

**Conclusions.** Therefore, we can conclude that capsules based on African mango are an effective tool in the fight against obesity with an integrated approach to therapy: a low-calorie diet and taking the investigational drug. Based on the results obtained, it can be assumed that the African mango-based dietary supplement reduces the need for food even when consuming a high-calorie diet.

## MODERN PHARMACOTHERAPY OF DIABETES MELLITUS TYPE 2

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**Introduction.** Diabetes mellitus type 2 (DM) is a complex chronic disease that occurs when the body cannot produce enough insulin or use it effectively. People with DM type 2 need treatment for control their level of blood glucose and prevent complications in the long run. DM type 2 is a progressive disease, in connection with which after some time there is a need to modify pharmacotherapy. Sodium-glucose co-transporter 2 inhibitors (SGLT2) are oral antihyperglycemic drugs whose main mechanism of action is to block the reabsorption of up to 50% of glucose in the proximal tubules, leading to glucosuria and decreased blood glucose levels.

**Aim.** Study the modern guidelines about the place of SGLT2 in complex pharmacotherapy of DM type 2.

**Materials and methods.** We analyzed the updated standards of the American Diabetes Association, issued in 2020, which provide recommendations for the use of SGLT2 for the pharmacotherapy of DM type 2.

**Results and discussion.** Lifestyle modification is the first step in the overall treatment strategy for patients with DM type 2. Patients should conduct behavioral psychotherapy sessions, adjust their diet and physical activity to lose weight and achieve a deficit in the energy value of food.

Medication of the SGLT2 (dapagliflozin, empagliflozin, canagliflozin) are recommended for use as first-line drugs in patients with DM type 2 with cardiovascular disease (CVD) or with a high risk of cardiovascular complications, diabetic kidney disease or heart failure. Such recommendations are due to the fact that SGLT2 have proven their effectiveness in CVD in multicenter studies, regardless of the level of HbA1c in the blood, taking into account individual factors. Several studies have demonstrated that empagliflozin was more effective in reducing HbA1c and improving other cardiometabolic parameters than dapagliflozin. Other researchers have demonstrated that canagliflozin provided greater 24-h urinary glucose excretion, a lower renal threshold for glucose excretion and smaller postprandial plasma glucose excursions than dapagliflozin.

**Conclusions.** Thus, SGLT2 is the group of choice for pharmacotherapy in patients suffering from DM type 2 in combination with CVD and / or diabetic kidney disease.