

PHARMACOTHERAPY OF OBLITERATING THROMBANGITIS

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Introduction. Thromboangiitis obliterans (TAO), an inflammatory vasculopathy also known as Buerger disease, is characterized by an inflammatory endarteritis that causes a prothrombotic state and subsequent vaso-occlusive phenomena. The inflammatory process is initiated within the tunica intima. It characteristically affects small and medium-sized arteries as well as veins of the upper and lower extremities. The condition is strongly associated with heavy tobacco use, and disease progression is closely linked to continued use. Patients often present with moderate-to-severe claudication that can quickly progress to critical limb ischemia featuring rest pain or tissue loss. Features of acute limb ischemia (eg, pain, paresthesia, palor, mottling, poikilothermia, paresis, and pulselessness) are common signs and symptoms encountered in the emergency setting

Aim. Finding and analyzing information on treatment of obliterating thrombangitis. Evaluation of the pharmaceutical market and determination of the effectiveness of existing drugs for the treatment of this brew.

Materials and methods. Research is conducted on the basis of information posted on the Internet. Materials on the drugs and their use were taken from the official websites of the companies involved in the development of the presented drugs.

Results and discussion. At present, for the treatment of obliterating thrombangitis, the pharmaceutical market may present a small number of drugs. Treatment of this disease for today includes: diet therapy, abandonment of bad habits and reduction of loads on extremities, and also surgery. If we talk about drug treatment, there is no specific therapy. Iloprost may be used in the later stages of obliterating thrombangitis to prevent limb amputation. Other drugs are generally nonspecific, they are used for additional therapy of the disease. Basically these are groups of drugs such as: calcium channel blockers (verapamil, diltiazem, amlodipine, nifedipine), microcirculators and angioprotectors (alprostadil, pentoxifylline, iloprost).

Conclusions. At present, for the treatment of obliterating thrombangitis, the pharmaceutical market may present a small number of drugs. Treatment of this disease for today includes: diet therapy, abandonment of bad habits and reduction of loads on extremities, and also surgery. If we talk about drug treatment, there is no specific therapy. Iloprost may be used in the later stages of obliterating thrombangitis to prevent limb amputation. Other drugs are generally nonspecific, they are used for additional therapy of the disease. Basically these are groups of drugs such as: calcium channel blockers (verapamil, diltiazem, amlodipine, nifedipine), microcirculators and angioprotectors (alprostadil, pentoxifylline, iloprost).

MODERN PHARMACOTHERAPY OF ALZHEIMER'S DISEASE

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Introduction. Alzheimer's disease is a type of dementia that causes problems with memory, thinking and behavior. Symptoms usually develop slowly and get worse over time, becoming severe enough to interfere with daily tasks. Alzheimer's disease accounts for 60 percent to 80 percent of