



Differential Approaches To Treatment And Rehabilitation Of Patients With Pain In Spin In Ambulator Conditions

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Background. Analysis of the frequency of treatment in the outpatient network of our country showed that more than 40% of patients in polyclinics come to the doctor with a complaint of pain. Epidemiological studies conducted in recent years in several countries of the world have shown a high prevalence of pain syndromes among the adult population. For example, in Europe, according to a large-scale epidemiological study, chronic pain affects about 20% of the population. The most common cause of non-oncological chronic pain syndromes are arthralgia and arthritis (35%), as well as back pain (24%).

The purpose of the study was identify effective method of the treatment and rehabilitation in patients with back pain in ambulatory condition.

Diagnosis. When interviewing and examining a patient with back pain, the doctor should remember the “symptoms of the threat”, the presence of which may indicate the possibility of the patient having a serious, sometimes life-threatening disease. According to international standards, in the absence of a patient with back pain “symptoms of threat” or radicular pain, there is no need to conduct laboratory and instrumental examinations, including radiography of the spine or studies using methods of computed tomography and magnetic resonance imaging (MRI). It is important to remember that imaging techniques with high frequency reveal degenerative-dystrophic changes in the spine, even in patients without back pain. Thus, according to the MRI of the lumbar spine, asymptomatic hernias of intervertebral discs are detected in individuals under 40 in 30-40% of cases, and in individuals over 60 years - in 100% of cases. Osteochondrosis can be considered only a prerequisite for the occurrence of back pain, but not its immediate cause.

Treatment and rehabilitation. Treatment of patients with nonspecific pain in the back should be directed primarily to the regress of pain symptoms, which helps restore the patient's activity and reduce the risk of chronic pain. In the acute period, it is necessary to limit physical activity, avoid lifting weights, prolonged sitting or lying down. Rehabilitation is a key point in the therapy and prevention of back pain of any type, it helps to ease the patient's condition and restore functioning (as far as possible). Rehabilitation should be started as soon as possible, specific methods depend on the strength and duration of the pain syndrome. The effectiveness of rehabilitation measures is assessed by VAS. Rehabilitation can be carried out both individually and within the framework of group sessions under the supervision of a rehabilitation specialist. The purpose of the classes is to give the patient information about safe movement and self-care at home, at work, etc. It is important to train the patient to keep the correct posture and to observe ergonomic (optimal) conditions for making movements, as well as to perform basic household movements without causing aggravation of pain. It is also important for the patient to teach the basics of household back protection.



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Conclusion. Treatment of patient with back pain is always personalized, includes the entire available arsenal of medicinal and non-drug methods, taking into account the age of the patient and the treatment that he receives for co-morbidities. Typically, it is acetylsalicylic acid, anticoagulants, as well as drugs that have hepatotoxic properties, for example, paracetamol. When prescribing drug therapy, one should adhere to the principle: the minimum dose of NSAIDs for the shortest possible time. Physiotherapeutic methods of treatment, for example, heat and/or cold treatment, massage, ultrasound, electrostimulation methods, traction, manual therapy, acupuncture and stretching exercises are more effective than drug based treatment. However, the only thing that provides a favorable prognosis for back pain is continuation of normal activity. It is proved that simple exercises are useful for chronic, subacute and postoperative pain syndromes in the back. At the same time, the rest of the physiotherapy methods to date there is no convincing evidence of effectiveness.