

307. PHARMACOLOGICAL ASPECTS IN THE TREATMENT OF POLYCYSTIC OVARY SYNDROME

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Introduction. Polycystic ovary syndrome is a heterogeneous disorder characterized by hyperandrogenism, insulin resistance, metabolic disorders, anovulatory cycles and infertility, affecting 6% - 20% of women of reproductive age. At the same time, this syndrome represents about 75% of the causes of endocrine infertility and 95% of the causes of hirsutism.

Aim of the study. The purpose of the study was to select the groups of drugs used in the treatment of polycystic ovary syndrome and to analyse their presence on the pharmaceutical market with argument of the rationality of use.

Materials and methods. The specialized literature was analysed with the selection of the groups and drugs recommended in the pharmacotherapy of polycystic ovary syndrome with the argument of the pathophysiological mechanisms responsible for their effectiveness. Based on the study of the State Nomenclature of Medicines, were selected the groups of drugs present on the pharmaceutical market in the Republic of Moldova.

Results. In the Republic of Moldova are registered metformin (oral antidiabetic biguanide) and combination medication (with glibenclamide, sitagliptin, vildagliptin), saxagliptin (oral antidiabetic, dipeptidyl-peptidase-IV inhibitor), letrozole (aromatase inhibitor), ciproterone, flutamide, finasteride (antiandrogen), clomiphene (estrogen receptor modulators), oral contraceptives (estrogen-progestin), spironolactone (aldosterone antagonist and antiandrogen), gonadotropins, myoinositol and simvastatin (hypolipemic statins). The use of oral antidiabetics is determined by the diminution of insulin resistance and metabolic effects that accompany the metabolic syndrome (obesity, dyslipidemias, hyperinsulinemia, hyperglycemia). Antiandrogenic preparations, aromatase inhibitors, spironolactone and oral contraceptives will contribute to the combat against hyperandrogenism and hirsutism. Hypolipidemic statins will result in decreased cholesterol synthesis and steroidogenesis with excessive testosterone synthesis. Gonadotropin drugs will be used for ovulation and pregnancy. Myoinositol and polyvitamin and mineral supplements will help correct metabolic disorders.

Conclusions. The study established the presence of groups of drugs used in the treatment of polycystic ovary syndrome in the State Nomenclature of Medicines, which will influence the pathogenetic links of the disease.

Key words: polycystic ovary syndrome, pharmacotherapy

308. PRINCIPLES OF MIGRAINE TREATMENT

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Introduction. Migraine is a recurrent headache disorder affecting ~15% of the population during the most productive periods of their lives, between the ages of 22 and 55 years. Chronic migraine is no longer considered a complication of migraine and is recognized in individuals