UDC: 616.995.132.8:616-035 ASPECTS OF ENTEROBIASIS TREATMENT: INTERNATIONAL EXPERIENCE Liliia I. Vyshnevska, Kateryna V. Semchenko National University of Pharmacy, Kharkiv, Ukraine

Helminthiasis is ranked second after tuberculosis. Of the 150 worm species present in the world, about 30 are met in Ukraine. At the same time, an absolute majority is involved in enterobiasis (approximately 75 % of cases among helminthiases of digestive system).

Enterobiases (pinworms) refers to nematode infections. The causative agent of the disease is *Enterobius vermicularis*. It is distributed worldwide, including both countries with an unfavorable epidemiological profile and low-level of medical care and developed countries with high-level healthcare. Transmission of pinworms of includes faecal-oral and auto-infection routs. In order to review and extend the clinical protocol for the treatment of enterobiasis in Ukraine, the current practical experience and evidence-based medicine of specialists from other countries of the world are analyzed, in particular, by example of Médecins Sans Frontières.

According to Clinical guidelines by Médecins Sans Frontières, enterobiasis is diagnosed by the following clinical features: anal pruritus, more intense at night, vulvovaginitis in women (rarely). Diagnosis includes collection and further detection under the microscope of pinworm eggs from the anal area (scotch tape method).

The recommended pharmacotherapeutic scheme provides the usage of albendazole (PO as a single dose children over 6^{th} months and adults 400 mg (200 mg in children over 6 months but < 10 kg) or mebendazole (PO as a single dose children over 6 months and adults 100 mg (50 mg in children over 6 months but < 10 kg). A second dose in recommended after 2 to 4 weeks. This treatment regimen conforms to the general principles of treatment of the enterobiasis recommended by WHO.

For comparison, clinical protocol of enterobiasis treatment includes list and scope of medical services of a mandatory range (patients with enterobiasis need to carry out pathogenetic therapy: strengthening, desensitizing, immunocorrectiveNevertheless, when developing a national clinical protocol for the treatment of enterobiasis in Ukraine, it is advisable to present an extended treatment regimen supplemented with schemes for pathogenetic, desensitizing and symptomatic treatment.

References:

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