

– 0,648±0,05, and in severe form – 0,725±0,06 (control – 0,740±0,03; p<0,05), (Table 1).

At medium stage of proliferation (follicular phase) dopplerography findings were in general slightly lower than at early stage although in severe forms even lower than at medium stage. Linear and volume velocities of the bloodstream as well as Pi an Ri of all stages in remission changed in the same manner as at the early stage of proliferation of the follicular phase. For instance, at medium stage of proliferation of the follicular phase Vas, Vakd, Vam in women with healthy parodontal tissue were estimated accordingly as 0,724±0,04 cm/s.; 0,405±0,03 cm/s.; 0,428±0,013 cm/s. In light form of CGP at medium stage velocity indexes decreased slightly (p>0,05), though at medium severity form it was statistically evident difference comparing to control group (0,577±0,44 cm/s.; 0,263±0,08 cm/s.; 0,279±0,03 cm/s.; p<0,05), (Table 2).

At late stage of proliferation of follicular phase in women with healthy parodontal tissue Vas, Vakd, Vam were estimated as 0,692±0,12 cm/s., 0,396±0,025 cm/s., 0,410±0,012 cm/s accordingly, although in women with CGP in remission decreased in correlation with severity of the disease. Volume velocity indexes also decreased in comparison with control group. In severe form of CGP linear bloodstream velocity decreased more than 50%, volume velocity for more than 40% relatively to control group. Pi- index in remission decreased twice in medium severity form of CGP and only slightly in severe form. Ri also decreased in general relatively to control although in medium and severe forms in remission was still higher than in a light form (Table 3).

At all stages of follicular phase of menstrual cycle blood supply in parodontal tissues in exacerbation was characterized by statistically significant decrease of linear and volume velocities of bloodstream in medium and severe forms of CGP, increase of Pi-index in light and medium forms and decrease in severe form and also increase of Ri-index in all forms of any kind of severity. (Table 1,2,3).

CONCLUSION

In women of childbearing age blood supply of parodontal tissue correlates strongly with phases of menstrual cycle. At early stage of proliferation of follicular phase maximal linear and volume bloodstream velocities and Pi-index are observed although Ri-index decreases in opposite.

At late stage of follicular phase of menstrual cycle functional activity of blood vessels decreases, Pi-index as

well as linear and volume velocities decrease accordingly .Ri-index in late stage of follicular phase increases inconsiderably. It was found that in remission of GCP microcirculation in parodontal tissues impaired always independently on the degree of severity of the disease

In remission of CGP in women linear and volume bloodstream velocities and Pi-index increase in medium severity form and decrease in severe form with statistical evidence independently of the stage of follicular phase of the menstrual cycle. Ri-index in CGP of any kind of severity decreases in general in comparison with healthy parodontal tissues, although in severe form – to slightly higher extent than in light and medium severity forms. In exacerbation period all microcirculatory changes found are similar to that in remission although just more prominent and evident.

In chronic generalized parodontitis blood circulation in tissues deteriorate considerably, especially during acute phase of the disease in comparison to remission.

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