PHARMACOTHERAPY OF HYPERACI CHRONIC GASTRITIS IN CHILDREN

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Introduction Chronic gastritis (CG) is a chronic relapsing staging inflammation of the gastric mucosa (GM) and the submucosal layer. This inflammation leads to a violation of the secretory, motor, and often the endocrine functions of the stomach and duodenum. Hyperacidity CG is most often caused by an infection Helicobacter Pylori (HP) (in 80-85% of cases).

The objective of our research was to investigate and compare the pharmacotherapy of CG-associated with the Helicobacter Pylori infection in the international medical practice.

Materials and methods. We studied the characteristics of the European recommendations on eradication H. pilori in children of different ages.

Results and conclusions. Three- or four-component scheme of treatment is used in children up to 12 years. Prescribe colloidal bismuth subcitrate in a dose of 4-8 mg/kg per day in combination with amoxicillin at 25 mg/kg and nifuratel 15 mg/kg for 7 days. In the presence of an allergy to penicillin is used in the scheme clarithromycin therapy at a dose of 7.5 mg / kg. Blockers H₂-histamine receptors are used in the schema therapy for children up to 12 years. Ranitidine is prescribed for 75-150 mg at twice a day for 20 minutes before eating or for famotidine 10-20 mg twice a day regardless of the meal. The drug is administered for 7-10 days and then the dose is reduced by 2 times and the treatment continues for 2-3 weeks.

In children over 12 years prescribe triple therapy with the aim of eradication of H.pylori - amoxycillin combined with clarithromycin in combination with nifuratel. Instead nifuratel is possible appointment of colloidal bismuth subcitrate. Four-component therapy includes nifuratel, colloidal bismuth subcitrate in combination with amoxycillin or clarithromycin. All drugs are prescribed twice a day every 12 hours for 7 days. Azithromycin is prescribed for once a day for three days last week course. As antisecretory drugs in the scheme of therapy can use inhibitors of H+/K+ - ATP-ase inhibitor (PPI). Omeprazole appoint 10-20 mg (pantoprazole 20-40 mg per day) once a day in the morning before eating for 7-10 days.

The general principles of pharmacotherapy of CG-associated with the Helicobacter Pylori infection aimed at complete eradication of H. pylori. Fourcomponent therapy is indicated for the ineffectiveness three- component therapy of first-line therapy. The drug reduces the acidity of the selected depending on the age of the child.