

## THE IMPORTANCE OF STATINS IN BRONCHIAL ASTHMA

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**Abstract.** *Bronchial asthma is a chronic inflammatory disease of the airways characterized by bronchial hyperresponsiveness and reversible airflow obstruction. In recent years, it has been recognized that not only allergic but also systemic inflammatory mechanisms play an important role in its pathogenesis. Statins (HMG-CoA reductase inhibitors), primarily used as lipid-lowering agents, also possess anti-inflammatory, immunomodulatory, and endothelial-protective properties. This thesis analyzes the potential clinical significance and therapeutic role of statins in bronchial asthma.*

**Keywords:** *bronchial asthma, statins, inflammation, IL-6, TNF- $\alpha$ , bronchial hyperresponsiveness, immunomodulation.*

**Relevance.** Bronchial asthma is a widespread chronic respiratory disease that remains insufficiently controlled in a proportion of patients despite standard therapy, including inhaled corticosteroids and bronchodilators. Persistent airway inflammation in some patients highlights the need for additional anti-inflammatory strategies. Therefore, statins have attracted scientific interest as potential adjunctive therapy due to their pleiotropic effects.

**Aim of the Study.** To evaluate the effects of statins in bronchial asthma on: inflammatory biomarkers, clinical symptoms, pulmonary function, overall disease control.

**Main Findings (Based on Literature Review).** Statins may demonstrate the following beneficial effects in bronchial asthma: reduction of IL-6 and TNF- $\alpha$  levels, decrease in CRP concentration, suppression of airway inflammation, reduction of epithelial cell injury, decreased bronchial hyperresponsiveness, potential improvement in FEV1 values, possible reduction in asthma exacerbation frequency

**Discussion.** The beneficial effects of statins in bronchial asthma are mainly explained by their pleiotropic mechanisms, including: inhibition of inflammatory mediators, suppression of NF- $\kappa$ B signaling pathways, reduction of oxidative stress protective effects on endothelial and epithelial cells, However, therapeutic, response varies among patients due to different asthma phenotypes and underlying inflammatory pathways.



**Conclusion.** Statins may serve as a potential adjunct anti-inflammatory therapy in bronchial asthma.

1. They reduce key inflammatory biomarkers such as IL-6, TNF- $\alpha$ , and CRP.
2. They may decrease bronchial hyperresponsiveness.
3. Statins can contribute to improved asthma control in selected patients.
4. Further large-scale clinical studies are required to confirm their efficacy in asthma management.

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