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Functional restoration– Evidence-based practice?

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Chronic and episodic pain disorders are inherently difficult to deal with and often the people living with them get spat out at the end of a system having watched their levels of function at work, home, and socially drop through the floor. Problems which start as relatively simple musculoskeletal disorders can quickly spiral into long term disability, reduced participation and breakdown of family life, and associated mental health disorders. Functional Restoration Programmes are designed to tackle these multi-faceted issues in a practical way, through the inclusion of Cognitive Behavioural techniques, education, general fitness and work hardening. However, they have become a contentious intervention; whilst thousands of people and businesses find them beneficial in restoring fitness for work and life a recent systematic review questioned its efficacy. They are, after all, relatively costly and time intensive, so require a substantial investment from the fee payer. This review will look at what Functional Restoration Programmes are (and what they aren't), where the discrepancies arise, and where these interventions fit into the clinical picture. It will address issues of expected outcomes and return on investment (based on an occupational health model), and argue that they have an important role in the clinical pathway. The practical elements of inclusion and exclusion criteria will be covered as crucial factors to success, plus an overview of separate components. The importance of outcome measures and options for these will be covered briefly and outcome measure options will be presented. Lastly we will discuss what the future of these programmes might hold.

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Opioid-neurotensin hybrid peptides as novel potent drugs in acute pain treatment

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Opioids are the main endogenous system, which is significantly involved in the modulation of pain signaling pathways and its perception. That is why to this day opioids occupy a strong position in the treatment of various pain conditions. However - apart from the desired analgesia - their administration is associated with a wide variety of side effects, such as nausea, vomiting, and respiratory failure. Critics also point out a specific risk of the development of analgesic tolerance to and dependence on these drugs. One of the solutions to this problem is hybrid (chimera), in which part of the opioid is hybridized with different type of synergistically/adjuvantly acting compound, such as neurotensin (NT). This naturally existing peptide is characterized by the fact that its central application resulted in strong analgesic response independent of the activation of the opioid system. Hence, by a chemical bounding of opioid with neurotensin, the active analgesic compound is obtained which is characterized by its presumed safety profile. Here in novel hybrid compounds containing both opioid and neurotensin pharmacophores will be presented. High antinociceptive effects of investigated peptides were proven by comparing their potency with morphine injected at 150-time fold higher dose. These results give hope that more efficient opioid analgesics are accessible through the combination of the agonism at opioid and NT receptors.

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