## IMMUNOSUPPRESSANTS IN MANAGEMENT OF INTERSTITIAL LUNG DISEASES

## E. O. Merenkova Abstract

Immunosuppressive therapy is a treatment aimed on the limitation of immune response of the human body, resulted in temporary reversible immunity suppression.

Widely used at present time immunosuppressive medicines exhibit different activity. Mild immunosuppressive effect is a predominant feature of non-steroid anti-inflammatory agents, heparin, gold, penicillins, 4-aminochinolone derivates and others so called «smooth» immunosuppressants. Moderate immunosuppressive effect is associated with corticosteroids, used in moderate doses. The cytotoxic drugs, used for treatment of neoplasms, such as antimetabolites, alkylating compounds, antilymphocytic and monoclonal antibodies, some antibiotics, have most powerful immunosuppressive activity. They are also called «great» immunosuppressants.

Glucocorticosteroids are basic drugs for management of the number of interstitial lung diseases, including such conditions as idiopathic interstitial pneumonia, pulmonary sarcoidosis, Langerhans cell hystiocytosis, granulomatosis with polyangiitis (Wegener's syndrome), eosinophilic granulomatosis with polyangiitis (Churg-Straus' syndrome), hypersensitive pneumonitis, toxic (including drug toxicity) pneumonitis, Goodpasture's syndrome, lung eosinophilic syndromes, lung involvement in connective tissue diseases.

At the same time a resistance to glucocorticosteroids is observed quite often, which determines the necessity of initiation of immunosuppressive therapy.

Current article contains a literature review data, which give a general characteristics of drugs, used for immunosuppressive therapy of patients with interstitial lung diseases, describing their mechanism of action and adverse reactions.

Key words: immunosuppressants, interstitial lung diseases, , therapy.

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levgeniia A. Merenkova National institute of phthisiology and pulmonology named after F. G. Yanovskyi NAMS of Ukraine Clinical-functional department PhD, senior research assistant 10, M. Amosova str., 03680, Kyiv, Ukraine Tel./fax: 38 044 270-90-44, merenkova1@gmail.com