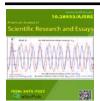
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The Importance Of Dental Activity In Patients Inside In Intensive **Therapy Unit**

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ABSTRACT

Introduction: Poor oral hygiene is common in ICU patients, which *Correspondence to Author: leads to colonization of the oral biofilm by pathogenic microorganisms, especially respiratory pathogens, which may be a source of nosocomial infection. Once the bacteria present in the mouth can be aspirated and cause aspiration pneumonia. Objective: Review of the literature regarding the importance of dental intervention in patients hospitalized in intensive care units. Methodology: An integrative review was carried out in the LILACS databases and in the SCIELO Virtual Library, using the descriptors: Dental care, Periodontal diseases and ICU. Inclusion criteria were: full-text articles available in Portuguese or English and with a temporal cut between 2013 and 2017. Results: Three articles were selected to meet the criteria for inclusion. Discussion: The oral cavity is the first portal of entry for respiratory pathogenic organisms that cause systemic infections, with pneumonia being one of them. Aspiration pneumonia is the most common type of nosocomial or hospital pneumonia and is an infection of the pulmonary parenchyma caused by different types of etiological agents including bacteria, fungi and viruses. This disease is of high cost and represents a significant cause of morbidity and mortality, diagnosed 48 hours after the patient's hospitalization in the ICU. The absence of attention with oral hygiene and the reduction of salivary flow results in an increase in the quantity and complexity of dental plague, which may favor bacterial interaction between native plaque bacteria and respiratory pathogens such as P. aeruginosa and enteric bacilli. Conclusion: The evaluation of the oral condition and the need for dental treatment in hospitalized patients require follow-up by a dental surgeon qualified in hospital dentistry avoiding an increase in the proliferation of fungi and bacteria and, consequently, infections and systemic diseases.

Keywords: Periodontal disease; UTI; Respiratory diseases

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