

# Methods of Examination of Patients with Damaged Mucous Floor of the Oral Cavity.

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**Abstract:** In this article, injuries occurring on the mucous membrane of the oral cavity - morphological elements, methods of examination of patients with damage to the mucous membrane of the oral cavity, the level of intelligence of medical personnel, the mental state of the patient taking into account the diagnosis of the disease and during direct questioning with the patient, instructions were given on the formation of the skills to gain superiority in the diagnosis by studying the patient's lifestyle.

**Key words:** Communication, diagnosis, method, disease, subjective examination, wound, pain, face shape, skin structure , injuries .

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Injuries on the mucous membrane of the oral cavity - morphological elements . It is very important to know the symptoms and elements of various diseases in the oral mucosa, in diagnosis (diagnostics).

The main elements are:

- 1) changes in the color of the mucous membrane.
- 2) changes in the surface of the mucous membrane.
- 3) accumulation of fluid in a certain area of the mucous membrane.
- 4) the appearance of a coating on the mucous membrane (these areas rise above the surface of the remaining healthy mucous membrane).
- 5) the presence of defects (defects) in the mucous membranes.

These elements can be primary and secondary. If the primary elements are in different views , it can be understood as a multiform rash. There can be various injuries (trauma) in the mucous membrane : Various injuries are observed as a result of various mechanical, chemical factors, burns or various inflammations.

**are divided into the following :**

- 1) warming up ;
  - 2) crushing , (erosion);
  - 3) wound (yazva).
1. In erosion (erosion), only the superficial part of the mucous membrane is injured.
  2. In crushing, scratching, the entire layer of the epithelium (only the mother-primary growth layer) is injured and destroyed. Therefore, after treating these, there are no scars on the mucous membrane. These are superficial injuries. Sometimes, fine scars may remain after treatment of bruises and scratches. These elements can be observed not only in injuries, but also in gastrointestinal and infectious diseases (erosive stomatitis IANovik, AIRibakov, etc. ).
  3. Ulcers (wounds) in the oral cavity due to mechanical injuries, light disease, chemical, temperature effects, special infections (wound-syphilis, tuberculosis-tuberculosis, speed, Leprosy-Leprosy), etc. can be in zo and system diseases. What should be understood by a wound? A wound is a pathological condition caused by tissue decay (necrosis) in a certain part of the body. Some wounds can leave patients with difficulty for months and years - these wounds are trophic wounds, which are found in diabetes, cardiovascular diseases, vitamin deficiency diseases and other common diseases. In addition , sometimes there may be ulcers (lesions) on the cancerous tumors. Discoloration of the oral mucosa is also observed in various pathological conditions. Discoloration occurs from all exo and endogenous causes.

**External influences (exogenous ) mainly** belong to the types of occupational diseases. For example: black, brown, on the oral mucosa (more lips, gums, tongue, tongue) of workers of enterprises that produce silver or silver preparations, mercury, copper and similar heavy metal salts colored spots, in addition to food (tea, some

fruits, cherries, coffee, cocoa) after eating cigarettes, tobacco, nose, various color changes in the teeth and mucous membrane in smokers it can.

**Internal (endogenous)** causes form the main group: yellow color in Botkin's disease and liver diseases, red color in acute inflammations, blue, blue-black colors in chronic inflammations.

Changes in the surface of the mucous membrane, such as crusting, scaly, lumpy, nodular, raised (raised) abscesses, ulcers, scabs, scratches, some injuries, atrophic scars, skin cancer and other mucous and chemicals on the floor reduce the level of the mucous membrane. There are many specific ways to examine such patients, particularly those with oral mucosal disease.

In general, they are divided into 1 ) subjective (question-and-answer with the patient, survey), 2) objective (viewing the general condition of patients, oral cavity) methods. Objective vision, in turn, is divided into basic and additional or auxiliary methods. The only purpose of carrying out these methods is to make the diagnosis of the disease as accurate as possible, to find out about other diseases that have been missed or are going on in this particular period.

Hippocrates, Abu Ali Ibn Sina, and many Russian scientists (such as GAZaharin, SPBotkin, M.Ya. Mudrov, etc.) emphasized the importance of question-and-answer, dialogue, and inquiry with the patient. M. Ya. Mudrov writes: "after detailed questioning, to determine the general condition of the patient, the doctor examines him from head to toe, paying attention to the patient's face, eyes, forehead, lungs, mouth, nose it is necessary that, usually, symptoms of the disease can be reflected in these places..." Thus, detailed subjective examinations play an important role in making a diagnosis. It should be noted that, despite the dentist's time limitation, it is necessary to carry out thorough and complete examinations in these diseases.

