

## SUMMARY

Pain was considered to be a sign of illness in the past; but nowadays especially chronic pain is considered as an illness itself.

Nowadays, the aims of Pain Centers and Pain Clinics are to reach more number of patients, to diagnose correctly and to apply correct medical treatments; and therefore to increase the life quality of individuals.

Algology Division of Hospital of Adnan Menderes University Medicine Faculty aims to follow throughly the improvements in the science of pain and implement these progresses in its own studies. In order to give better and regular service to its patients within Aydın and its suburbs, Algology Polyclinic of Adnan Menderes University Hospital was established in 2001. Algology Science Branch continues its studies since 20<sup>th</sup> January 2004. This branch is a sub-branch of Adnan Menderes University Medicine Faculty, Anesthesiology and Reanimation Branch.

All the patients who come to our clinic are kindly requested to fill in the “Pain Assessment Form” before diagnosis. Face to face interviews with the patients are done with extreme care in order to assess the clinical situation of them. Their demographic characteristics such as age, gender, occupation, marital status, education and economical status are written on the forms. In addition, their consumption characteristics of smoke and alcohol are also recorded.

For the detailed pain anamnesis, following factors are recorded in the pain assessment form: The location, quantity and starting time of pain, its duration, the symptoms associated with pain, any kind of prior medication that was taken for the treatment of pain.

Our study includes the diagnosis, treatment and long term results of 772 patients who applied to our algology clinic between 1<sup>st</sup> January 2006 and 31<sup>st</sup> December 2007. We found that those who were between ages 41 and 69 and those who are women suffered from pain more compared to others. We saw that the pain sufferers were mainly from the group of married, with primary education level housewives and retired females. The most frequent complaints were from low back pain, shoulder pain and headaches. VAS value was found to be 7.3. The patients classified their pains mostly as stingy ache or as trobbing. 73% of our patients had been suffering chronic pain of 3 months or more. The pain of patients was increasing with activities such as walking and standing. And this increasing pain was accompanied in many patients by weakness, muscle weakness, nausea and vomiting. 58% of patients were taking medical treatment previously. The most frequent three diagnosis were

low back pain, musculoskeletal pain and headache. The most frequent reason of low back pain was disc hernias whereas the most frequent headache was tension type headache. Among the most frequent source of cancer pains were lungs, prostates and rectum cancers. The most frequent treatments were medical treatments along with invasive interferences. Invasive interferences were mostly applied on low back pain patients, among them transforaminal steroid injection outnumbered others. Cancer patients were most frequently applied stationary epidural catheter. With the student t test we applied, we found that the first VAS value was significantly higher in female patients. We found that VAS values were significantly getting less after invasive interferences, which shows that the treatment had been successful. When we examined the risk factors of low back pain (which was the most common pain) we saw that the risk increased in those who are workers, who smoke and who has a low educational level as well as low economic conditions.

Key words: Adnan Menderes University; Pain,Chronic Pain; Prevalence; Polyclinic, Invasive Interference.