

NEUROPATSKI BOL: PREPOZNATI, RAZUMETI I LEČITI

NEUROPATHIC PAIN: RECOGNIZING, UNDERSTANDING, AND TREATING

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SAŽETAK

Neuropatski bol predstavlja kompleksan klinički sindrom koji nastaje kao posljedica oštećenja ili bolesti somatosenzornog sistema, bilo na perifernom ili centralnom nivou. Karakteriše ga prisustvo bola bez spoljašnjeg nadražaja ili dugo nakon što je povreda prošla. Obično je hroničan, a pacijenti ga opisuju kao žarenje, peckanje, probadanje ili mravinjanje. Etiološki spektar neuropatskog bola je širok i obuhvata različite nozološke entitete: dijabetes melitus (dijabetička polineuropatija), postherpetičnu neuralgiju, centralne vaskularne lezije (moždani udar), traumatske povrede, multiplu sklerozu, tumore i jatrogene uzroke poput hirurških oštećenja nerava.

Cilj ovog rada je da se, na osnovu važećih kliničkih smernica, najnovijih naučnih saznanja i praktičnog kliničkog iskustva, sistematizuju aktuelni principi u dijagnostici i terapiji neuropatskog bola. Sprovedena je ciljana analiza savremene literature dostupne u bazama PubMed, Scopus i Cochrane Library, sa fokusom na savremene dijagnostičke i terapijske aspekte neuropatskog bola.

Lečenje neuropatskog bola zahteva individualizovan, multimodalan pristup, koji obuhvata farmakološke i nefarmakološke intervencije. U farmakoterapiji se preporučuju četiri glavne grupe lekova: triciklični antidepresivi (npr. amitriptilin), inhibitori ponovnog preuzimanja serotonina i noradrenalina (duloksetin), antiepileptici (gabapentin, pregabalin) i opiodi (kod rezistentnih oblika). Lokalne terapije (lidokain, kapsaicin) i invazivne metode (npr. neuromodulacija) u određenim kliničkim kontekstima.

Uprkos napretku u razumevanju mehanizama nastanka neuropatskog bola, terapijski odgovori su često suboptimalni. Stoga je ključno insistirati na personalizovanom pristupu, koji integriše preciznu dijagnostiku i racionalnu farmakoterapiju. Pravovremeno prepoznavanje i pravilno razumevanje patofiziologije ovog bola predstavljaju osnovu uspešne terapije i očuvanja kvaliteta života pacijenata.

Ključne reči: neuropatski bol, dijagnoza, terapija, multimodalan pristup.

ABSTRACT

Neuropathic pain is a complex clinical syndrome resulting from damage to or disease of the somatosensory system, either at the peripheral or central level. It is characterized by the presence of pain without an external stimulus or long after the initial injury has healed. Typically chronic in nature, patients often describe it as burning, tingling, stabbing, or prickling sensations. The etiological spectrum is broad and includes various nosological entities such as diabetes mellitus (diabetic polyneuropathy), postherpetic neuralgia, central vascular lesions (e.g., stroke), traumatic injuries, multiple sclerosis, tumors, and iatrogenic causes such as surgical nerve damage.

The aim of this paper is to systematize current principles in the diagnosis and management of neuropathic pain, based on up-to-date clinical guidelines, the latest scientific evidence, and practical clinical experience. A targeted literature review was conducted using relevant publications from PubMed, Scopus, and the Cochrane Library, with a focus on contemporary diagnostic and therapeutic approaches, neurobiological mechanisms, and validated treatment strategies.

The management of neuropathic pain requires an individualized, multimodal approach, incorporating both pharmacological and non-pharmacological interventions. Pharmacotherapy typically involves four main classes of medications: tricyclic antidepressants (e.g., amitriptyline), serotonin-norepinephrine reuptake inhibitors (e.g., duloxetine), antiepileptic drugs (e.g., gabapentin, pregabalin), and opioids (reserved for treatment-resistant cases). Topical therapies (e.g., lidocaine, capsaicin) and invasive procedures (e.g., neuromodulation) may be appropriate in certain clinical contexts.

Despite advances in understanding the underlying mechanisms of neuropathic pain, treatment responses are often suboptimal. Therefore, a personalized approach that integrates accurate diagnosis with rational pharmacotherapy is essential. Timely recognition and a clear understanding of the pathophysiology of neuropathic pain form the foundation for effective treatment and improved quality of life for patients.

Keywords: neuropathic pain, diagnosis, therapy, multimodal approach