EVALUATION OF CLINICAL AND PHARMACEUTICAL EFFICACY OF THE TRIAZOLE DERIVATIVES USE IN MODERN GYNECOLOGICAL PRACTICE

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Introduction. An urgent problem of modern gynecological practice is the effective use of effective drugs in the treatment of chronic inflammatory processes, in particular mycosis infection of the genital area in women of fertile age. In modern conditions, the requirements for the effectiveness and safety of rational therapy are constantly increasing, which improves the directions of effective treatment of patients Determination of etiopathogenetic justification and evaluation of data on efficacy and safety of use in clinical and pharmaceutical studies of a group of antifungal drugs in gynecological patients with manifestations of colpitis and vulvovaginitis of mycosis etiologywith manifestations of candidal pathology and provides appropriate conditions for the prevention of possible complications of the disease. Improving the efficacy and safety of certain groups of antimycosis drugs helps to increase the effectiveness of treatment of vulvovaginal candidiasis in women of fertile age, and also helps to minimize complications in this pathology. Doctors, pharmacists, clinical pharmacists in their practice are constantly improving the algorithms for the use of this group of drugs and preventing dangerous and negative manifestations of treatment.

Aim. Determination of etiopathogenetic justification and evaluation of data on efficacy and safety of use in clinical and pharmaceutical studies of a group of antifungal drugs in gynecological patients with manifestations of colpitis and vulvovaginitis of mycosis etiology.

Materials and methods. Conducting a non-interventional sampling study, clinical and pharmaceutical analysis and clinical processing of questionnaire data of patients with manifestations of colpitis and vulvovaginitis of mycosis etiology of different age groups, fixation of parameters of clinical and laboratory criteria.

Results and discussion. Evaluation of the results of this clinical and pharmaceutical analysis using a group of antifungal drugs, in particular itraconazole, in the treatment of chronic vulvovaginal candidiasis indicates that the main clinical aspect of antifungal therapy is the optimization of the effective and safe use of antimycosis drugs. Based on the data obtained, the main aspects of effective and safe use of the group of antimycosis drugs used to treat candida infection were determined. In general, chronic vulvovaginal candidiasis (CVC) is a "disease of civilization" that affects up to 75-77% of women of fertile age who have had vaginal candidiasis. The causative agent of CVC in 85% of cases is a mixed candida infection resistant to widely used antimycotic agents.

The most modern method of treating chronic mycosis infection is the use of systemic antifungal agents. The advantages of systemic therapy of colpitis and vulvovaginitis include: exposure to the pathogen of any localization and a significant anti-relapse effect. The property of uniform distribution into organs and tissues and the effect on the causative agent of any localization of the pathological process is most pronounced in itraconazole. Itraconazole is an antifungal agent derived from triazole. Its mechanism of action is associated with the ability to inhibit cytochrome P450dependent enzymes of fungi sensitive to it, which leads to impaired ergosterol synthesis of the fungal cell wall. It has a wider spectrum of antifungal action on candida. The drug has a number of favorable pharmacodynamic and pharmacokinetic properties that increase its clinical efficacy. Itraconazole compares favorably with other representatives of azoles with a wider spectrum of action and much less toxicity. Based on the results of the study, the dynamics of symptoms and laboratory parameters of colpitis and vulvovaginitis in patients with chronic mycosis infection under the influence of itraconazole were assessed. It was determined that the dynamic efficacy rates of itraconazole used in the form of capsules ranged from 85% to 93% in patients with chronic vulvovaginal candidiasis. Based on the analysis of the dynamics of clinical manifestations of colpitis under the influence of itraconazole, positive tolerability was determined in 95% of patients. Therapy of chronic conditions is carried out for 6-7 days with a repeated course of treatment after 4-6 months, taking into account clinical and laboratory criteria.

Conclusions. When evaluating the data of the clinical and pharmaceutical study, the modern algorithm for the effective and safe use of itraconazole, a drug from the group of systemic antifungal drugs, for the treatment of gynecological patients with manifestations of chronic vulvovaginal candidiasis was substantiated. The use of itraconazole effectively ensures the eradication of all types of pathogenic candida, which makes it possible to empirically treat mycosis infection without prior determination of the subspecies of fungi. These results contribute to the improvement of modern criteria for the efficacy and safety of the use of a group of systemic antifungal drugs in the treatment of chronic mycosis infection, which makes it possible to increase the effectiveness of treatment in clinical gynecological practice.