



ORAL HYGIENIC INDICATORS IN PATIENTS WITH CHOLELITHIASIS AND WAYS TO OPTIMIZING TREATMENT AND PREVENTIVE MEASURES

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ABSTRACT

A comparative assessment of oral hygiene was conducted in patients with gallstone disease and a control group. The examination included the determination of hygiene indices characterizing plaque levels and periodontal tissue condition. Analysis of the obtained indicators allowed for an objective assessment of the severity of individual oral hygiene problems. Based on the study results, recommendations were developed to adjust oral hygiene practices and optimize dental treatment for this patient group..

Purpose of the study. To assess the hygienic condition of the oral cavity in patients with cholelithiasis and to substantiate directions for optimizing treatment and preventive measures.

Materials and methods. A comparative assessment of oral hygiene was conducted in patients with gallstone disease and a control group. The examination included the determination of hygiene indices characterizing plaque levels and periodontal tissue condition. Analysis of the obtained indicators allowed for an objective assessment of the severity of individual oral hygiene problems. Based on the study results, recommendations were developed to adjust oral hygiene practices and optimize dental treatment for this patient group.

Research results. Patients with gallstone disease demonstrated significantly poorer oral hygiene status compared to the control group. This group showed pronounced accumulation of dental plaque, which was closely associated with clinical manifestations of chronic periodontal inflammation, including gingival hyperemia, bleeding, and periodontal tissue involvement. The insufficient level of individual oral hygiene was found to contribute to the progression of dental pathologies, increased clinical severity of oral diseases, and reduced effectiveness of standard therapeutic and preventive interventions. These findings suggest that inadequate oral hygiene plays an important role in the development and persistence of oral inflammatory conditions in patients with gallstone disease and highlights the necessity for targeted measures aimed at improving oral hygiene habits in this patient population.

Conclusion. Optimizing dental care for patients with gallstone disease should include targeted improvement of oral hygiene habits, individualized preventive programs, and a comprehensive interdisciplinary approach. Implementing these measures improves oral hygiene, reduces the severity of inflammation, and enhances patients' quality of life.

