

## NEW DIRECTIONS PHARMACOTHERAPY VERTEBROGENIC PAIN SYNDROME

Basha A.V., Kazarinova M.V.

National University of Pharmacy, Kharkiv, Ukraine

pharmacotherapy@ukr.net

The pathology of the lumbosacral part of the vertebra in about 20-30% of all diseases of the nervous system and more than 80% of the diseases of the peripheral nervous system. Often under the influence of treatment the pain stopped by in a period of a few weeks to a month, and in 20% of cases become chronic. Of particular significance is the problem of out-patient treatment. Modern arsenal of knowledge includes recent studies that allow us to understand how undertreated acute pain leads to its perpetuation, the development of new therapeutic agents and approaches to pain management. Despite the level of achievements of modern medicine and the diversity of analgesic drugs, not all patients in the pharmacotherapy vertebrologic syndrome adequately anesthetized. This leads to a significant deterioration, as the immediate results of treatment, and adverse remote consequences. Studies of the mechanisms of pain, giving a better understanding of the nature of acute and chronic pain. Found that acute pain as a result of inflammation of the tissues, the generation of nociceptive impulses lead to sensitization of the paths in the central and peripheral levels. This results in the increase in the excitability of spinal neurons and facilitate the process of nociceptive pain impulses along paths that lead to the formation of hyperalgesia - an abnormally high sensitivity to pain stimulus. Inadequate analgesia in these patients according to the literature in 11-65% of cases leads to chronic pain, significant disability, disability and reduced quality of life.

**The aim** is study a new schemes in the treatment dorsalgia with centrally acting narcotic analgesic – nefopam (“Acupan”) in combination with NSAIDs – ketoprofen.

**Material and methods.** The study included men and woman between 19 and 47 years with the syndrome vertebralgy. For the clinical evaluation of pain was used visual analogue scale (VAS). Assessment is carried out in points or percentage, with 0 means no pain and 10 points - very severe pain to the point of tolerance. Patients were asked to make a mark corresponding to the intensity of the pain he has at the moment. To assess the overall scale SAN-being used.

**Conclusions:** 1. Based on the analysis of the data it can be concluded that monotherapy NSAIDs decrease pain by VAS in the first 7 days of treatment, 46,6% lower than the combined use “Acupan” and ketoprofen.

2. Application “Acupan” combined with ketoprofen in the complex pharmacotherapy acute pain vertebrologic genesis seems appropriate, because the drug has excellent analgesic activity, especially in combination with NSAIDs.