

# **PROBLEMS OF THE DEVELOPMENT OF SCIENCE AND THE VIEW OF SOCIETY**

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# **STUDY OF METHODOLOGICAL APPROACHES TO THE DIAGNOSTICS AND TREATMENT OF PATIENTS WITH PERIODONTAL DISEASES BY PROSTODONTISTS AND GENERAL DENTAL PRACTITIONERS IN UKRAINE (ANALYSIS OF THE SURVEY RESULTS)**

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The rehabilitation of patients with periodontal diseases still remains an actual and not finally solved problem, despite recent clinical advances and a large number of research efforts [1, 2]. The lack of a clear idea about the cause-and-effect relationships of the development of periodontal diseases significantly complicates its effective treatment and prevention [3]. The modern concept of treatment of periodontal patients involves the application of complex methods of examination and planning the sequence of treatment using therapeutic, surgical, orthodontic and orthopedic methods for the fastest and most effective restoration of the functional harmony of masticatory apparatus [4, 5].

Based on the above, it can be assumed that the choice of diagnostic methods and planning the sequence of treatment measures can be a decisive factor in order to obtain a predicted positive result and prevent complications [5, 6]. Therefore, the field of research of personalized methodological approaches to the examination of patients with periodontal diseases requires close attention from scientists and dental practitioners due to its extreme relevance [7].

**The aim of the study.** To analyze methodological approaches to the diagnostic process and rehabilitation of the patients with periodontal diseases which the prosthodontists and general dental practitioners prefer depending on modern trends and the clinical situation by means of an anonymous questionnaire.

**Materials and methods.** 116 dentists (prosthodontists and general dental practitioners) have taken part in the study, who have filled in the anonymous questionnaires randomly sent to the e-mail addresses of Ukrainian dental institutions, as well as distributed in printed format.

The specially developed questionnaire consisted of 24 questions, 14 of which related directly to methods of diagnostics of periodontal diseases. Participants were

also asked to answer the following questions: "How often do you encounter periodontal diseases in your daily practice?", "What models of doctor-patient communication do you use at a clinical appointment?", "Which approaches to the treatment of patients with periodontal pathology do you prefer in your daily practice?", "What classifications of periodontal tissue diseases do you use in everyday practice?", "Does your choice of examination protocol for patients depend on a specific clinical situation?", "Do you ask patients about their general health status and suffering of general somatic diseases?", "Do you support the concept of minimal invasion in the diagnostic process and how is this expressed in your practice?", "Do you use digital technologies during examination and treatment planning?", "Do you agree with the feasibility of their use during diagnostic process in patients with periodontal diseases?", "What methods and means do you use to increase the motivation of patients with generalized periodontitis to a more thorough examination and treatment?". We also analyzed the age, work experience and specialization of dental practitioners.

**Results.** The survey showed that doctors' knowledge of important diagnostic symptoms of inflammatory periodontal diseases was unsatisfactory. It also showed that the greatest difficulties the dentists faced during diagnosis formulating: 25% of doctors formulated the diagnosis of the periodontal condition arbitrarily. 90.8% of prosthodontists didn't know the rules of clinical decision making, 31% of dental practitioners were not familiar with the concepts of "disease diagnosis" and "patient condition diagnosis". According to results of the survey, specialists mostly use clear clinical signs when diagnosing periodontal diseases, while not evaluating their quantitative manifestation in the form of special indices. Thus, when choosing additional methods of examination, 78.4% of respondents were guided by the clinical situation; 69% performed only X-ray examination. Only 29.3% of the interviewed doctors thoroughly asked patients about their general health status and present somatic pathologies. Quantitative and qualitative assessment of occlusion in patients with periodontal diseases was carried out only by 9.7 % of respondents; 1.2% perform temporary splinting of the teeth for diagnostic purposes and 0.5% of the surveyed doctors use an index assessment to evaluate the condition of periodontal tissues. During the planning stage, 74.6% of respondents didn't carry out a thorough occlusion analysis, 95.7% don't use digital technologies, 67.2% don't analyze the depth of the periodontal pockets and do not use an index assessment of the periodontal condition at all, considering these manipulations to be time-consuming and not appropriate. Also, a large number of specialists explain their actions by the low motivation of patients in view of the long-term prospects of the course of the disease and the imprecision of long-term forecasts. Also, 60.3% of respondents tried to support the "minimum invasion concept" in the diagnostic process in everyday practice. Analyzing the age of the interviewed specialists who prefer a differentiated systemic approach in the diagnostics and treatment of periodontal diseases (21.6% of the interviewed doctors), 52% of the doctors were aged from 35 to 44 years, 24% - aged from 25 to 34 years, 18% - from 45 to 54 years old, and only 6% of dentists are over 55 years old.

**Conclusions.** In general, the survey of prosthodontists and general dental practitioners showed unsatisfactory knowledge of the theory of diagnosis, regardless

of the location and work experience of all respondents. Despite the significant prevalence of this pathology, a large percentage of prosthodontists in their practice use a situational approach to the treatment of patients with periodontal diseases, based only on the local condition of oral cavity and a specific situation at the time of decision-making. This approach greatly complicates the prognosis and prospects of disease control. Thus, most dentists do not use a systematic approach to diagnosing this disease. This indicates a low level of awareness among dental practitioners and a certain degree of bias towards conservative methods of treatment. Low percentage of doctors who carry out the measures to increase the motivation of patient indicates a lack of interest in long-term communication with the patient and possible responsibility for predicting the course and outcome. That's why in terms of the WHO recommendations to focus efforts on the formation of the population's motivation to prevent dental diseases or to reduce their severity, the issue of theoretical justification of the feasibility of a systemic differentiated approach to the selection of diagnostic and treatment methods in patients with periodontal diseases should become the main and more widely covered in domestic specialized publications.

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