significantly (p<0.01, p<0.05, p<0.05) . Monkshood and Rhubarb + Monkshood group showed no effects on the enzyme activity of CYP3A4.

Conclusions: CYP1A2 and CYP3A4 were mainly involved in the metabolic of aconitine which is the main toxic ingredients in Monkshood. The results from the present study suggested that Rhubarb make a contribution to induction of CYP1A2 and CYP3A4 in Rhubarb and Aconite Decoction. This could reduce toxicity of Rhubarb and Aconite Decoction. It shows that Rhubarb as monarch drug in a prescription was importance. In addition, Rhubarb and Aconite Decoction prescription could weaken the strong induction of CYP1A2 and CYP3A4 caused by Rhubarb. It suggested that overall concept of traditional Chinese medicine compound. However, further research is needed to understand the relationship between properties theory of Chinese medicinal Herbs and CYP450 enzyme.

Key words: CYP450 isoenzymes; Rhubarb and Aconite decoction; Compatibility of Medicines in prescriptions; metabolic drug interactions

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EFFECTS OF TRANSCRANIAL DIRECT CURRENT STIMULATION FOR SHORT-TERM SPATIAL MEMORY IN HEALTHY PEOPLE

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Abstract Transcranial direct current stimulation (tDCS) is one of the techniques of non-invasive brain stimulation. Over 50 years ago, it was shown that a slight impact on a subthreshold direct current cortex animals leads to a change in the activity of the cortical neurons that lasts a certain period of time and on completion of exposure. Similar effects can be achieved by noninvasive stimulation of human brain. Apparently, the primary mechanism of this phenomenon is the subthreshold membrane potential changes, while aftereffect synaptic plasticity is associated with glutamatergic synapses.

Key words: tDCS, transcranial direct current stimulation, brain, spatial memory.

Spatial memory is a critical skill for all people. According to the data available, the process of working spatial memory can be divided into three successive stages: 1) treatment facility; 2) processing of its spatial location and 3) object processing in the context of its place. Spatial processing of the object can be doneby means of two approaches: coordinate and categorical. It has been shown, morphological substrate of these actions is the posterior parietal cortex of the left and right hemispheres of the brain, respectively. This functional magnetic resonance imaging and studies use ofnon-invasive methods of brain stimulation confirms the existence of this asymmetry in the spatial memory. As described in the introduction of the work analyzed morphological substrate categorical and coordinates processing of spatial information, however, not their influence on spatial memory. In the first initially, a similar study was conducted by Heather et al, which that demonstrated the ability of transcranial brain stimulation constantdirect current of 2 mA power to change certain types of spatial memory, depending on the stimulation area. In connection with thesein this regard, we have assumed that lower amperage, part of the range of 0.5-2 mA exerts influence on certain types of spatial memory, using the standard arrangement of electrodes in the points P3- P4 + and P3 + P4-.

Materials and methods 18 volunteers participated in the experiment. To study were taken 18 healthy volunteers, 10 men and 8 women, aged 18 to 23. All thesubjects of the study appropriate the following criteriamatch the following criteria: (1) do not take medications that affect the central nervous system; (2) showed no abnormalities in conventional medical and neurological examination; (3) are right-handed; (4) had no signs of dementia; (5) did not show any sign of depression; (6) showed no sign of alarm.

The experiment used the point of stimulation P3 and P4 on the International 10-20 EEG system. These points Амурский медицинский журнал №4 (20) 2017

correspond to the posterior parietal cortex. Stimulation was carried out with direct current, the power of 0.7 mA, using a silicon electrode (3 x 2.5 cm) and a conductive gel "Akugel-electro", stimulation time was 20 minutes. We used three kinds of stimulation: 1) P3- P4 + - P3 point located on the anode to the cathode point P4; 2) P3 + P4-, on P3 located at the cathode to the anode point P4; and 3) P3 P4 0 0 - or placebo influence.

