

## Hepatotoxicity – What Should you Always Remember?

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Drug-induced liver damage is a pressing problem of modern hepatology and accounts for more than 10% of all adverse drug reactions. In Ukraine, the incidence of hepatotoxicity among hospitalized patients is 4-6%. Studies of American authors have found that more than 50% of cases of acute liver failure and 2-5% of cases of jaundice are the result of adverse drug reactions. Due to the rapid growth of the range of medications over the past 25 years, a 12-fold increase in drug hepatotoxicity has been registered.

Drug-induced hepatotoxicity is an acute or chronic liver injury secondary to drugs or herbal compounds. Drug-induced hepatotoxicity is the appearance of structural and functional liver damage caused by taking pharmaceuticals. The disease is manifested by discomfort and pain in the right subcostal area, jaundice, dyspeptic disorders. Often develops intoxication syndrome, joins neurological symptoms. For diagnosis, laboratory tests (hemogram, liver tests, determination of viral hepatitis markers) and instrumental methods (ultrasound, biopsy) are used. Treatment involves withdrawal of provoking drugs, prescription of hepatoprotection, and infusion therapy [1-3].

More than 1,200 types of drugs can cause liver damage, about 200 of which have a proven hepatotoxic effect. The most common adverse reactions are caused by taking nonsteroidal anti-inflammatory drugs and antibiotics. This is due not only to their potential hepatotoxicity but also to widespread uncontrolled use. The development of the condition is facilitated by

- **Prolonged therapy:** A number of diseases require prolonged or lifelong use of corticosteroids and other hormones, cytostatics. These drugs are metabolized by the liver, gradually

damaging hepatocytes and impairing their function. The situation is complicated by the inability to withdraw the drug.

- **Polypragmasy:** Simultaneous use of more than 6 drugs increases the likelihood of adverse reactions up to 80%. Hepatotoxicity occurs because the enzyme systems cannot cope with a large chemical load. Reactions are possible with even low therapeutic doses.
- **Polymorbidity:** Patients who have several chronic diseases, including liver disease, are more susceptible to hepatotoxicity. Systemic pathologies disrupt the normal metabolism of drugs and contribute to their excessive accumulation in the body.
- **Self-medication:** Many people buy several over-the-counter drugs in pharmacies and take them without consulting a doctor. Such unproven drug combinations greatly increase the risk of hepatotoxicity, especially if the dosage or frequency of administration is exceeded.

In conclusion, all physicians and gastroenterologists should well know that drug-induced liver damage can be caused by pharmacological agents, dietary supplements, and traditional medicine. The possibility of drug-induced liver damage in patients with unexplained acute or chronic liver disease should always be considered. Drug-induced liver injury in patients with unexplained acute or chronic liver disease should always be considered.

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