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THE IMPORTANCE OF ALCHEBA DRUG IN POST-STROKE APHASIA

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Abstract. Alcheba is an independent means of reducing the severity of aphasia, but the best results were achieved by combining them. The effect of taking Alcheb and using it persisted for a long time after the completion of treatment. When analyzing the integral semi-quantitative assessments of the general condition and the cognitive sphere, an increase in the social adaptation of patients was noted, which took place against the background of an improvement in mnestic abilities and concentration of attention. This review considers the role of drug therapy in the treatment of post-stroke aphasia, the evidence for efficacy of different agents, and the theory-based explanations of drug-related benefits for aphasia rehabilitation.

Keywords: Alcheba, mnestic abilities, post-stroke aphasia

Pharmacological interventions modulating stroke-induced disruption of diverse neurotransmitters may improve language and communication deficits in aphasic patients through facilitation of brain plasticity and long-term potentiation. However, benefits are not evident for all compounds and refinement in clinical trial designs is required. Some pharmacological trials have failed because drug treatment was not combined with speech-language therapy, while other trials combining drugs with intensive model-driven therapies also failed probably because of short-trial duration, inadequate sample selection, or lack of drug action. Preliminary data reveals that combining neuroscience-based intensive aphasia techniques (constraint-induced aphasia therapy) and drugs acting on cholinergic and glutamatergic neurotransmitter systems are associated with better outcomes than other strategies and long-term maintenance of benefits. Although further studies are needed, current state of the evidence suggests that drug therapy may play a key role in the treatment of post-stroke aphasia.

Objective: to study the effect of Alcheb in the treatment of post-stroke aphasia

Methods: Patients were divided into two groups: group 1 received Alcheba (20 mg per day), group 2 received placebo (first 16 weeks). Clinical evaluations were performed at two breakpoints (16 and 18 weeks) and at 20, 24 and 48 weeks. The results were determined by the change in the aphasia coefficient.

Results: The study involved 30 patients, and27 of them went through both phases of treatment. Compared to the placebo group, the Alcheba group showed a more significant improvement in the aphasia rate (16 weeks, 18 weeks, 20 weeks) during the

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period of taking the drug and after stopping the intake.The treatment led to significant improvements in both groups, but the effect of therapy was more significant in combination with Alcheba.

Conclusions: Alcheba is an independent means of reducing the severity of aphasia, but the best results were achieved by combining them. The effect of taking Alcheb and using it persisted for a long time after the completion of treatment. When analyzing the integral semi-quantitative assessments of the general condition and the cognitive sphere, an increase in the social adaptation of patients was noted, which took place against the background of an improvement in mnestic abilities and concentration of attention.

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