



ORAL HEALTH STATUS IN PATIENTS WITH CHRONIC VIRAL HEPATITIS B: CLINICAL AND MICROBIOLOGICAL FEATURES

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Chronic viral hepatitis B (CHB) remains a major global health problem due to its high prevalence and systemic complications. In addition to hepatic involvement, the oral cavity is significantly affected, with periodontal and mucosal changes often serving as indicators of systemic health. Timely diagnosis and management of oral manifestations in CHB patients may improve overall treatment effectiveness and quality of life.

Keywords: chronic viral hepatitis B, oral health, oral microbiota, gingivitis, periodontitis, comprehensive therapy.

Aim: To evaluate the oral health status and microbiological features of the oral cavity in patients with CHB and to compare the effectiveness of comprehensive versus conventional therapy in reducing oral manifestations.

Material and methods:

The study included CHB patients divided into two subgroups depending on therapy:

- **Group A:** comprehensive treatment (systemic therapy combined with local dental interventions),

- **Group B:** conventional treatment.

Clinical evaluation included gingival bleeding, oral dryness and bitterness, mucosal pain, halitosis, dental plaque and calculus, periodontal disease, inflammatory lesions of the oral mucosa, and glossitis. Oral microbiota composition was also assessed and compared with a control group. Statistical significance was set at $p < 0.05$.



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Results:

CHB patients demonstrated more pronounced oral manifestations compared to controls. Gingival bleeding was observed in 33–36% of patients under comprehensive therapy versus 60% with conventional treatment ($p < 0.05$). Oral bitterness was reported by 34–35% in the comprehensive group versus 46–53% in the conventional group ($p < 0.05$). Mucosal pain occurred in 13–20% versus 27–33% ($p < 0.05$). Periodontal disease and dental deposits were more frequent with conventional therapy (53–67%) compared to comprehensive therapy (33–40%, $p < 0.05$). Glossitis was observed only in the conventional group (7%). Oral microbiota analysis revealed significant alterations in CHB patients, reflecting systemic involvement.

Conclusion:

Oral manifestations in CHB patients are common and correlate with systemic disease activity. Comprehensive therapy, combining systemic and local dental interventions, proved more effective than conventional treatment in reducing oral symptoms and improving periodontal health. Dental examination and targeted oral care should be integrated into the overall management of CHB to enhance treatment outcomes and patient quality of life.

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