained from Hei Media, India.

After seeding0, all the dishes were brought into the thermostat at 37°C for 24-48 hours. After the expiry of incubation period, the dishes were removed from the thermostat and counting of the grown colonies was done. Identification of the grown colonies was carried out in Gram stained smears, by studying the culture biochemical and serological properties. The obtained quantitative indices were performed in lg /M±m/ KOE/ml.
**Conclusions:** Thus, fighting infections alone was not our only goal. Our goal is to heal wounds as quickly as possible. This requires a combination of efficacy and safety. It is quite natural that Microdacyn Wound Care cannot be called the most powerful, "antimicrobial" remedy, but using natural ingredients in the body (actually the same ingredients that our body's immune system uses) speeds up the healing process by stimulating the body's own healing process.

**References:**