**Conclusions**. Thus, the range of drugs used to treat Alzheimer's disease is replenished with new means and new approaches to treatment, due to the expansion of our knowledge about the mechanisms of development of this pathology.

## STUDY OF THE CHARACTERISTICS OF DRUG-INDUCEDLIVER DAMAGE

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**Introduction.** Currently, the pharmacopoeia includes several thousand drugs that can cause druginduced liver damage (DILD). Side effects of drugs cause jaundice in 5% of hospital patients, 40 % of hepatitis in patients older than 40 years and 25 % of cases of acute hepatic insufficiency. The frequency of these conditions increases every year, which is due to free access of the population to drugs, the appearance of a large number of drugs on sale, dispensed by the pharmacy network without a prescription, and the lack of sufficient information on their possible side effect. Currently, mortality associated with the consumption of drugs, comes in fifth place. Thus, DILD is one of the serious problems of hepatology. **Aim.** To study morphological changes in the liver, under the influence of drug therapy.

**Materials and methods.** Carrying out the enzymodiagnosis of liver diseases – the determination of the activity of enzymes, which are associated with the work of the liver. Easily damaged enzymes are found in the membrane or cytoplasm of hepatocytes (lactate dehydrogenase, aminotransferase and alkaline phosphatase) and their activity increases in the clinically asymptomatic phase of the disease. With chronic liver damage, the activity of mitochondrial enzymes (aspartate aminotransferase) increases. Cholestasis increases the activity of bile enzymes (alkaline phosphatase).

**Results and discussion.** Morphological manifestations of DILD are diverse: focal necrosis of hepatocytes, granulomatosis, mononuclear eosinophil infiltration, cholestasis. Continuation of taking drug leads to the progression of hepatitis to fibrosis or cirrhosis of the liver, the development of hepatic insufficiency, the presence of autoantibodies. There is an increase in the activity of alanine aminotransferase, aspartate aminotransferase, alkaline phosphatase, y-glutamyltransferase, bilirubin content. The most common clinico-morphological forms of DILD: necrosis of hepatocytes; mitochondrial cytopenia, fibrosis; steatohepatitis, damage to the blood vessels of the liver; acute hepatitis; chronic hepatitis, tubular cholestasis, bile sludge; sclerosing cholangitis; liver tumors, etc.

**Conclusions.** In the treatment of this pathology, it is important to abolish drugs; strict adherence to the rules for taking drugs and doses; diet therapy; use of metabolic and coenzyme therapy; recommended the intake of antioxidants and hepatoprotectors, as well as detoxification therapy.

## AWAKENING ACTION OF HETEROSIDES ON THE MODEL OF THIOPENTAL ANESTESIA Kabachnaya I. V., Storozhenko O. M., Kabachnyy V. I. Supervisor: prof. Drogovoz S. M. National University of Pharmacy, Kharkiv, Ukraine dr.kabachnaya@gmail.com

**Introduction**. Natural disasters, wars and man-made disasters are accompanied by "traumatic" epidemics. This dramatically increases the role of urgent surgery, the effectiveness of which depends not only qualified surgeons, but also the presence of extemporaneous preparations required during operations and rehabilitation activities.

In the field conditions it plays an important role causing a duration of operation depends on the duration of surgical procedures, on a duration of anesthesia. Limited surgical and rehabilitation personnel is a factor, which can determine the speed and effectiveness of rescue measures.