

FEATURES OF THE COURSE OF CHRONIC RECURRENT APHTHOUS STOMATITIS IN WOMEN OF FERTILE AGE

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ANNOTATION. Distribution and clinical function according to chronic recurrent aphthous stomatitis in pregnant women, most less Learned the same. at that time, the mouth is the primacy of the mucus floor inflammation of the fetus internal infectious disease and complication development due to Dangerous is considered chronic recurring aphthous stomatitis morphological elements mucus floor desired in place is located, but the most favorite places are the lips, cheeks, lateral surface of the tongue and the transition of the fold into the field of mucus this is the floor. The wounds are usually round, be and leak, fibrinosis cover with a covered Chronic recurrent aphthous stomatitis, as well as the etiology and pathogenesis have not been fully studied, each as a disease, care is a difficult task. This is why for every single patient, individual local and general nursing care measures will be used.

Key words: Chronic relapse aphthous stomatitis , pregnancy , nonspecific resistance , mouth b - schligs slime floor pregnancy , repeated pregnancy

Chronic recurrent aphthous stomatitis most wide spread out mouth space mucus floor wounded disease Usually childhood during begins and the world up to 25% of the population close the lid occupies Typical stomatitis finitely bordered, rounded wound is peripheral erythema with twisted, white-yellow colorful fibrosis membrane in the center have Him three main things: small, large and herpetic to the species have P. is small in type usually 4-7 days inside the scar without going out get better goes Large volumetric stomatitis longer period for recovery needs and scar Can leave Chronic recurring aphthous stomatitis etiopathogenesis is still unknown and multifactorial. One how many factors are the instigator as identified, including local factors, for example, local trauma, sensitivity of this stomatitis etiological agent C is read Systematic factors point of view regarding H. pylori infectious disease disease in development there is an etiological factor as a note made From this in addition , wounded colitis and Chron syndrome disease are also associated with. Some authors say that this is a chronic disease. recurring aphthous stomatitis similar to mouth wounds appearing to be celiac disease is in patients more decomposed and this is their first complaint. According to the etiology, hereditary factors also play a large role. Because with SQAS patients, at least 40% of this condition is present in the family. Such patients are severe characters and often going into remission are prone to allergies some

types of SOX cause can be released Some food products structural parts and mouth through be sent microbial to instruments high sensitivity potential etiological factors It is considered SCAS and chronic aphthous stomatitis to the disease played nutrition in In 5-10% of patients, deficiencies of the microelements iron, vitamin B 12, folic acid and hemoglobin occur in the blood. Subjective with SCAS depends on stress, the cause radiates events are also defined, but they are not continuous. From this, in addition to this, wounds appear in the existence of children, the regime may be possible, changes will be made. SQAS care is essentially a symptom-based treatment and for most patients, local healing is effective , but SQAS is a small volumetric type and chronic aphthous stomatitis is large volumetric in the systematic care type, seeing a way out is needed

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