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# RESEARCHING OF DRUGS USED FOR CORONARY HEART DISEASE REGISTERED IN THE REPUBLIC OF UZBEKISTAN

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Annotation. Clinical trials have found that more intensive blood pressure targets reduce PVR compared with standard blood pressure control in middle aged and older adults. Health policies that create an enabling environment to make healthy lifestyle choices acceptable are essential to indivating people to make and maintain them. Identifying people at highest risk for cardiorascular disease and providing them with appropriate treatment can prevent them from dying prematurely. Access to inedicines for noncommunicable diseases and essential health technologies in all primary health care settings is essential to ensure that those in need receive timely treatment and consultation [1].

Key words: content analysis, assortment, drugs for coronary heart disease, pharmaceutical market.

Introduction. For the treatment of severe, rapidly progressing and drug-resistant -ischemic heart disease, which is a key factor leading to disability and mortality, the most promising complication of rational pharmacotherapy with myocardial revascularization is recognized as the most promising today. It is important to emphasize that the potential for improving the quality of life and prognosis of patients is realized in the postoperative period. In this regard, a prospective study of the outcomes, quality of life of cardiac surgical patients at the rehabilitation stage, as well as the assessment of pharmaco<mark>therapy strateg</mark>ies that determine the effectiveness of the medical technologies used and justify their socio-economic effectiveness, seems relevant at the present time. Lowering blood pressure is a particularly important strategy for slowing the progression of heart failure in individuals at risk. Intensive blood pressure control is predicted to increase life expectancy by up to 3 years if started in middle age. The traditional stepwise sequence of drug therapy may lead to treatment inertia and delay early effective blood pressure control. It has been proven that a preliminary combination of 4 drugs in the form of one tablet in fixed ultra-low doses (irbesartan 37.5 mg, amlodipine 1.25 mg, indapamide 0.625 mg and bisoprolol 2.5 mg) provides an earlier and more sustainable reduction in blood pressure compared to the beginning taking 1 drug [2]. Dietary risks account for 6.58 million





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deaths from CVD and 8 million deaths overall in 2021. Dietary risks include undernutrition (fruits, vegetables, legumes, whole grains, nuts and seeds, milk, fiber, calcium, omega-3) and overconsumption of certain foods (red and processed meats, sweetened drinks, trans fatty acids and sodium) [1,2]. Excess dietary sodium is a major contributor to hypertension, and moderate dietary sodium restriction of 3 grams per day is predicted to significantly prevent the risk of PWS [2]. Today, the drug market of the Republic of Uzbekistan is characterized by a steady increase in the product range. The increase in the product range is largely due to the registration on the pharmaceutical market of the Republic of Uzbekistan of a large number of generic drugs from foreign and domestic manufacturers. This has significantly increased the possibility of choosing the necessary medications, taking into account modern approaches to pharmaeotherapy of pathological conditions of the heart, individual characteristics of the course of diseases, and consumer preferences of end consumers. As can be seen from the data in Table 1, in the State Register of Medicines of the Republic of Uzbekistan in 2023, 649 names of drugs for ischemic heart disease were were 009! Drugs affecting the renin- angiotensin registered: of which 26.34% %--"COL. Drugs for the treatment of heart diseases", 15.1% - "C10. system", 21.57Lipid-lowering drugs 1448% "Q05. Angiopolietins/", 11.86% "C07. Beta-blockers", 9.24% - "Cos. Divertics.", 8.93% - "Cos. Calcium channel blockers", 8.47% - "Co4. Peripheral yasodilators" and 5.08% - "CO2. Antihypertensive drugs." An analysis of drugs used for eschemic heart disease registered in the Republic of Uzbekistan under the INN showed that the largest number of drugs drugs are foreign - 136 drugs drugs -46.74%. 86 medicinal products are represented from manufacturers in the CIS countries drugs - 29.55% and 69 drugs from domestic manufacturers drugs - 23.71% (Table No. 1).

table 1

for ischemic locart disease, registered in the Republic of Uzbekistan under the INI						
No.	Country	Quantity	<mark>Sla</mark> re, %			
	Domestic drugs	69	23.71			
	CIS countries	86	29.55			
	Foreign drugs	136	46.74			
	TOTAL	291	100.00			

alysis of drugs used

As can be seen from Table 3, an analysis of drugs used for coronary artery disease registered in the Republic of Uzbekistan by dosage forms showed that these drugs are produced in various dosage forms.

Table 2.



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## Analysis of medicines used

# for ischemic heart disease, registered in the Republic of Uzbekistan by dosage forms of release

Telease									
No.	Dosage form	Domestic drugs	CIS	CIS Foreign	Total	Share,			
			countries	drugs		%			
	Tablet	79	91	262	432	66.56			
	Capsule	2	9	16	27	4.16			
	Solution	87	<mark>5</mark> 1	40	178	27.42			
	A drop	2	4	5 (-	eleven	1.71			
	Medicinal plant raw materials				12th	0.15			
	Total	171	155	323	649	100.00			
					(A)				

The largest percentage falls on such dosage forms as tablets 66.56% (432 items) and solutions – 25.42% (178 items). And the least for capsules is 4.16% (27 items), drops – 1.71% (11 items) and medicinal plant raw materials – 0.15% (11 item). Range of drugs used for ischemic heart disease in the State Register for 2023, is represented by 649 assortment items, taking into account trade names, international nonproprietery names, dosage forms, doses and manufacturers of dosage forms such as tablets, capsules and solutions. Health policies that create an enabling environment to make healthy lifestyle choices acceptable are essential to motivating people to adopt and maintain them.

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