Conclusion. Today, the purposeful search for phytopreparations that have undeniable advantages remains relevant: they do not have the side effects that are characteristic of statins, and in turn have pronounced antihypercholesterolemic, hypolipidemic, antihypertensive, antihyperglycemic properties.

THE USE OF ANTIHISTAMINES FOR THE TREATMENT OF ALLERGIC DERMATOSES

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Introduction. Today, allergic diseases are a significant medical and social problem worldwide. In Ukraine, about 25% of the population suffers from allergic diseases, of which 3-7% of people have allergic skin diseases (allergic dermatoses). Allergic dermatoses are a group of acute and chronic skin diseases, which include diseases such as allergic contact dermatitis, eczema, toxicoderma, atopic dermatitis, etc. The increase in the incidence of allergic dermatoses is due to the increased impact on the skin of exogenous harmful factors (chemical, physical, biological factors) against the background of changes in the human body (for example, changes in immunological reactivity, neuroendocrine regulation, diseases of the digestive system, chronic focal infections, etc.), and also a hereditary predisposition to allergies.

Aim. Study of the use of antihistamines for the treatment of allergic dermatoses.

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 a allergic dermatoses.

Results and discussion. Antihistamines occupy a leading place in the treatment of allergic dermatoses. The mechanism of action of antihistamines is based on the blockade of the binding of histamine to the H1 receptor, expressed on the surface of endothelial cells. As a result of the action of antihistamines, itching and swelling are reduced. According to the classification adopted by the EAACI, all antihistamines are divided into two generations depending on their effect on the central nervous system. The 1st generation H1 antagonists penetrate the blood-brain barrier and can such as stimulate as suppress the central nervous system. Drugs of this group, in addition to histamine H1 receptors, block receptors for acetylcholine, adrenaline, serotonin, dopamine and ion channels. It causes many side effects: tachycardia, dry mucous membranes, increased viscosity of sputum. Antihistamines of the 2nd generation practically do not penetrate the blood-brain barrier and do not cause a sedative effect. Recently, antihistamines of the 2nd generation are being considered for the treatment of allergic dermatoses. However, the main international documents recommend short-term intermittent use of sedative antihistamines in the treatment of patients with atopic dermatitis. The therapeutic value of 1st generation antihistamines lies mainly in their sedative properties by normalizing night sleep and reducing the intensity of itching. And also drugs of the 1st generation are available in solutions for injections, which can be used to quickly relieve itching.

Conclusions. Thus, modern standards of medical care for patients with allergic dermatoses have been studied and analyzed, according to which the use of antihistamines is justified.