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TREATMENT OF NEUROPATHIC PAIN IN CHILDREN
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Introduction. According to WHO recommendations (2012), the use of anticonvulsants, such as gabapentin, in relieving neuropathic pain in children with neurological disorders can often be effective, since treatment is directed to visceral hyperalgesia and central neuropathic pain.

GABAPENTIN (off label) is registered as an anticonvulsant for children aged three years, but it is encouraged to use it with neuropathic pain. The structure of gabapentin is similar to a neurotransmitter of GABA (gamma-aminobutyric acid). The binding site of gabapentin is an alpha2 delta subunit of potential dependent calcium channels.

Clinical Case. Girl J., 3 years 1 month, diagnosed with: Anoxic brain damage as a result of drowning in fresh water, vegetative condition, spastic tetraparesis, symptomatic epilepsy, hypothalamic syndrome, cognitive impairment.

The child is from 2-nd pregnancy, 2-nd delivery in 38 weeks. He grew and developed according to age.

From anamnesis of the disease: 10.08.2017 at 14 o'clock 30 minutes the girl was found under the water of an inflatable pool, where there was within 3 minutes, it was recorded lack of respiration and cyanosis of each cover. The first medical aid was provided by my father.

After restoration of independent breathing and cyanosis reduction, the parents took the child to the intensive care unit of the city children's hospital, where the treatment. Artificial ventilation of the lungs was not carried out. The level of consciousness is a sopor. Physical examination: contact is not available, the review responds to motor crying and an increase in muscle tone. Cognitive interest sharply
reduced, toy does not capture and holds in her hands. The evaluation on the FLACC scale gave 7 points (severe pain). Physical development is disharmonious, below average. Coarse spastic tetraparesis, multiple contractions of the joints of the upper and lower extremities. The girl does not change her position, the forced position on her back, on her side, her head thrown back. Tendon reflexes torpid. Pathological foot signs from the Babinsky. Tongue in the middle line, tense at the root, trism of chewing muscles. The hypokal reflex is lowered, is fed through a probe. In the somatic status without pathological changes. Physiological departures are normal.

An individual rehab program was assigned. The baby received gabapentin (neuralgin) in 7 days, an assessment of the pain score on the FLACC scale in the dynamics of pain reduction (5 points - moderate pain), tristimulation of chewing muscles and decreased spasticity of the muscles. In 11 days the FLACC scale investigation of girl was 3 point – mild pain.

Conclusions: There is a new approach to the treatment of neuropathic pain in children. The main task of managing childhood pain is its reduction, control and prevention, which varies depending on the type, source, severity and duration of pain.