

**Conclusion.** Thus, we have studied and analyzed the current standards of medical care for patients who have infective endocarditis and came to the conclusion that pharmacotherapy is aimed at eliminating the exciter of the disease.

## PHARMACOTHERAPY OF VASCULAR DEMENTIA

Misan B.S.

Scientific supervisor: prof. Kireyev I.V.  
National University of Pharmacy, Kharkiv, Ukraine  
misanbogdan@gmail.com

**Introduction.** Vascular dementia is the second most common form of dementia after Alzheimer Disease (AD). The condition is not a single disease; it is a group of syndromes relating to different vascular mechanisms.

**Aim.** Study of protocols and standards of medical care of vascular dementia.

**Materials and methods.** We have reviewed and compared Medscape medical recommendations, Msdmanuals.

**Results and discussion.** Risk factors for vascular dementia include hypertension, smoking, hypercholesterolemia, diabetes mellitus, and cardiovascular and cerebrovascular disease. Vascular dementia is the second most common cause of dementia in the United States and Europe, but it is the most common form in some parts of Asia. The prevalence rate of vascular dementia is 1.5% in Western countries and approximately 2.2% in Japan. In Japan, vascular dementia accounts for 50% of all dementias that occur in individuals older than 65 years. In Europe, vascular dementia and mixed dementia account for approximately 20% and 40% of cases, respectively.

The mainstay of management of vascular dementia is the prevention of new strokes. This includes administering antiplatelet drugs and controlling major vascular risk factors. Aspirin has also been found to slow the progression of vascular dementia. Medical therapy options include antiplatelet and hemorheologic agents. Studies have shown antiplatelet agents are useful for preventing recurrent stroke. In vascular dementia, a pilot study showed that aspirin has positive effects on cognitive deficits. Other antiplatelet agents are ticlopidine and clopidogrel.

Improve flow properties of blood by lowering viscosity, improving erythrocyte flexibility, inhibiting platelet aggregation and thrombus formation, and suppressing leukocyte adhesion.

Neuroprotective drugs such as nimodipine, propentofylline, and posatirelin are currently under study and may be useful for vascular dementia.

**Conclusions.** Pharmacotherapy of drug-induced vascular dementia is pathogenetic and symptomatic therapy.

## MODERN PHARMACOTHERAPY OF CHLAMYDIA INFECTION

Oleksiuk Ye.S.

Scientific supervisor: assoc. prof. Riabova O.O.  
National University of Pharmacy, Kharkiv, Ukraine  
oleksiukelizaveta@gmail.com

**Introduction.** Chlamydia infection is a common infectious disease with a predominant lesion of the genitourinary system, related to sexually transmitted diseases (STDs), the caused by Chlamydia trachomatis. Also the microorganism can be detected in the conjunctiva and nasopharynx. Infection of newborns is transmitted by contact with infected maternal genitals. According to statistics, 100 million

people fall ill with chlamydia annually in the world. The prevalence of chlamydial infection in the population varies depending on age, with the highest incidence (approximately 70%) observed in people under 25 years of age. In Ukraine, there is a high incidence of chlamydia infection (in 2015, 20048 cases).

**Aim.** Study of modern standards of medical care for patients with chlamydia infection.

**Materials and methods.** We conducted an analysis of articles, an adapted clinical guideline based on evidence, a unified clinical protocol providing medical care for patients with chlamydia infection.

**Results and discussion.** Among patients with STIs, a subjectively asymptomatic course of the disease is observed in 70% of women. In the presence of clinical manifestations, the following symptoms in women can be: mucopurulent cervicitis, vaginal discharge, lower abdominal pain, postcoital or intermenstrual bleeding, dysuria. In approximately 75% of cases, urogenital infection in men proceeds with the following symptoms: urethritis, dysuria, urethral discharge. Diagnosis is achievable only through nucleic acid amplification testing (NAAT).

Treatment for *C. trachomatis* is indicated in case of identification of *C. trachomatis* in clinical specimens or on an epidemiological basis. Chlamydia infection can be treated with antibiotic groups such as tetracyclines (doxycycline), macrolides (erythromycin, clarithromycin, azithromycin, josamycin), fluoroquinolones (ofloxacin, ciprofloxacin). Recommended treatment for uncomplicated infection are doxycycline or azithromycin. However, recent studies have shown a decrease in the effectiveness of treatment of patients with azithromycin to 92%. An alternative therapy in case of contraindications includes erythromycin or ofloxacin.

**Conclusion.** Thus, we have studied and analyzed the current standards of medical care for patients with chlamydia infection, according to which treatment is performed according individual course of the disease, drug resistance and contraindications.

## **FIRST PRE-MEDICAL AND PREVENTIVE PHARMACOTHERAPY OF DOGS AND CATS BITES**

Ostapenko P.U.

Scientific supervisor: assoc. prof. Zhabotynska N.V.

National University of Pharmacy, Kharkiv, Ukraine

polinaostapenko@ukr.net

**Introduction.** In Ukraine, the epidemic of rabies has been volatile for the last 30 years. Single cases of diseases are recorded; but there are conditions for their spread. The source and reservoir of rabies are wild and domestic animals of the mammalian class. A person may become infected with rabies from an infected animal through bites or scratches.

**Goal.** Analysis of literature sources on the provision of first pre-medical aid in the bites of dogs and cats and further antibacterial pharmacotherapy to prevent the development of infection in the bitten wound.

**Materials and methods.** We have analyzed the Orders of the Ministry of Health of Ukraine № 205 of April 15, 2004; Recommendations from the American Veterinary Medical Association for the prevention of Dog Bite, 2018; Guideline WHO. Rabies vaccines and immunoglobulins: WHO position, 2019.

**Results and discussion.** Most animal bite wounds can be treated in the hospital's receiving compartment. A thorough examination of the bitten wound is performed to detect deep damage and necrotizing tissue. In order to determine the type of bacteria and their sensitivity to antibacterial drugs, it is recommended to carry out bacterial seeding of the content of the bitten wound.

The key method of infection prevention is irrigation with saline solution or povidone iodine solution. A preventive pharmacotherapy antibacterial agent includes amoxicillin-clavulanate, ampicillin-sulbactam, ticarcillin-clavulanate, piperacillin-tazobactam or carbapenems (imepenem-cilastatin, meropenem), cefuroxime with clindamycin or metronidazole, fluoroquinolones with clindamycin or metronidazole, trimethoprim sulfamethoxazole with clindamycin or metronidazole.