

Chronic Pain, Affective Spectrum Disorders and Treatment with Antidepressants

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Affective spectrum disorders include mood and anxiety disorders, while term functional somatic syndrome describes disorders with chronic pain as dominant symptom, without pathognomonic tissue damage, such as fibromyalgia, irritable bowel syndrome, headache. Hypothesis of central neuropathic pain explains possibility of descending inhibitor mechanism of pain deficiency, including noradrenergic and serotonergic projections, or possibility that central suprasegmental sensitisation within the nociceptive pathway, triggered by emotional stressors can cause pain symptoms in both. Serotonergic and noradrenergic pathways and voltage sensitive channels are included in that mechanism. Modern psychopharmacology can improve treatment for both. Therapeutic action of SSRI's, SNRI's and alpha 2 delta ligands successfully can increase neurotransmission in malfunctioning CNS pathways and reduce symptoms.

Our clinical trial was conducted during 2013/2014. with 57 patients 32 female, 25 male, diagnosed as tension headache, without brain damage or disease, with depressive symptoms.

Aim of the trial was to explore usefulness of antidepressant treatment for one of the common functional somatic syndromes as headache. Diagnostic instruments used were HAM-D 17, CGI, personal diary with registered frequency of headache attacks were source documents also. Patient treated with fluoxetine 20 mg daily, during 6 months and instructed to use personal diaries too. Diagnostic instruments were used at baseline and after the treatment, when diaries reviewed also. Results showed that improvement in scores at HAM-D and CGI's scales was remarkable and frequency of headache attacks lowered. Conclusion was that antidepressants can be effective in a typical functional somatic syndrome and can improve therapeutic approaches for remarkable large group of patients.