

**SYSTEMATIC REVIEW LITERATURE ON THE EFFECTIVENESS OF THE MEDICINAL SUBSTANCES FOR TARGETED TREATMENT OF THE RENAL CELL CANCER**

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**ABSTRACT**

*Nowadays, malignant tumors are the second leading cause of death all over the world. Among malignant tumors of the kidney, renal cell cancer accounts for 90%. According to statistic information, stage 2 and 3 of the kidney cancer is more common among patients with this disease. Every year, 403.3 thousand new cases of kidney cancer are revealed in the world and this index is 2-3% of all epithelial malignant tumors.*

**KEYWORDS:** *Arterial Hypertension, Systematic Analyzing The Clinical Literature, Medicinal Substances.*

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**INTRODUCTION**

According to the analyzing the structure of oncological diseases in the Republic of Uzbekistan in 2019, it took the 10th place, i.e. this disease was registered in 781 patients [1-5]. The incidence in men is 1.5 times higher than in women, and the disease is observed mainly in elderly patients, especially in patients aged 60-70 years. This disease occurs because of smoking, obesity, arterial hypertension [3,10].

**The aim of the Research.** To determine the efficacy of sorafenib and pazopanib as the first line of therapeutical methods and axitinib and sunitinib as the second line of therapeutical methods in the targeted treatment of stages 3 and 4 of the renal cell cancer by conducting a systematic analyzing the clinical literature.

**Methods and Techniques.** During the research, there has been realized the PubMed database using keywords such as renal cell cancer, targeted therapy, sorafenib and pazopanib, axitinib and sunitinib on the systematic searching the clinical literature.

**Received Results.** There has been reflected in the prism diagram of the graphical representation of the interactions the effectiveness of sorafenib and pazopanib in the first treatment line of stages 3 and 4 of the renal cell cancer, analyzed in a systematic review of the data obtained from the clinical search analysis. During the search, there have been totally identified 79 citations, and

one citation was relatively relevant. The remaining citations were not selected because they did not meet the selected criteria, they have no both interventions and they have comments and manuscripts about the research. When the full text of the selected articles was studied, the first-line targeted therapy sorafenib and pazopanib medicinal substances were included into the content of the systematic treatment rather than alone. To comment our research, there has been selected the retrospective research of Miller (1) from the United States [6], which was conducted in 2016. During the research, there have been examined two groups of patients and there has been tested and confirmed the suitability of the first treatment line.

There have been selected medicinal substances and their doses for the second treatment line, and there have been determined the day discontinuation of the first treatment line and treatment days with modified therapy.

There has been derived the effectiveness of the preparations axitinib and sorafenib in the second treatment line of stages 3 and 4 of the renal cell cancer from the clinical search analysis, a graphical representation of the interactions, analyzed in the systematic review is reflected in the prism diagram. During the search, there have been totally identified 96 citations, and three citations were relatively relevant. The remaining citations were not selected because they did not meet the selected criteria, they have no both interventions and they have comments and manuscripts about the research.

Sergio Bracar (1) showed the effectiveness of axitinib medicinal substance in the second treatment line of the renal cell cancer, i.e. there was no metastasis to bones and liver in selected patients. There has been determined that the survival rate among selected groups was high [7].

Satoshi Tamada (1) showed that survival rate is high when cytokine medicinal substances are replaced with molecular purposeful medicinal substances (targets) in the treatment of the kidney cancer. In other words, tyrosinekinase inhibitors (TKIs) have been determined to be superior to inhibitors mTOR in linear therapy [8].

According to Hideaki Miyake researches (1), there has been shown the tolerance (patience) to additional diseases occurring in patients and the improvement of the patients' life quality. An important aspect of these researches is that the sensitivity of the selected 124 Japanese patients to the toxicity of the purposeful medicinal substances (targets) was higher than in Western patients [9].

## CONCLUSIONS

According to the results of the research, there has been confirmed the compliance with the US Oncology Association guidelines for systematic treatment of the renal cell cancer. Oral treatment has been found to require a longer duration and a higher level of observations than injection therapy. In general, most patients had high stability during the first treatment line. Because of the high effectiveness of the Pazopanib medicinal substance, it was included into the category 1, while sorafenib and axitinib were included into the category 2 as the most recommended medicinal substances for patients. Everolimus medicinal substance has been found not to be recommended in the first treatment line.

Axitinib has been found to be effective in the systematic treatment for the second treatment line of stages 3 and 4 of the renal cell cancer. There has been established that the main indicator in selected patients is the high survival rate of these patients.

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