SAFETY CONTROL OF MEDICINES

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Abstract: *This article discusses the safety of drugs, the prevention of adverse drug reactions, and provides some effective recommendations.*

Keywords: *drug safety, safety monitoring, adverse reactions.*

Nowadays, ensuring the safe use of medicines is one of the global priorities of modern health. According to the World Health Organization, drug adverse reactions are one of the top ten causes of death in many countries around the world. Provides monitoring of drug safety, detection, evaluation and prevention of adverse drug reactions.

The main objectives of monitoring:

1) early detection of hitherto unknown reactions and interactions;

2) to determine the increase in the rate of adverse reactions;

3) identification of risk factors and possible mechanisms that cause adverse factors;

4) assess the quantitative aspects of the risk-benefit analysis and disseminate the information needed to improve prescription.

The main tasks of monitoring:

- rational and safe use of drugs;

- assessment of risks and benefits of drugs and information about them;

- training and informing patients;

- suspicions of ineffectiveness of drugs and the presence of pharmaceutical defects, the development of resistance (for example, to antibiotics);

- ensuring the level of reliability of the relationship between drug use and the resulting adverse reaction.

According to the Andijan branch of the Republican Scientific Center for Emergency Care, in October, November and December 2020, 44 patients were admitted to the toxicology department with a diagnosis of "allergic reaction to drugs" and "drug poisoning." If drugs do not give the expected results or cause serious side effects, the problem has occurred in our country for the last 15 years. This is explained by the lack of falsification or therapeutic effect, ie. poor quality of medicines. Results: In 11 cases, an allergic reaction was observed after 1 tablet or 1 injection of the drug. In 13 cases, patients received multiple medications (NSAIDs, antibiotics, vitamins) at the same time. Most often, drug poisoning has been observed in suicide attempts with NSAIDs (7 cases), antibiotics (5 cases), citramon (8 cases). Allergic reactions to drugs were mainly manifested in the form of acute urticaria, itching, rash, weakness, nausea and vomiting, headache. 4 patients had toxic encephalopathy and 3 patients had Stevens-Johnson syndrome. Anaphylactic shock was observed in the following patients: analgin, aspirin, lidase, ceftriaxone and biseptol, paracetamol. In one case of anaphylactic shock (in a 54-year-old woman), which developed from a single intramuscular injection of ceftriaxone, in the form of fainting and seizures, blood pressure-0 mm Hg; in another case (38-year-old woman) -consciousness was also noted from injections of lidase and benzylpenicillin. In the third case, anaphylactic shock developed after intramuscular administration of analgin and oral administration of a single aspirin tablet. A 15-year-old patient had tremors, severe muscle pain, vomiting, abdominal pain, stool disorders, enterocolitis, palpitations (heart rate 100 beats per minute), blood pressure 80/50 mm Hg, liver Increased by 1 cm. The 56-year-old patient felt his weakness 20 minutes after taking 1 tablet of Biseptol, after which he could not remember what had happened to him. Unconsciously admitted to the toxicology department, blood pressure - 0 mm. Hg, respiration rate - 32 per 1 minute, heart rate 110 per 1 minute. After 40 minutes. after that, bullous eruptions appeared in the legs. All patients received timely qualified medical care and on average 3 days they were discharged in a satisfactory condition.

Unreasonable use of drugs, insufficient history, including pharmacological and allergological, lack of adequate indications for the use of the drug, can result in anaphylactic shock caused by the drug. Thus, the factors influencing the development of drug allergy are: self-medication, prescription of drugs without taking into account the anamnesis, polypharmacy, frequent, repeated prescribing of the same group of drugs or counterfeit drugs (drugs)) to receive. The issue of ensuring the completeness and quality of reports of adverse reactions remains an important issue. There are no safe medications, any medication can cause an unwanted reaction. If the benefit outweighs the risk, the drug is considered safe. The specialist decides on the benefit / risk ratio in a particular clinical situation based on the available information about the drug and the patient, and decides whether to prescribe the drug accordingly. It should be understood that the risk of developing adverse reactions is not always related to the properties of this active substance, but also to factors such as the correct prescribing and use of the drug. Every health care professional should report the following facts and circumstances have been identified in the use of life-threatening and harmful drugs:

a) the severity, nature or frequency of side effects, severe side effects, specific features of interaction with other drugs or unexpected adverse reactions that do not comply with the approved instructions for use Identify the information in the. medicinal product;

b) to determine the risk to the life and health of the mother and fetus when using the drug during pregnancy and lactation;

c) determination of resistance to infectious agents in the use of antibacterial and antiviral drugs; d) to determine whether there is a clinical effect of vital drugs, unless it is based on the individual characteristics of the patient and the specific features of his disease;

f) detection of errors in the use of the drug as a result of misinterpretation of the information in the instructions for use by health care providers or patients;

(g) Identification of cases of drug abuse, intentional overdose or intentional harm to human life and health;

h) to determine the characteristics of the interaction of the medicinal product with other drugs that are not specified in the instructions for use and endanger human life and health.

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