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Regional anesthesia and study of pain

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The Croatian Society of Regional Anaesthesia and analgesia is pleased to announce The 6th Croatian Congress of Regional Anaesthesia and analgesia with international participation in collaboration with the European Society of Regional Anaesthesia& Pain Therapy under auspices Croatian Academy Scientific and Arts in Zagreb, 12.–13. June 2015.

Tremendous changes have affected the practice of pain management and regional anesthesia, not just in relation to advances in pharmacologic and intervention aspects, but particularly in the manner by which these growing subspecialties are accepted in the delivery of health care. We have created this symposium to promote a better understanding of the pathophysiology of acute and chronic pain and to enhance the knowledge regarding various chronic neuropathic pain conditions as well as the novel state-of the-art interventional and non-interventional techniques in diagnosis and management of chronic pain, cancer pain and headache. We have assembled nationally and internationally renowned faculty to address current topics in acute, chronic, cancer pain management, and regional anesthesia.

Modern concept explicitly assumes that pain perception always has an underlying physical cause-injury, infection, or some disease process. Pain in the absence of such a cause is usually attributed to psychological illness or malingering. By recognizing the dominant role of the brain, which generates our subjective experiences and activates our defense systems, we are now able to appreciate the intimate relationship between pain and stress. These relationships among stress, gender, the immune system, and chronic pain syndromes reveal the need to study pain in a biological context far broader than a pain pathway.

The ultrasound and ultrasound guidance are the hottest fields in Regional Anaesthesia today. A lot of research still has to be done in order to prove that ultrasound really does improve our practice. Other hot topic is how Regional Anaesthesia can assist in improving the peri-operative outcome of patients. Not only the acute intra and immediately postoperation pain relief, but long term pain relief in addition to other parameters of outcome; inflammation, cancer recurrence, and speed of discharge from the hospital. Discusses how Regional Anaesthesia can be used as part of an integrated peri-operative approach to the patient. An additional topic is chronic pain management. This topic is an important aspect of Regional Anaesthesia and it is getting a lot of attention in Europe and the European commission as well.

We have a mission-all of us-to rectify the existing situation, for cancer pain as well as postsurgical pain, for pain in adults and in children, and for any kind of severe pain that can be helped by sensible administration of drugs and other pain therapies. In addition to educating one another in current pain research and therapy, as we do in journals and congresses, we must promote education on the management of pain for medical students and all health professionals. We must also teach patients to communicate better about their pain, and inform them that they have a right to freedom from pain, that each suffering human being deserves the best that the health professions have to offer.