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Aspects on patients with chronic low back pain in Rehabilitation practice

In chronic low back pain treatment individual rehabilitation plays important role. Individuals who suffer with chronic pain often reject the notion that pain can be psychological or social, and often seek medical reasons to explain their pain. In many cases chronic pain is not associated only with medical reasons. The biological and neurological mechanisms of acute pain have been identified, but within the last decades, there has been a shift in examining chronic pain from a psychological perspective.

Biopsychosocial approaches to chronic pain focus on the complex interaction among the biological, psychological and social factors that are inherent in our experiences. According of ICF Core sets for low back pain the rehabilitation can be individualized for each patient and it plays important role in goal attainment. ICF is the WHO framework for measuring health and disability at both individual and population levels. These categories can be taken into account when conducting comprehensive, multidisciplinary assessment. Research show that psychological factors such as emotional distress and dysfunctional pain coping play a role in the development and maintenance of chronic low back pain, and it has emotional and behavioral consequences that influence the development of problems and outcome of treatment, and these may have more influence on disability and quality of life.

Increasingly widespread acceptance of the biopsychosocial model, along with the relatively modest performance of monotherapies, has led to increased research into the effectiveness of multidisciplinary rehabilitation. Main goals of the rehabilitation programs are: to reduce impairment, pain reduction, to provide improvement of functional abilities in activity and participation domains, to help the patient to return to productive life, to adapt physiotherapy program for persons with low back pain. As chronic pain is described as multidimensional, there is necessary to pay attention not only to medical treatment of low back pain but to psychological factors influencing low back pain disorder as well as coping. In National Rehabilitation Center Vaivari we performed study to examine stress coping among patients with low back pain in rehabilitation practice in Latvia.

Our results showed that almost all stress coping strategies scores for patients with low back pain in their first visit are higher than in patients with revisit to Physical Medicine and Rehabilitation doctor and there is statistically significant difference in the use of problem oriented stress coping. According to our data there were strong interrelationships of disability and Pain Catastrophization in all subscales. The research data showed significantly higher scores of Pain catastrophizing in patients with more severe disability. Achieved results highlight the importance of a multifactorial approach to pain management and the enormous significance of pain catastrophizing in patients with low back pain. It is critical to recognize these factors in both the acute and chronic pain patients in order to understand which aspects of their pain are a barrier to their recovery. The biopsychosocial approach view illness as the result of the dynamic interaction between psychologic and social factors and is widely accepted, but unfortunately not fully implemented. Therefore there is a necessity of the development of interdisciplinary pain management and rehabilitation approach programs for patients with low back pain.

Biography

Zaiga Kalnbērza Ribule, Vice President of Latvian Physical and Rehabilitation medicine Association, Member of European Union FRM doctors, Head of the department in National Rehabilitation Center Vaivari; department of General rehabilitation- Head of department. 2014 till present. Hospital of Kuldīga; department of Rehabilitation. Physical medicine and Rehabilitation 2013 till present (FRM doctor), Rīgas Austrumu klīniskā universitātes slimnīca (Riga university hospital). Physical and rehabilitation medicine physician. 2014 till 2019.

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