TYPES OF OCCUPATIONAL DISEASES FOUND IN THE ORAL MUCOSA AND THEIR DESCRIPTION

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Abstract*: Currently, all the achievements of industrial production are entering a different area of our life, the application of new chemicals, the emergence of a state of primary tickling and sensitization leads to the occurrence and reproduction of occupational diseases, including pathologies related to OSCE.*

Key words:*leukoplakia,allergic-related gingivitis,necrotic tissue,traumatic*

Occupational diseases in the face and lips are caused by damage to the mucous membrane and lip from the influencer, that is, there are factors that negatively affect the body at the working enterprise, which causes disease in the worker and when the disease is observed a lot among employees of the enterprise compared to people living around, these are referred to as occupational diseases. Occupational diseases in obshq are caused by the following factors: facultative primary ticklers, weakly concentrated inorganic acid, alkali and galloids, Silicon, Organic Solutions, petroleum-Silicon burial, substances used in the synthesis of phenoplast, to the factors leading to contact stomatitis.It is imperative to be able to distinguish occupational diseases in obshq from physical, chemical, traumatic factors of production from its acute injuries. OBShQ and lip occupational diseases occur in the process of long work in one profession.
Occupational leukoplakia (keratosis) is formed along the lingual wall, the mucous membrane of the lower lip and the angle of the mouth. Occupational leukoplakia is observed among the majority, in the profession associated with stonemason tar, sand - dust, among workers in the combing, dyeing-grooming workshops of spinning workshops.Occupational diseases in obshq can be classified by the mechanism of action of etiological factors into the following types:factors that directly affect OBShQ and lip (allergic-related gingivitis, stomatitis,halitis).

Professional gingivitis. Occupational gingivitis among occupational diseases on the OBShQ floor is a condition in which alkalis, acid vapors, hot air effects are common in inflammation. Dental CA - rashes are also significant in the development of the disease, especially since in addition to mechanical effects on workers in contact with dust, tickling effects of chemicals are also observed. Causes decubital ulcers in the gums and chronic catarrhal inflammations.In professional catarrhal gingivitis, pain, redness, swelling and bleeding in the gums are observed, which are located in the

anterior area of the mouth, in the interdental suckers in the first 2-3 years, when Hamda begins to work in a negative production enterprise, the symptoms of the disease are severe, acute and frequent. Indifferent dust causes gingivitis to develop by mechanical damage to the gums. Stagnant and acute changes in tissue vessels are observed from the action of fluoride water, mercury, lead-containing dust. Workers at a superphosphate plant are observed to have a yellow or light-liver gum border, a gum edge hook, and workers at a textile enterprise's comb and teat tsexi collect the characteristic plant dust of the teat-milk pocket.For treatment, the damaging factor is eliminated; then a 3% solution of hydrogen peroxide, a 2% solution of sodium bicarbo nat, is rinsed with a mouthwash.Ulcerative-necrotic gingivitis is caused by the action of fluorine, cyclogexane, gasoline vapor, and aerosols resulting in marginal or diffuse redness in the gums, swelling, followed by a disease that represents necrosis of the gums. When necrotic tissue is taken, severe pain, bleeding erosion and scarring are formed in the gums, and if secondary infection falls, dark - colored tissue with poor odor is observed-di. In the treatment, the tickling factor is eliminated, necrotic tissue is removed and trypsin, chymopsin, oxygen preservative and keratoplastic drugs are placed.

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