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GROUPS OF DIFFERENT RISK FACTORS IN CHILDREN WITH CONGENITAL CLEFT LIP AND PALATE

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Resume: Congenital cleft lip and palate is one of the most common congenital anomalies in children. It has significant medical and social influence on the self-realization of these patients in society. This review of various researches' results from different countries provides information on prevalence rate of this pathology among children of our country and worldwide. The role of medical care organization remains unknown among all the presented results of the studies about the role of risk factors of congenital cleft lip and palate development (such as: inheritance, lifestyle, environment).

Key words: congenital cleft lip and palate, congenital anomalies, lifestyle, risk factors, medical care.

Introduction: Congenital malformations of human development cause not only medical, but also social problems: patients, along with pronounced disorders of the functions of the affected organs and body systems, have difficulties adapting to society. In the future, they face the problem of obtaining a profession and employment (35.2% of patients indicate that it is almost impossible to find a job with congenital cleft lip and palate), which determines the medical and social significance of the problem and the relevance of conducting research in this direction.

In addition, many patients with congenital malformation of the maxillofacial region have a disability group due to difficulties in restoring impaired vital functions — nutrition, breathing, speech. And considering that congenital cleft lip and palate account for a significant percentage of all cases of congenital anomalies, the problems of anatomical reconstruction of the upper lip, nose and upper jaw in childhood lead to disability in every fifth child. The World Health Organization defines solving the problem of disability in congenital cleft lip and palate as a strategic task: first of all, it is the development of a quality assessment system for comprehensive medical, psychological, pedagogical and social rehabilitation of patients in medical organizations. According to various studies, risk factors for the development of congenital cleft lip and palate pathology have significant variability. There are 4 groups of risk factors: genetic factors, environment, lifestyle, organization of medical care. At the same time, numerous studies have been devoted to the study of risk factors, which give their own classifications. For example, there are exogenous risk factors (unfavorable material, social, living conditions); biomedical factors (anthropogenic environmental impact, occupational hazards in parents, xenobial load); medical and organizational factors. Endogenous factors include bad habits, reproductive dysfunction, sexually transmitted diseases, Rh conflict, genetic factors, somatic and infectious diseases in the child's parents. Some researchers also note the impact of the place of residence on an increase in the number of births of children with congenital cleft lip and palate: in particular, in families living in industrialized areas of various countries, an increase in the frequency of births of children with this pathology has been noted over the past 15 years [1,4]. The results

of studies conducted in many countries by various researchers on the group of environmental risk factors are interesting. It was found that the average incidence of congenital cleft lip and palate is statistically significantly associated with an increase in the degree of environmental disadvantage of the territory — the level of pollution of atmospheric air, wastewater and soils: the average frequency of congenital malformations in such conditions is 20% higher than the incidence rate in the least polluted areas [1.5]. Numerous studies confirm the importance of a group of genetic risk factors, such as, for example, the presence of congenital malformations in relatives, the age of parents at the time of conception, the serial number of pregnancy, childbirth, the number of children in the family, the season of conception [1], and the "lifestyle" group, namely occupational hazards (for example, work in contact with detergents and pesticides, contact with chemicals), bad habits of parents (alcoholism, smoking, drug addiction, taking certain medications, such as anticonvulsants or drugs), excess or deficiency of vitamin A and folic acid (both in the composition of multi vitamins and in the diet) . A review of the conducted studies demonstrated the contribution to the birth of children with malformations of the maxillofacial region, in addition to a group of genetic factors, as well as risk factors, folic acid deficiency [5]. Both domestic and foreign researchers assign a leading role to the "lifestyle" risk factor group: for example, research results from many universities have confirmed that women who smoke during pregnancy are 50-70% more likely than non-smokers to give birth to a child with congenital cleft lip and palate [3]. There are practically no studies on the risk factor group "organization of medical care" in providing medical care to children with congenital cleft lip and palate and their families. In isolated studies, attention is drawn to the imperfect organization of medical care for such patients. For example, studies have noted that the lack of a unified registration system, insufficient awareness of doctors and parents cause untimely provision of specialized care to children with congenital cleft lip and palate. The problem of an integrated approach to the organization of specialized medical care and rehabilitation of children with congenital cleft lip and palate continues to be insufficiently developed [3].

Conclusion: Congenital malformations of the maxillofacial region have a high prevalence in children, occupy significant places in the structure of morbidity and mortality; adult patients with such pathology often have difficulties with obtaining a profession and employment, which justifies the medical and social significance of the problem for healthcare in all countries of the world. Numerous studies have studied the influence of risk factors in the groups "genetic factors", "environment" and "lifestyle", but the group of factors "organization of medical care" and the influence of this group on the likelihood of having a child with such an anomaly have not been studied. This determines the importance of research on the modern organization of medical care for children with congenital cleft lip and palate in order to further develop programs to prevent the prevalence of congenital pathology in the population, improve the quality of comprehensive medical and social rehabilitation of such patients and work with families of children with congenital cleft lip and palate.[1,6]

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