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## PRACTICE ON CLNICAL PHARMACY IN THE KHARKIV ENT HOSPITAL: THE PHAMCEUTICAL CARE SPECIFITIES

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**Relevance.** Respiratory diseases are very common among all segments of population. The sociological interviewing was held in different countries of Europe. According to the public opinion, acute respiratory diseases are the most frequent cause of treatment admission in pharmacy for buying over-the-counter (OTC) drugs. Drug therapy of common colds is aimed in symptomatic treatment of fever, sore throat, rhinitis and cough. It is possible that patient can have only one of symptoms or they can fit together.

The basic material presentation. Kharkiv city clinical otolaryngologist hospital № 30 was one of the main centers for practical activities in clinical pharmacy. This hospital specializes in treatment of ear, nose, and throat (ENT) organ pathology, including the upper respiratory tract pathology. The round-the-clock medical aid is also providing in this hospital.

Practice in pharmacy helped pharmacist to increase the knowledge of the ENT-diseases. It also systematized knowledge of pharmacist in releasing OTC drugs for the treatment of such symptoms as fever, sore throat, rhinitis, cough, allergy considering different factors. The patient's age, symptom duration, attitude of patients to decreed groups of the population, drug-drug interactions can be these factors. OTC drugs are the major part of pharmacy's range for the treatment of listed symptoms.

The familiarization with main points of pharmaceutical care in prescription drug realization from the different pharmaceutical groups and the opportunity of correction of medical prescription with participation of the doctor was an important part of practice. Our participation in intra-hospital conferences and grand rounds has allowed us to improve knowledge on variety of manifestation

of the upper respiratory tract pathology. We have learned to realize the importance of life-threatening symptoms. It helped us to know more about potential complications if the treatment was late or irrational. We have also learned to optimize prior learning about features of clinical pharmacology of different medical groups which are used for the treatment of the patients in this category.

**Conclusions.** Work practice on clinical pharmacy in the pharmacy's specialized hospital gave us possibility to understand, that pharmacist is a gobetween doctor and patient. We get, that there are no «bad» or «good» medicals, but there are incorrect prescribed or recommended. The effectiveness of the treatment doesn't depend only upon prescription meds, but it also depends upon properly pharmaceutical care.

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