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Improving the Quality of Life of Patients with Back Pain

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5 Abstract

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- 6 This paper discusses improving the quality of life of patients with various pains on their back,
- ⁷ depending on the sex, age, and nature of the pain syndrome. 130 patients (46 men and 84
- 8 women) with vertebrogenic back pain were examined and were on ambulatory treatment in
- the neurological department of TMA. Age grade was from 20 to 55 years. According to the
- results of the examination, all patients were divided into three groups, depending on the
- presence or absence of pain syndromes.

Index terms— pain syndrome, quality of life, patients, chronic pain, acute pain

1 I. Introduction

ne of the most pressing problems of medicine is pain syndromes, which are a heterogeneous group of common 15 conditions, the medical and social significance of which is difficult to overestimate [1,2,3]. The reason for patients 16 to seek medical help is often the emergence or intensification of pain [4,5]. The most common cause of back pain 17 is dystrophic spinal lesions [6]. According to experts of the International Association for the Study of Pain, pain 18 lasting more than 3 months is considered chronic [7,8] . It is the relief of chronic pain in the back is the main 19 task in the treatment of this category of patients. At the same time, in 80% of patients, the pain disappears 20 under the influence of treatment within a month, but in the rest, they take a chronic course. Despite significant 21 advances in the development of issues of pathogenesis, diagnosis, and treatment of neurological manifestations 22 of lumbar osteochondrosis, many aspects of this pathology remain poorly understood. Of particular importance 23 is the problem of outpatient treatment due to the fact that the methods of therapeutic measures used in most 24 medical institutions are adapted exclusively to the inpatient stage [9]. Such a template approach, not taking 25 into account the stage, etiological and pathogenetic factors, peculiarities of cyanogenetic reactions in a particular 26 patient leads to a breakdown of compensatory reactions and worsens the results of rehabilitation activities [3,10] 27 . The lack of sufficiently effective care for patients with diseases of the spine, usually proceeding chronically, with 28 alternating remissions and exacerbations, leads to a loss of confidence in the doctor. According to a number of 29 experienced clinicians, the passivity of the doctor isunacceptable, as it can lead to the psychosocial death of the 30 patient long before his biological death [1,8]. In this regard, it is of interest to study the various components of 31 the quality of life for vertebral back pain. Their analysis will make it possible to rationalize medical tactics for 32 this pathology, which determined the goal and objectives of this study. 33

2 II. Material and Methods

The object and subject of the study were 130 patients (46 men and 84 women) with vertebral back pain and were on outpatient treatment in the neurological department of TMA. Patients with acute and chronic back pain between the ages of 20 and 55 years.

The purpose of the study is to assess the quality of life of patients with back pain, depending on gender, age

40 3 III. Results

and nature of pain.

- According to the survey results, all patients were divided into three groups depending on the presence or absence of pain syndromes. 1 st Group consisted of patients whose pain was once.
- Group II patients -having pain less than 3 months.
- Group III included individuals with algic manifestations that met the criteria for chronic pain.

The frequency of pain in patients of the second group in 40% of cases was once a month or was once. In persons of the third group, the most frequent pain occurred daily (17.6%).

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Localization of pain syndrome, for the most part, was traditional -cephalalgia or dorsalgia. Attention was drawn 48 to the fact that these algic violations were not isolated in most cases. Thus, in the group with acute pain, only 29 49 (16.9%) respondents complained of pain in the two other zones and only 5 (2.9%) in three or more respondents. 50 In the group with chronic pain disorders, almost every third respondent indicated two localizations -32 people 51 (32.3%), and three or more -16 people (16.2%). To relieve pain, the subjects took analgesics: irregularly -41.4% 52 of men and 57.5% of women, regularly -10.3% and 24.6%, respectively. Relief or sleep helped to relieve pain 53 -79.5% of men and 85.2% of women, sedatives -30.1% of men and 49.5% of women. Patients awoke because of 54 the pain of 25.1% of men and 58.5% of women. Thus, women regularly resorted to more painkillers than men. 55

56 5 IV. Conclusion

As a result of the study, it was found among people who did not currently seek medical help for pain syndromes, 47.7% suffered from acute and 52.3% chronic algic disorders. Significant gender differences were revealed both in the clinic and in the attitude of patients to pain syndromes. Both acute and chronic pain syndromes are more often recorded in women, the percentage of women in groups with chronic pain is higher than in groups with acute pain, although the difference is within the margin of error -30% and 33%, respectively. But, with acute pain syndromes, men were almost 2 times less likely to be referred for examination and treatment (44%) than women (66%). A comparative analysis of the ways to relieve pain revealed that women more often (49.5%) than men (30.1%) use both drug and non-drug methods (85% and 79.5%, respectively).

65 6 Contributors

Y. I. conceived and designed the study. Y. I. is the Principal Investigator and the study statistician who prepared
 the analyses. A. U. wrote the protocol, the Chief Investigator for the Y. I. All authors provided input and approved
 the final version.

7 Declaration of Interests

Authors declare that there is no competing interest.

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		Acute Pain Men Women Men Women Chronic Pain				Total
Once		10	18	11	13	52 (40%)
On	Several	9	16	9	21	55~(42,3%)
Times						
Regularly	y	3	6	4	10	$23\ (17,6\%)$
All		22	40	24	44	130~(100%)

Figure 1: Table 1:

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Investigated Parameters	Index Me	n Women
Rest or Sleep (% of Patients)	79,5	85,2
Sleep with Sleeping Pills (% of Patients)	30,1	49,5
Awakening due to Pain (% of Patients)	25,1	58,5

Figure 2: Table 2:

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- 76 [Voznesenskaya ()] , T Voznesenskaya . 2000. p. .
- 77 [Bentley et al. ()] , E Bentley , R Kerslake , P Miller , M Pringle // Bm , J . 2001. 322 p. .
- 78 [Batysheva ()] , T Batysheva . Russian Medical Journal 2002. 10 p. .
- 79 [Vorobyova ()], O Vorobyova. Russian Medical Journal 2003. 11 p. .
- 80 [Watson (ed.) ()] Chronic low back pain: Patient had chronic rather than acute pain, P J Watson . / P. J. Watson, 81 B. Collett // BMJ (ed.) 2003. 327 p. .
- 82 [Belenky ()] 'Dorsalgia with degenerative diseases of the spine'. A G Belenky . Russian Medical Journal 2002. 10 (22) p. .
- 84 [Koilubaeva et al.] $\it Erdes$ // $\it Scientific$ and practical rheumatology, D V Koilubaeva , O M Goryachev , Sh F Folomeeva . p. .
- [Amirjanova ()] Methodology for assessing the quality of life in the practice of rheumatologist, V N Amirjanova . 2003. p. .
- 88 [Kendrick et al.] Radiography of the lumbar spine in primary care patients with low back pain, D Kendrick , K 89 Kendrick , Fielding .
- 90 [Khanna (ed.) ()] The relationship between disease activity and quality of life in systemic lupus, H P Khanna .
 91 erythematosus / H. P. Khanna, R. M. Pandey, R. Handa // Rheumatology (ed.) 2004. 43 p. .