

CLINICAL-PHARMACEUTICAL EFFICACY OF THE COMBINED USE OF CEFTRIAXONE AND CLINDAMYCIN IN THE TREATMENT OF CHRONIC INFLAMMATORY PROCESSES IN GYNECOLOGY

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In gynecological practice, chronic inflammatory processes are the most common diseases of the female genital area. According to WHO, 65-68% of cases are chronic manifestations of vaginitis and salpingo-oophoritis in women of fertile age. These diseases cause a decrease in the quality of life of patients and a significant financial cost of long-term treatment. Therefore, at the present stage of medical practice, the search for medications for the effective treatment of this pathology is taking into account the etiopathogenesis, which would allow their use in outpatient conditions. One of the most promising is the combination of medications with different mechanism of antimicrobial action.

The purpose of the study was the clinical study and analysis of the clinical and pharmacological efficacy of the complex action of antimicrobial medications of groups of cephalosporins and lincosamide.

A clinical study was conducted of 62 patients aged 19 to 47 years, who were on dispensary registration in the women's consultation of the polyclinic department of the University clinic of KhNMU and had a chronic manifestation of infectious-inflammatory processes of the female genital area. Clinical and pharmacological efficacy of the following medications was determined when included in the study. The medications of choice were the medical preparations with the antibacterial mechanism of action. Namely ceftriaxone (III generation cephalosporins) and clindamycin (lincosamides), which affected the key chains of the infectious-inflammatory process. Due to the integrated use, the efficiency of the action was significantly improved and the side effects of the reactions decreased. Applied ceftriaxone in a single dose of 1.0-2.0 g intravenously 1 time per day and clindamycin 900 mg 3 times a day. The duration of treatment was 2 weeks. However, in these terms, when the clinical symptoms of the disease disappeared, patients were transferred to the recommended oral regimens. During the study in the clinical setting, clinical monitoring of patients and his functional status was performed, clinical symptoms were reduced and disappeared (acute pelvic pain, swelling, fever, dysuria, dyspareunia) and necessary laboratory tests were performed.

During treatment, the disappearance of clinical symptoms of chronic gynecological pathology with subsequent transfer to oral regimens was recorded in 59 sick women (94% of the study population). Clinical signs of recovery or significant improvement were noted in all patients. There were no cases of complications of chronic inflammatory processes and the occurrence of side effects from medications. There was good tolerability of treatment. From this, we can conclude that the complex interaction of these antimicrobials preparations demonstrates high therapeutic efficacy and good tolerability in the treatment of chronic infectious-inflammatory gynecological pathologies in the outpatient setting.