Participants of the experiment exposed three sessions of stimulation with an interval between them within three days. This range allows you enables to prevent the cumulative effect of stimulation. Therefore, each of the participants took three different stimulation embodiments in random order. After the stimulation, the participants performed the following two tasks:

- Spatial Memory Game thatis used to determine the level of short-term categorical spatial memory in subjects.
- Spatial Span Test from Cambridge Brain Sciences that issued to measure short-term spatial memory level coordinate.

Assessment of the side effects of stimulation is evaluated by collecting complaints men or women during and after stimulation

Results A comparative analysis of theresults performance of tasksafter various stimulation modes (see.vide Table 1). The differences between the "active" stimulations (P3-P4 +, P3 + P4-) and placebo stimulation have been identified.

Table 1.Results performance of tasks in different types of stimulation

	P3-P4+	P3+P4-	Placebo
Number of points Spatial Span	6,05±0,99	5,88±1,02	6,11±0,96
Number of points SpatialMemory	16,93±4,98	18,28±4,95	18,67±4,99
The amount of pixels Spatial Memory	190,11±92,99	178,95±83,56	161,21±73,75

According to the data from other sources, stimulation of type P3- P4 + allows you to increase the efficiency of the spatial coordinate storage, and the impact ofdirect current in a mode P3 + P4 mainly affects the categorical type of this memory. However, our findings are contrary tocontradictthis source which we followed during the wholeexperiment. We believe, that lack of effect associated with is related to insufficient current (0.7 mA). However nevertheless, given the current strength used is included in the range of 0.5 to 2 mA according to the respective scientific articles.

Conclusion Having analyzed the results, we can conclude that the use of current 0.7 mA does not affect spatial memory in of healthy people, the electrode positions and P3- P4 + P3 + P4. Further research will be aimed at increasing current strength, while maintaining the position of the electrodes and P3- P4 + P3 + P4.

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THE CLINICAL APPLICATION RESEARCH PROGRESS OF SEMEN PHARBITIDIS

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Key word: Semen Pharbitidis, Clinical Application, Research Progress

Semen Pharbitis is firstly recorded in the 'Ming Yi Bie Lu'. It can cause watery diarrheat obe laxative, dissolve phlegmand flush rheum, and tap stagnant with insecticide. Clinically, it is used for the treatment of edema puffiness, fecal and urinary stoppage, retention of phlegmand fluid, inverse gas and cough, abdominal pain due to parasitic infestation, etc. Semen Pharbitis is the object of drug property theory of Chinese medicine study. Now the progress statement of its clinical application is as follows:

The Study on Clinical ApplicationZhiqiangHuang with self – made Er Chou Decoctiontreated 20 cases of ascites due to cirrhosis. JiwenHuwith folk prescription of semen pharbitidiscured liver ascites effect. JunXutreatednephrotic syndrome with symptoms of surface floating limb swollen, or with pleural effusion, also received a better effect. JianmingQiused semen pharbitidis to treat intractable constipation. YuqinYan used fried pharbiticpowder to treat25 cases of intractable constipation. Clinically it can be used separately, or be added compound blunt mixing with water, but not into the decoction. Xi Wuadded HeiChou and BaiChou into the BaoHeWan, a Chinese herbal compound, to treat epigastric pain by administration decoction. Shaoxun Liu, a famous traditional Chinese medicine doctor, used semenpharbitidis to cure patients with epigastric pain resulted fromdiet stagnation. Clinical treatment effect of semenpharbitidis is obvious, and the application is worth promoting. Shuchan Liused pharbitidis, Rheiradix et rhizoma and Arecasemen cured 69 cases of pediatric pneumonia. Meizhong Yue, a famous traditional Chinese medicine doctor, treated children with partial eclipse, indigestion, stagnation and parasitic diseases by using HeiChou and BaiChou powder mixed with a small amount of sugar.

Discussion and ProspectToday Modern medicine develops rapidly and has a better and faster effect in the clinical. But, long-term use of Western medicine may be drug resistance or side effects, and some of the treatment is expensive, resulting in patients' not affording to.As a Chinese herbal medicine, semen pharbitidisobtains easily and has low prices. However, there are still some shortcomings. The study on the mechanism of pharmacological and toxi-