



17. THE USE OF NOOTROPICS IN THE TREATMENT OF PERIPHERAL NEUROLOGICAL PATHOLOGIES

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Introduction. Peripheral neurological pathologies, about 10% out of all nosological entities, refer to a group of disorders that affect the peripheral nervous system and are associated with various symptoms such as muscle weakness, numbness and pain

Aim of study. Researching the nootropics used in the treatment of peripheral neurological pathologies and the most efficient drug association that will have the best outcome.

Methods and materials. A retrospective study was conducted on a sample of 35 hospitalized patients with various peripheral neuropathies at the CMH “Arhangel Mihail”. Demographic variables, as well as administered medications, were recorded.

Results. It was established that out of the 35 randomly analyzed cases, 19 belonged to females (54,2%) and 16(45,8%) to males, with ages ranging from 45-81 years, mean age $67,34 \pm 1,7$. The selected peripheral neurological pathologies from the records were distributed as follows: 27 - lumbosacral radiculopathy, 3 neuropathic pain syndrome on the right, 2 spondylosis with persistent bilateral lumboischialgia, 2 unspecified polyneuropathy with lower flaccid paraparesis, 1 facial neuropathy with paralysis of facial muscles on the right. The administered treatment was complex, but only nootropic drugs were selected. All the patients (100%) were administered solution of 20% piracetam - 5 ml, 0.5% vinpocetine - 2 ml, 25 mg cinnarizine, 2% pentoxifylline - 5 ml, once a day, used simultaneously as follows: cinnarizine + vinpocetine + piracetam (16 cases), pentoxifylline + piracetam + cinnarizine (13 cases), piracetam + vinpocetine (6 cases). The patients showed improvement upon discharge. It was recommended to continue the nootropic treatment for at least 1 month to achieve the desired pharmacological effect.

Conclusion. Recent studies selected from the scientific literature argue the use of nootropics through various mechanisms. Firstly, the development of the analgesic effect of piracetam in peripheral neuropathic pain is emphasized. Moreover, current research is investigating the anti-inflammatory effects of pentoxifylline. Acting as a phosphodiesterase inhibitor, pentoxifylline inhibits the secretion of TNF-alpha, significantly reducing pain in patients with lumbosacral radiculopathy. The anti-inflammatory effect of pentoxifylline in facial neuropathy has only been demonstrated when administered in combination with steroids and low molecular weight dextran. Similarly, vinpocetine is noted for inducing an anti-inflammatory effect. The results obtained so far are encouraging and support the use of nootropics in peripheral neurological pathologies.