

ABSTRACT

Drug Utilization Study of Analgesics in Low Back Pain Patients (Study at Neurology Dr. Soetomo Hospital Surabaya)

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Background: Low back pain (LBP) is a pain in the lower back area, between the corner of the bottom ribs and sacrum. Clinical practice guidelines typically categorize patients with LBP into 3 groups: LBP associated with a specific underlying disease (1–2% of cases); neuropathic LBP (about 5%), which is back pain associated with a neurological condition; and nonspecific LBP (more than 90%). Approximately 5% of the people with back pain disability account for 75% of the costs associated with low back pain.

Objectives: The aim of this study was to identify drug utilization of analgesics and drug related problems (DRPs) from the use of analgesics in LBP patients.

Methods: This study was using retrospective data with time limiting sampling method during 1st January until 30th March 2015.

Results: The sample which met the inclusion criteria were 161 patient. The results showed that patients was dominantly with LBP non spesific and cronic LBP. Analgesics used were paracetamol 13,2%; Na diclofenac 22,8%; ibuprofen 2,4%; mefenamic acid 0,2%; meloxicam 1,25%; codein 0,2%; tramadol 0,2%; esperison 2,4%; amitriptiline 31,2%; diazepam 24,3%; carbamazepine 0,5%; gabapentine 1%; dan pregabaline 0,2%. The actual DRPs in this study was nausea, vomiting (in 6 patients), and abdominal pain (in 1 patients). The interaction ocured were drug interaction between NSAIDs and hypertention drugs.

Conclusions: The use of analgesic in patient LBP is appropriate with guideline for management therapy of LBP from American Pain Society and PERDOSSI.

Keywords: Low Back Pain, Analgesics, Drug Utilization, Drug Related Problems.