

ANALYSIS OF CLINICAL EFFECTIVENESS OF THERAPY FOR PATIENTS PNEUMONIA

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Introduction. Community-acquired pneumonia today remains an important medical and social problem. This is due, primarily, its high prevalence, relatively high rates of morbidity and mortality and significant economic losses due to this disease. In Ukraine in 2015, according to official statistics, the incidence of pneumonia was 519.7 per 100 thousand population, and mortality - 10.3 per 100 thousand population, that is, died almost 2% of those who contracted pneumonia. However, these figures do not fully correspond to the actual level of morbidity and mortality.

Aim. To analyze the clinical effectiveness of drugs used in the treatment of community-acquired pneumonia. **Materials and methods.** An analysis of the literature, were also used logical, analytical and systemic research methods

Results. According to the study, published in the «JAMA» journal, treatment of pneumonia in elderly patients using azithromycin was associated with a reduced risk of deaths, but along with it a small risk of myocardial infarction. Clinical practice guidelines recommend that combination therapy with macrolides, including azithromycin, as a first-line therapy in patients hospitalized with pneumonia, but recent studies have shown that azithromycin therapy may be associated with an increased risk of cardiovascular disease in these patients. In the new study, scientists from the University of Texas, USA, was attended by about 65 thousand. Patients with pneumonia elderly (65 and older). During the 90 days of hospitalization of patients, scientists assessed the relationship between azithromycin therapy, the risk of cardiovascular disease (heart failure, myocardial infarction, heart rhythm disturbances) and poor outcomes in these patients. The final analysis included about 32 thousand. Patients with pneumonia who received azithromycin and about 32 thousand. Patients with pneumonia who received other recommended therapies. It was found that within 90 days the number of deaths among patients taking azithromycin, was lower than in those who received other recommended therapy, - 17.4 and 22.3%, respectively. However, azithromycin therapy is associated with a higher risk of myocardial infarction (5.1%) compared with the other recommended therapy of the disease (4.4%). It should be noted that this communication is not dealt with in the general occurrence of various cardiovascular events, the risk of which is for the patients who took azithromycin, 43%, and for patients treated with other recommended therapy - 42.7%, the risk of cardiac arrhythmias 25.8 and 26% respectively, and heart failure - 26.3 and 26.2%.

Conclusions. Thus, the researchers found that patients receiving azithromycin pneumonia significantly reduces the risk of death among these patients, which is more important than the slightly increased risk of myocardial infarction. Thus, according to the results of studies of azithromycin therapy can prevent 7 deaths per 1 induced nonfatal myocardial infarction.