**Question and answer with the patient.** This process should be started from the passport part without haste: after familiarizing the patient with information such as name, age, profession, complaints, when they appeared , approximately (according to the patient's opinion) what they are related to, etc. it is necessary to find out the information. During the survey, in order to draw the patient's attention to the symptoms of the suspected disease, asking additional, goal-oriented questions, asking when, in what situation and after what, what is associated with the symptoms of the disease, what causes them to increase (for example, pain ) and what should be relieved and the dentist should try to identify such cases.

they come to the dentist with a complaint of pain . However, sometimes there are various unpleasant sensations in the oral cavity, unpleasant odor, taste disturbances, or various ulcers, sores, swellings, bleeding from the gums during tooth brushing, disturbed sleep, low appetite, etc. patients may come with many different complaints. If patients come with pain in the mouth or in the teeth, gums, tongue and similar places, what is the cause of the pain, the time of its onset, the reasons for the attack, its location, its intensity it is necessary to determine such cases. Or, if an ulcer appeared in a certain place of the oral cavity, the time when the ulcer began (appeared), the reason (in the patient's opinion), whether there are general diseases of the body, whether or not it has recently been o It is necessary for a doctor-dentist to familiarize himself with chronic diseases and conditions.

During the question-and-answer session with the patient, there are many signs of the disease, for example, if the patient cannot speak well, the movement of the tongue is limited and it causes pain or inflammation, or some letters are not pronounced well. , it indicates that there are changes in the oral cavity, such as inflammatory processes, wounds, swellings, which the doctor will immediately understand. For example, if the mucous membrane or red borders of the lips are inflamed, in the case of pathological changes in them, swelling occurs , and the movement of the lips (when speaking, taking food) is accompanied by pain, some letters (m , f, b, p, v.), if this condition is on the mucous membrane of the tongue, the pronunciation of the letters l, s, r, d, s, p, k, is disturbed. Or, if there are lesions on the palate (tuberculosis, wound-syphilis, leprosy-leprosy, injury-trauma), as you know, the pronunciation of words is disturbed. Thus, the doctor, talking to the patient, can simultaneously learn about the pathological changes in the organs of the oral cavity and the related task change.

**Subjective examination** methods, moving to objective methods, examining the patient's general condition, eyes, facial skin, ears, etc. , i.e. external objective examinations, observations are also much additional. enables

data collection. In addition to the above, it is necessary to conduct external objective examinations and identify infectious, inflammatory, dental diseases, changes in the lymph nodes, changes in the maxillofacial area, etc.

**External objective examination** of the face and surrounding tissues, the general condition of the patient, the shape of the face, the position of the head, the color of the skin, the color of the eyelids, the speech and the pronunciation of words, and the like. will be important for diagnosis. There is a change in the plane of the face (symmetry), inflammation, swelling, injuries, pricus changes .

In acromegaly, myxedema, Cushing's disease, Quincke's disease, Meitschish-burtma and other similar cases, the facial structure changes. In some diseases of the jaw and face (pulpitis, periodontitis), the color of the eyelid changes. When there are various rashes on the face, erythema and other diseases, the color of the facial skin changes. In the case of bleeding (hematoma) on the skin due to various injuries, stomatitis, lymphadenitis, wound (syphilis) , leprosy, various skin diseases (seborrhoea, skin tuberculosis and other diseases), speaking, speech along with pronunciation, there may be color changes. In diseases of the oral mucosa, it is important to undress the patient and see his whole body.

**Additional methods** include cytological, histological (biopsy), biochemical and other methods.

### Summary:

As mentioned above, taking into account that the oral cavity is a window of internal organs and systems, the degree of connection between dental disease symptoms and internal organ and system diseases is determined by the doctor-dentist, clinical-laboratory methods, therapists, endocrinologists. , it is always advisable to use the help of doctors working in psychiatrist, otolaryngologist, covenereologist, surgeon, hematologist and other specialties. Taking into account various changes in the oral cavity in diseases of the gastrointestinal tract, cardiovascular, liver, lungs, urinary tract and other internal organs and systems should be transferred. Inspection should be done in natural light. Artificial lamps can change the color of the mucous membrane and the doctor can be mistaken. In acute inflammation, the presence of all signs of inflammation noted in the pathophysiology of the mucous membrane (redness, increase in temperature at the site of inflammation , swelling of tissues, pain and change in function) is defined by

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