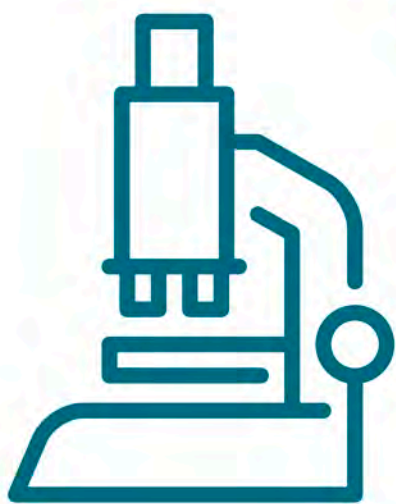


KHARKIV NATIONAL MEDICAL UNIVERSITY

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BIOMEDICAL SCIENCES



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APPLICATION OF CARBOXYMETHYLCELLULOSE AS A CARRIER OF MEDICAL PREPARATIONS FOR THE BURN WOUNDS TREATMENT

Introduction. Non-invasive gel-based preparations for the treatment of purulent and burn wounds are of particular interest in medicine and pharmacology nowadays. From a technological point of view, they are hydrophilic components that swell in water forming colloidal solutions with variable consistency. Such solutions include carboxymethylcellulose (CMC) gels. This compound has significant advantages compared to fat-based ointments, namely: high osmolarity, facilitation of sloughing and wound cleansing, and adsorption of discharge from wound. Such systems have necessary characteristics for use in medicine: low toxicity, solubility in water, resistance to the environmental factors. They show buffering action on addition of electrolytes and almost unsusceptible to microbial contamination. At the same time, carboxymethylcellulose is hypoallergic, does not provoke skin reactions, and the raw materials for CMC production are inexpensive which makes them cost effective.

Aim. The aim of this work was to study the physicochemical properties of CMC solutions in order to justify further application as medicinal compositions for the treatment of burn wounds.

Materials and methods. In the experiment, the following parameters were examined: concentration of solution, temperature, effect of modifying additives (glycerin, ascorbic acid), and syneresis processes (aging time) under standard storage conditions. The following characteristics were studied: density, viscosity, pH, and resistance to biological contamination. The viscosity was measured by means of viscometer VBR-1,

the pH value was determined using pH meter Eutech-510, and temperature conditions were monitored using laboratory thermometer TS-7-M1.

Results. Studies have shown that 3% pure CMC solutions and solutions modified with glycerin have the most suitable viscosity for use as an ointment. Addition of ascorbic acid leads to a sharp decrease in the gel viscosity, making it unsuitable for use as a medicine. Ascorbic acid also significantly reduces the pH value which can affect the acid-base balance of the skin. Elevation of temperature of the solvent at the preparation stage contributes to decrease in the viscosity of the final solution, while the addition of dry substance to the solvent, on the contrary, leads to a directly proportional increase in the viscosity of the gel. It should be noted that change in the viscosity of the solution practically does not affect the value of its density, which under these conditions can be taken as a constant. The study of the aging of the solution was intended to trace the change in its characteristics up to unsatisfactory values during storage under standard conditions. The results showed that the most stable was 3% CMC unmodified gel. The shelf life without significant changes in characteristics was 3 months. Solutions modified with ascorbic acid showed significant decrease in viscosity during this period, and biological contamination was observed in gels modified with glycerin.

Conclusion. Based on the above studies, the following conclusions can be drawn: 3% CMC unmodified gel is the most suitable for application in medicine as a carrier for preparations, however, it cannot be used in the pharmaceutical industry at this stage of the study due to the short shelf life. Nevertheless, this work is relevant, promising, and requires further research.

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