

# The morphological status of the mouth cavity with the dysplasia of the conjunctive tissue ("MASS" phenotype)

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## ABSTRACT

"MASS"- phenotype or dysplasia of the conjunctive tissue has been studied for many years, but it still remains the actual problem in clinical and theoretical medicine. Great integration of clinical genetics and molecular biology into medicine has revealed the most complicated and multistage structure of the pathogenesis of this decease. "MASS"- phenotype is observed nearly in all the parts and systems of the human body, including the mouth cavity. According to the existed sources the decease has not been completely studied so far. So, the aim of the research was to estimate stomatological status into "MASS"- phenotype. The research into "MASS"- phenotype showed great macromorphological changes in mouth cavity and consequently, some changes in the stomatological status were observed.

**KEYWORDS:** *MASS phenotype, morphological status*

**M**odern achievements of theoretical and clinical medicine, gradual improvement of paraclinical researches, development of medical genetics and further integration of molecular biology into medicine have introduced lots of medical problems differently, which had been studied for many years but still remained unsolved and have lost their actuality.

Among many other deceases the above-mentioned deals with poliorganic decease "MAAS" phenotype. Modern researches into genetical and molecular biology revealed that the dysplasia of the conjunctive tissue represents the heterogenic group of deceases, which contains the whole group of nosology dealing with concrete gen mutation or chromosomal locus and is characterized by poliorganic changes. This was revealed because of the process of dysplasia controls all kinds of conjunctive tissues, including the parodont. That is why stomatological pathologies is observed among deceased people with "MASS" phenotype.

The analysis of the available sources revealed that the stomatological status of the deceased people with «MASS» phenotype is not studied yet. So the aim of our research is to study some stomatological markers in order to estimate stomatological status among deceased people.

58 people aged 16-25 were researched. They were divided into two groups. 28 healthy people were united in one group and in the second one there were 30 people, who according to the clinical observation at the clinics of cardiological profile of the realway medical service were proved to be deceased with the dysplasia of the conjunctive tissue or "MASS" phenotype. None of them had any dental pathology or any fillings or orthopedial constructions, or other stomatological pathologies in the anamnezes.

While estimating stomatological status of these people the condition of the mouth cavity, the attachment and the length of the fraenum of the lip, mucous membrane of the brim of the gum, the bite, the lay out of the teeth raw and the existance of the tremes and stems were also examined.

In order to estimate the common condicion of the mouth cavity the following literature were used. T.I. Lemenskaia (1998) [3]. The hygiene of the mouth cavity was estimated according to Green-Wermillion (1984) [2]. The condition of gums was estimated according to papilomarginalalveolar modification by Parma (1964), Benungar et al (1983) [1], gum leeding was estimated by index of Muhlumansson (1991) [4].

The carried out research revealed that the depth of the mouth cavity threshold on the upper jaw from the brim of the gum to the horizontal leved of the transitinal wrinkle was  $11,14 \pm 0,89$  mm. On the low jaw  $9,77 \pm 0,22$  mm. Analogical testimony in the second group showed about  $10,72 \pm 0,91$ mm and  $8,89 \pm 0,46$ mm. The difference the testimonies are statistically reliable ( $p < 0,05$ ;  $p < 0,02$ )

The fraenum of the lip of the involved people who were united in a trial group was  $3,0 \pm 0,01$  mm. The low lip was  $4,0 \pm 0,02$  mm. Analogical index of the people united in the second group was  $2,5 \pm 0,04$  mm and  $3,6 \pm 0,02$  mm. The difference between these testimonies are also statistically proved ( $p < 0,02$ ;  $p < 0,05$ ). The pathology of bite in the tailed group was only 8%, in the second group – 53%.

The lay out of the teeth raw was normal, tremes were observed among 5%, diastems among 8% and these two pathologies were observed among 2,6%. In the second group tremes were observed among 32%, diastems – 26% and these two pathologies were observed among 26%. Mucous membrane of the mouth cavity wasn't observed among recarched people. None of the bleeding gum was found among those people who were united in a trial group, but in the second one such pathologies were observed among 10%.

To conclude, the carried out research revealed that great changes of the stomatological status are observed while "MASS" phenotype.

## REFERENCES:

1. Beighton P. Grahame R. Bird H. Hypermobility of joints. – New York. 1983. P. 151-161.
2. Green-Wermillion G. Caton J. Polson A. Histologic Characteristics Associated With Bluding Affer Probing and Signs of Inflammation. – Department of Periodontology. 1984. N8. P. 420-425.
3. Lemetskaya T. I. Etiologia, Patogenez, Clasifikacia Zabolevanii Parodonta. Stomatologia. 1998. Spec.Vipusk. P. 48-55.

- Muhlemann H.R. Son S. Gingival bleedig – a leading symptom in initial gingivitis. – Helvet. Odont. Acta. 1991. V. 15. P. 107-115.

## **Влияние дисплазии соединительной ткани на морфологический статус полости рта**

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### **Р Е З Ю М Е**

Механизмы влияния дисплазии соединительной ткани (ДСТ) на течение хронического катарального гингивита совершенно не изучены. Целью работы являлось определение влияния ДСТ на морфологический статус. Установлено, что у больных с дисплазией соединительной ткани отмечаются изменения строения зубочелюстной системы, что является предрасполагающим фактором к развитию воспалительных заболеваний пародонта.

**Ключевые слова:** *дисплазии соединительной ткани, морфологический статус*