

REHABILITATION DIET PATIENTS USING THE DENTAL AND MAXILLOFACIAL PROSTHESES.

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A brief literature review is dedicated to the development of a balanced diet for persons using the dental prostheses. The article presents basic information on nutrition, which reduces the load on the prosthetic temporomandibular joint, periodontal, prosthetic bed mucous membrane, thereby reducing discomfort arising when using the prosthesis. Also, the basic recommendations to create a full diet that both reduces the load of chewing and affect the homeostasis of the organism as a whole.

Key words: rationalization of power, orthopedic design, dentures, oral implants.

After any orthopedic treatment comes an adjustment period, during which the patient gets used to the prosthetic design. At first, the possible emergence of problems with reception of food is therefore necessary to reconsider the diet by excluding sharp, sticky and hard food. It is recommended to avoid diets, adhering to proper nutrition, which includes carbohydrates, proteins, fats, and vitamins. Complete diet that provides our body with all the necessary micro and macro - the best means of prevention of oral diseases, especially after the prosthesis. But power is not limited to the impact of oral health, since, depending on the quantitative and qualitative features of the nutrient regime, significantly change the pH indicators of environment, the functional activity of organs and systems, which may lead to a deterioration in the general condition of patients. [1,3,4,5]

In patients using orthopedic structures, violated the metabolic processes in the periodontium when chewing pressure, which leads to a functional overload and mucosal tissues [1,2,3,4]. This is due to the fact that the load falls on the fabric, which are unable to accept it, since even the best quality is configured denture foreign body to the body. As a result, there are all sorts of inflammatory or degenerative processes in the periodontium, causing discomfort and pain when chewing [5,6,7,8]. Based on the foregoing, it must be concluded on the need for a balanced diet in orthopedic prosthetic treatment, which helps reduce the design pressure on the mucous tissue when chewing and, thus, excluding them uncomfortable wearing.

In recent years, special attention is paid to the development of a special streamlined supply for persons using various types of dental prostheses and jaw. It is based on the replacement of daily meals for more forgiving (that reduce the pressure of chewing forces and its uniform distribution in the dentition) for periodontal and help improve metabolism in periodontal tissues, without changing the volume and the energy value of the food consumed. [9,10]

In the period of adaptation of the organism to the foreign body it is important to follow a diet. Estimated diet should contain soft food, low viscosity, and adhesion to artificial and natural

teeth, which in addition to reducing the amount of chewing pressure, reduces the time on her chewing, thereby increasing the period of rest of the masticatory muscles, the temporomandibular joint, periodontal mucosal prosthetic bed . This diet should meet the adequate human power inputs, be qualitatively balanced and take into account the availability of physical comorbidity in patients [10].

From the usual diet should exclude sharp, viscous, solid products, giving preference to boiled grinded dishes. Also, do not bite off a piece of the whole, it is necessary to cut and chew small pieces. Over time, you can go to the usual diet, except products such as crackers, hard biscuits, toffee and some deli meats. [9.10]

The basis of a balanced diet is a balanced amount of protein, carbohydrates and fats provide the body with energy, and - sufficient quantities of vitamins, minerals. Carbohydrates, proteins and fats - three key macroelements that support the biochemical function of the body and provide it with energy [23].

All carbohydrates can be divided into two groups depending on the glycemic index

The glycemic index (GI) - a symbol rate of cleavage of any carbohydrate-containing product in the human body as compared with the rate of glucose digestion, whose glycemic index is considered as the standard (GI Glucose = 100 units). The faster the process of splitting the product - and the higher its GI index.

Thus, all can be divided into groups carbohydrate foods with a high (GI 70), medium (GI 40 - 70) and low GI (GI less than 40).

Preference should be given to products with a lower glycemic index. However, the use of such products may be beneficial after intense exercise, as they quickly restore the wasted energy reserves [2,6].

The average daily rate of carbohydrate intake should be between 257 to 586 g / day, depending on the degree of physical activity.

The protein can be defined as a construction material of the human body, which forms the cell walls, and muscle fiber. Just as important, he actively participates in the work of the immune system. However, the daily diet should also be half-and vegetable protein: nuts, legumes, cereals. The optimum daily protein rate: 1-1.5 grams per 1 kg of body weight.

The role of fat for the body's activities is equally important. Fats activate the protective function, are involved in the metabolic processes of the body. Half of the pool daily fat should be animal fats and the other half - vegetable oils. In the daily diet for men must be included between 70 and 154 g / day of fat for women - from 60 to 102 g / day.

In drawing up the nutrition you need to remember about a certain mode of eating. The most optimal would be 4 - 5 meals a day. The interval between meals should be not less than 3 but less than 5 hours. Must eat regularly and preferably at the same time.

Another important point - is the ability to combine the products so that they reinforce each other useful qualities and well digested. Meals should be varied as much as possible to provide the body with all the necessary materials for his life.

Appointment of a special nutrition to patients, in addition to the elimination of the traumatic factor, prevents the development of complications caused by the alimentary restrictions.

Conclusion

After analyzing the current literature on the subject, we can confidently assert that the chewing pressure is normalized through the appointment of a balanced diet, which leads to the reduction and redistribution of functional overload periodontal tissues and prosthetic bed. It is necessary to consider the overall condition of the patient at the time of prosthesis, the presence of his accompanying somatic pathologies, which entail exclusion from the diet of any individual product.

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