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Ways of Pharmacological Correction of Systemic Inflammatory Reaction Syndrome, Hemostasis Disorders and Endogenous Intoxication

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Abstract
There are no studies and results of these in the field of analysis of processes in CVD caused by poisoning of the criminal code and its derivatives. The rate of pathological processes is quite high and implies immediate clinical measures and correction of pathogenesis.

Keywords: Pharmacological Correction, Endogenous Intoxication.

In acute chemical poisoning of the criminal code and its derivatives, anti-inflammatory treatment has shown itself most effectively, which is aimed at directly balancing and correcting the hemostatic system. Anti-inflammatory treatment in most cases correlates with anti-infective therapy, therefore, usually these two types of treatment approach are understood as one whole. In parallel with anti-inflammatory therapy, detoxification and immune-modulating therapies are also advisable.

As a conclusion, from the above it follows the fact that the clinical and pharmacological specialization of the treatment of a pathological process should be chosen so that in the conditions of these there is a practical opportunity to control the criteria indicators of CVD, while determining the threshold for both the intensity and duration of exposure to external, negative factors on the body. If the described requirements are not met, the symptoms of CVD get out of control and acquire a pathogenic character [2.4.6.8.10.12.14.16].

Summarizing this chapter, it can be noted that the theses outlined in the previous paragraphs allow us to consider the pathogenesis of the systemic inflammatory reaction syndrome caused by poisoning of the criminal code and its derivatives at least at the theoretical level, although the author has proved the practical applicability of these on the basis of fixed criteria parameters. The author has shown due to which criteria SSR can be considered as a syndrome of multiple organ failure in certain clinical pictures; the chapter describes the pathogenesis of the course of DIC syndrome, as well as other pathologies and disorders caused by the radicalization of LC, which are the initiators of inflammatory processes if the criteria for these exceed the limit values.

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In modern theoretical medicine, there is no information about CVD caused by acute poisoning of the criminal code or its derivatives, which, for obvious reasons, complicates CD and the treatment of patients. The duration of treatment is often much longer, due to the ambiguity of the clinical picture of what is happening in the conditions of poisoning with CC or its derivatives; there are no certain characterized pharmacological mechanisms that are characteristic of CVD in cases of poisoning with CC and its derivatives, although the relevance of immune-regulating therapy in CVD is described and characterized. In this regard, the urgent need in the conditions of CD and treatment of CVD caused by poisoning of the criminal code and its derivatives is the task of developing a reasonable complex of treatment thereof. In order to reduce the likelihood of a fatal outcome in cases of UC or its derivatives, it is necessary to competently select and construct both infusion and immunomodulatory therapy, in which factors contributing to the aggravation of various pathologies caused by poisoning are inhibited. In this regard, it is advisable to identify the prognostic informativeness of immunological disorders in patients with UO, to develop an algorithm for the prevention of immune dysfunction in complex therapy, in order to prevent the development of the disease, the optimal solution of which will significantly improve the results of treatment in this contingent of patients [1.3.5.7.9.11.13.15.17].

Taking into account the above, it should be concluded that when analyzing data that already exist in the modern literature aimed at investigating CVD caused by poisoning of the criminal code and its derivatives, there are still a number of uncertain clinical cases, the degree of severity and frequency of which also imply a criterion analysis. With pronounced CVD caused by poisoning of the criminal code and its derivatives, the study of pathogenesis and the search for possible ways to correct it using pharmacological methods are of acute relevance.

Conclusion. All patients with acute acetic acid poisoning after hospitalization had a 10-fold increase in serum procalcitonin. The content of procalcitonin in the blood serum of patients who had pneumonia and the treatment and course of the disease led to a fatal outcome due to inflammatory complications in the form of pneumonia, sepsis, multiple organ failure, the content of procalcitonin in the blood serum reached a diagnostic value for an increase in systemic inflammatory reaction (1.3 and 1.9 ng / ml), from the third day after admission and on the fifth day, the indicators increased (1.6 and 3.2 ng/ml) in patients of these groups, respectively.

Dynamic indicators of the D-dimer content in blood plasma in patients with fatal CC poisoning showed a 13.7-fold (2.93 (2.65; 3.37) mcg/ml) excess of the D-dimer values in healthy people on the first day, progression and increase in the D-dimer index during the observation period on the 3rd and 5th days being on treatment.

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