THE USE OF PALMITOYLETHANOLAMIDE (PEA) IN FBSS FOR CHRONIC PAIN MANAGEMENT

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Background and Aims:

Aim: To assess the efficacy and safety of palmitoylethanolamide (PEA) in reducing pain severity in patients with pain associated to FBSS (Failed Back Surgery Syndrome).

FBSS

•generalized term used to describe condition of patients who have not had a successful result with back surgery or spine surgery and have experienced continued pain after surgery.

Palmitoylethanolamide (PEA)

- endogenous fatty acid amide.
- inhibits release of pro-inflammatory mediators from activated mast cells.
- reduces recruitment and activation of mast cells at site of nerve injury (events associated with anti-allodynic and anti-hyperalgesic effects in a model of neuropathic pain).

Palmitoylethanolamide

Methods:

- observational study.
- carried out according to standard accepted procedures in clinical practice.
- 60 eligible patients over 60 years old received PEA twice a day for 4 weeks. PEA was added to their conventional analgesic therapy (including anticonvulsants, antiepileptics and opioids).
- A paired-samples t-test was conducted to compare pain reports in patients before and after administration of PEA in FBSS for chronic pain management.
- NRS assesment was performed at baseline and at the end of PEA treatment.
- Safety was evaluated.

Results:

- Significant difference in pain scores before (M=9.1, SD=.89) and after (M=6.03, SD=1.02) PEA administration
- Mean difference of almost 3 points; with $t(59)=18.65$, $p < 0.0001$.
- PEA showed no adverse effects.

Conclusions:

In this study PEA was effective and safe in the management in chronic pain observed in FBSS.