## **MODERN PHARMACOTHERAPY OF PSORIASIS**

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On today's time of about 4 % of the population suffer from dermatological diseases such as psoriasis. Clinical manifestations of psoriasis are often located on visible parts of the body, causing psycho-emotional stress, depression patient that exacerbates the disease. Environmental, genetic, and immunologic factors are important in the development of psoriasis. About 30 % of patients are at risk of developing severe forms of dermatosis, psoriatic arthritis, leading to disability.

Nowadays, the actual problem is the selection of an effective method of treatment of this dermatosis. Modern pharmacotherapy psoriasis includes an external therapy, systemic therapy and phototherapy (PUVA has an antiproliferative effect and also helps to normalize keratinocyte differentiation). For the external therapy used of emollients; keratolytic agents (Salicylic acid) are used to remove scale, to smooth the skin, and to treat hyperkeratosis; ointments, creams, lotions containing glucocorticoids (Triamcinolone acetonide, Betamethasone); preparations containing activated zinc pyrithione, ointments containing synthetic analogs of vitamin D<sub>3</sub> (Psorcutan, Divonecs) allowing vehicles - ointments containing tar, naphthalene. Systemic therapy based on the use of antimetabolites (Methotrexate), calcineurin inhibitors (Cyclosporine), synthetic retinoids (Acitretin), glucocorticoids (Dexamethasone). Breakthrough in the treatment of psoriasis was development of pathogenetic part immunobiological therapy, mechanism of action which is aimed at the selective inhibition of specific markers of immune inflammation in the skin. In the treatment of psoriasis recommended tumor necrosis factor inhibitors (Infliximab), selective immunosuppressants (Efalizumab). New possibilities in the treatment of psoriasis drug Ustekinumab (Stelara). This is a fully human monoclonal antibody, overwhelming both the initial and key stage of the disease pathogenesis. Ustekinumab indicated for the treatment of adults (18 years or older) with moderateto-severe plaque psoriasis. According to the literature Ustekinumab has optimum safety and efficacy profile, clinical improvement (reduction of erythema, infiltration and desquamation) 75 % have almost 80% of patients, the drug was well tolerated, convenient outpatient treatment (subcutaneous injection of 1 time per quarter, four times per year), a side effect is not amplified with time and at the level of placebo.

Modern pharmacotherapy of psoriasis with new immunobiological preparations, in particular ustekinumab, provides control over the course of psoriasis.