

donors. 9.4% (9 students) of them do not want to become donors, because they believe that they can become infected during the manipulation (33.3%); some of them are afraid of manipulations and hospitals (44.4%); 22.3% of students have health contraindications. As for questions about the positive and negative aspects of donations in all interviewed there were quite similar responses. In particular positive effects of donation: assistance to people, cash compensation for blood surrender, blood renewal, cleanses the body, find out the blood group and do a blood test for free. From the negative sides there were indicated: possible infection, weakness and feeling bad right after the blood is delivered, pain during the time carrying out manipulations. So, we can assume that the development of donation depends on awareness of the population.

In the analysis of clinical examination of blood it was found that in groups 2 and 3 it was a slight increase of erythrocyte amount in normal hemoglobin concentration in comparison with the control group of volunteers. In staffed donor groups (group 2) there were a decrease of lymphocytes and monocytes number. It indicating a certain exhaustion and their constancy of immunological status is compensated by increased content neutrophils.

In the examination of coagulograms it was found that in the 2 group of donors there was increased number of platelets – "training" of thrombopoiesis and decreased coagulation linkage of hemostasis due to systematic extraction of plasma proteins for blood coagulation. So, coagulation hemostasis is compensated by cellular mechanism blood coagulation increase.

**Conclusions.** After survey it was found low awareness about the benefits of donations among young people. Therefore, we can assume that the development of donation depends on the awareness of the population, which can be possible by improving of the legislative framework and the organizational-methodical maintenance of donor movements in the regions of the state.

In the research of blood and hemostasis it was not found facts about the deterioration of health in people who had given the blood.

## **CHOLESTATIC DISEASES OF THE LIVER, ITS PATHOGENETIC BASES AND METHODS OF PHARMACOLOGICAL CORRECTION**

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**Introduction.** The increase in the average age of women in Ukraine and the world determines the relevance of the pharmacological correction of pathological changes of climacteric nature in a woman's body. As pathogenetic therapy of climacteric disorders, hormone replacement therapy (HRT) is used. But a significant disadvantage of HRT are serious side effects: intrahepatic cholestasis, increased thrombus formation, peripheral edema. Intrahepatic cholestasis is a serious pathology of the hepatobiliary tract and its pharmacological correction is a complex and important therapeutic problem.

**Aim.** Analysis of the pathogenetic mechanisms of the cholestatic liver disease development and the possibility of its pharmacological correction with herbal preparations.

**Materials and methods.** Analytical research according to foreign literary sources.

**Results and discussion.** In the pathogenesis of cholestasis syndrome, an important role is played by dysfunction of the basolateral and canalicular hepatocyte membranes. Estrogen preparations have a significant effect on the enzymes of cholesterol biosynthesis and bile acids, which is accompanied by a decrease in the content of phospholipids in the hepatocyte membrane and adversely affect its fluidity. Violations of hepatobiliary transport are also manifested, which are caused by mutations in the genes of transporter proteins and acquired dysfunctions of the transport systems causing a violation of canalicular or cholangiocyte secretion.

**Conclusions.** The analysis of literature data indicates a significant relevance of minimizing the toxic effects of estrogen preparations of HRT on liver cells. This task can be achieved by using hepatoprotective drugs that have a normalizing effect on the ratio of the bile components and have a pronounced antioxidant effect. Herbal preparations that are characterized by a multifactorial complex action are most appropriate for these characteristics.