The tactic of treatment provides that all patients are treated with anthelmintic medicines. With prolonged and intensive infestation, pathogenetic and symptomatic therapy is performed to stop intoxication, allergic manifestations, dyspeptic disorders. Further follow-up is carried out at the level of the infectious diseases department of polyclinics or helminth cabinet/center in hospitals for 3 months with a control study of feces for the presence of ascaris eggs. If the treatment is ineffective, the treatment should be repeated.

Additionally, bed rest for a period of acute process and diet (table number 4, if the function of the digestive tract is impaired; table number 15 with normal functioning of the digestive tract) is recommended.

**Conclusion.** The studied scheme of treatment of ascaridosis corresponds to the general trends in the treatment of this disease, recommended by WHO. For the purpose of conducting a comparative analysis of the regimens of ascaridosis treatment, it is planned to study the relevant protocols of Ukraine and other countries.

## DEVELOPMENT OF COMPOSITION AND TECHNOLOGY OF COMBINED LIQUID MEDICINE FOR TREATMENT OF HYPERKERATOSIS

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**Introduction.** Hyperkeratosis of the skin is the consequence and cause of the occurrence of many concomitant diseases and is not an independent disease. Elimination of the epithelium is one of the mechanisms of natural skin protection and normally it goes unnoticed. With pathology, the cells of the stratum corneum of the epidermis begin to be severely divided and do not have time to get rid of, which leads to thickening of the skin, the appearance of scales and peeling, superficial and deep cracks, blockage of the sebaceous glands, folliculitis, and the possible addition of concomitant infection. Often accompanied by pain, the appearance of the skin becomes unhealthy, the quality of human life worsens.

Drugs for the treatment of dermatological diseases associated with the occurrence of hyperkeratosis, aimed at combating pathogenic microflora, peeling, softening the skin, slowing the separation of cells of the epidermis. In most, they provide a drying action, contain alcohol that is not always suitable for sensitive dry skin prone to atopy.

Preparations of industrial production do not allow to fully consider the peculiarities of the patient and to individually approach his treatment. Thus, it is impossible to treat hyperkeratosis of the face and feet by means of the same concentration of keratolytic components. The auxiliary components of medicines very often cause irritation of the already injured skin, leading to the thinning of the vascular wall, which can eventually lead to permanent recurrence of hyperkeratosis.

**Aim.** Development of the composition and technology of the new extemporaneous complex medicinal product for the treatment of hyperkeratosis.

**Materials and methods.** When developing the composition of the drug, we selected the following active pharmaceutical ingredients (APhI): azelaic acid, salicylic acid, urea, D-panthenol, menthol, oil solution of vitamin A, and corn oil. Polysorbate-20 and polysorbate-80 were used to form a stable emulsion.

**Results and discussion.** According to the analysis of medicinal products existing in the pharmaceutical market, one can conclude that there are practically no expensive medical products of industrial production, and ethanol is most often included in the formulation of extemporaneous preparations.

For many years, the traditional keratolytic agent of extemporaneous drugs is salicylic acid, but recently preparations based on azelaic acid, and especially its combination with other acids and retinoids, are in great demand. The substance normalizes the process of keratinization in the follicles of the sebaceous glands, promotes their purification, has antimicrobial activity, antioxidant and anti-inflammatory action, etc.

Urea well moisturizes the skin and has a mild keratolytic action. A small molecular mass promotes its penetration into the deep layers of the epidermis, which not only helps maintain moisture, but also helps to produce other active substances.

D-panthenol in the form of medicinal preparations has a healing effect, relieves irritation, accelerates regeneration.

Retinol is involved in the process of differentiation of the epithelial cells, the development of secretory glands, the processes of keratinization, regeneration of mucous membranes and skin. The industry produces an oil solution of retinol acetate.

Menthol has an anti-dandruff, distracting, calming effect, reduces the activity of the sebaceous glands and gives the drug a pleasant smell.

Corn oil restores barrier skin functions. It has antioxidant effect, softens and nourishes. Regulates the permeability of the skin barrier and its moisture-retaining properties.

Prepare this medicinal product, based on the physical and chemical properties of the components and the intended action, most appropriate in the form of an emulsion. Emulsion allows simultaneously quick penetration of active substances into the deep layers of the skin, to provide therapeutic effect, to neutralize the irritating effect of the acids that are part of the preparation, and to form a protective film on the surface of the skin, thereby protecting it from stimuli and retaining moisture.

To stabilize the emulsion, polysorbates were chosen as emulsifiers, which are well suited for an O/W type emulsion. They soften the skin, improve lubrication, provide a soothing and astringent action, are well suited for sensitive skin. Mixing with water forms light emulsions that do not violate the hydro-lipid and pH of the balance.

To prepare the experimental samples of the emulsion, a device for small mechanization a homogenizer SilentCrusher M was used.

The technology of the drug was developed taking into account the physical and chemical properties of the substances in its composition.

Experimental samples of emulsions were prepared by two methods: through oleosol and hydrosol.

Samples of emulsions were studied on the following indicators: appearance, homogeneity, signs of physical instability.

According to the results of the research, polysorbate-20 concentrations indicated in the literature are not sufficient to stabilize the emulsion. Application of the device of small mechanization did not significantly affect the stability of emulsions. The use of polysorbate-80 at concentrations of 20%, 30% and 40% was also not successful. Emulsions split over the course of the day. An effective concentration of 50% of the mass of the oil phase was found to be effective. This emulsion remained stable for 10 days, maintaining its homogeneity.

**Conclusions.** The composition and technology of a liquid medicinal product in the form of an O/W emulsion for the treatment of hyperkeratosis was theoretically and experimentally substantiated. Based on technological studies, an optimal emulsifier and its concentration were selected. The technology of the new extemporaneous medicinal product for the treatment of hyperkeratosis is proposed.

## APPROBATION OF INDUSTRIAL TECHNOLOGY OF PESARIES WITH ACYCLOVIR AND ESSENTIAL OILS OF TEA TREE AND THYME

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**Introduction.** On the basis of pharmaceutical development study, physical-chemical, microbiological and pharmacological researches the composition of medicine has been developed as a form of pessaries with acyclovir and essential oils (Tea tree and Thyme) for treatment and prophylaxis of genital form of herpes virus infection. The originality of researches has been protected by a useful model patent (№ 107464) and patent of invention (№ 115476). According to result of experimental laboratory of chemotherapy of viral infections of SE «Institute of the epidemiology and infectious diseases named after