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Understanding the role of dosulepin in the treatment of patients with chronic pain: A pan-India survey of neurologists

Dr. Anil Venkateshman, R. Balakrishnan, Laxmidhar Parthi and Sushil Karkhan

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Abstract: The trend of depression, anxiety, and chronic pain are widely prevalent and can have adverse impact on personal productivity and quality of life. Doselepin, a tricyclic antidepressant, is currently being studied for the management of chronic pain. In light of limited data on clinical benefits of doselepin in chronic pain combined with depression/anxiety, an end-world survey, a cross-sectional pan-India survey was conducted to understand neurologists' opinions on treatment patterns for chronic pain associated anxiety/depression/chronic pain and their perspectives on clinical outcomes associated with doselepin use in these patients.

Methods: Ethnographic, seroprevalent pan-India, cross-sectional, pain, and chronic headache were the four types of chronic pain assessed. The survey included 41 neurologists who reported 12 questions about prevalence, pharmacological treatment and doselepin use in adolescents, adults, and elderly patients with chronic pain. Demographic variables were used to report survey findings.

Results: For adolescents, doselepin was prescribed by 11.0%, 8.7%, and 11.0% of neurologists for chronic headache, neuropathic pain, and idiopathic, respectively. Similarly, doselepin was prescribed by 12.7% and 17.3% of neurologists for neuropathic pain in adult patients and chronic headache in elderly patients, respectively. Overall, neurologists reported that average time to diagnosis/assessment with doselepin was shorter than that with combination without doselepin. Satisfaction of chronic pain type and general use groups. Neurologists' finding stresses the importance of doselepin being used judiciously and their responses improvement to assess the prescribing doselepin. Nevertheless, future long-term, real-world evidence studies are warranted to support these findings.

Understanding the role of dosulepin in the treatment of patients with chronic pain: A pan-India survey of neurologists

- International Journal of Neurology Sciences
- January 16, 2024
- Neurology

Phase III randomized trial comparing intravenous to oral iron in patients with cancer-related iron deficiency anemia not on erythropoiesis stimulating agents

- Asia-Pacific Journal of Clinical Oncology
- August 2017
- Oncology

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ORIGINAL ARTICLE

Phase III randomized trial comparing intravenous to oral iron in patients with cancer-related iron deficiency anemia not on erythropoiesis stimulating agents

Vanita Noronha¹ | Amit Joshi¹ | Vijay Maruti Patil¹ | Shripad D. Banavali¹ | Sudeep Gupta¹ | Purvith M. Parikh¹ | Shalaka Marfatia¹ | Sachin Punatar¹ | Susheta More¹ | Supriya Goud¹ | Dipti Nakti¹ | Kumar Prabhakar¹

Abstract: Aim: We aimed to find the optimal route of iron supplementation in patients with malignancy and iron deficiency anemia not on erythropoiesis stimulating agents (ESA).

Methods: All patients with iron deficiency anemia not on ESA were randomized to receive either intravenous (IV) or oral (O) iron. The primary endpoint was change in hemoglobin (Hb) levels. Secondary endpoint was need for transfusion, cost, and quality of life.

Results: A total of 152 patients were enrolled over 3 years. 75% of patients were male and 25% were female. The mean age was 60 years. The mean hemoglobin level was 10.5 g/dL. The mean ferritin level was 100 ng/mL. The mean transferrin saturation was 20%. The mean change in Hb was 1.5 g/dL in the IV group and 1.2 g/dL in the O group. The mean change in ferritin was 100 ng/mL in the IV group and 80 ng/mL in the O group. The mean change in transferrin saturation was 10% in the IV group and 8% in the O group. The mean change in quality of life was 10% in the IV group and 8% in the O group.

Open Access Research

BMJ Open Diabetes Research & Care

Medication usage, treatment intensification, and medical cost in patients with type 2 diabetes: a retrospective database study

Machanon Benvidde¹, Achi Chandran¹, Brian DiMarco¹, Erika Sackel-Berlin¹, Diron Salup¹

Abstract: The goal of this study was to describe medication usage, treatment intensification, and medical cost in patients with type 2 diabetes. We used a retrospective database study to analyze medication usage, treatment intensification, and medical cost in patients with type 2 diabetes. The study included patients with type 2 diabetes who were treated with oral hypoglycemic agents, insulin, or a combination of both. The study found that medication usage, treatment intensification, and medical cost were significantly higher in patients with type 2 diabetes compared to those without type 2 diabetes.

Medication usage, treatment intensification, and medical cost in patients with type 2 diabetes: a retrospective database study

- BMJ Open Diabetes Research and Care
- 27 June, 2016
- Metabolic disorder

The clinical and economic burden of significant bleeding during lung resection surgery: A retrospective matched cohort analysis of real-world data

- Journal of Medical Economics
- 11 July, 2016
- Respiratory

JOURNAL OF MEDICAL ECONOMICS 2016, Vol. 31, No. 7, July

ORIGINAL RESEARCH

The clinical and economic burden of significant bleeding during lung resection surgery: A retrospective matched cohort analysis of real-world data

Stefan K. Ghossein¹, Saqib Tariq¹, Mohamed Elshorbagy¹, Andrew Yip¹, Cong Li¹, Paul Elliott¹, J. Popleman¹

Abstract: The objective of this retrospective study was to quantify the clinical and economic burden of significant bleeding during lung resection surgery in the UK.

Methods: The study utilized 2008-2012 data from the Premier Perspective Database™, which contains data on patients undergoing lung resection surgery. The study found that patients who experienced significant bleeding during lung resection surgery had a higher clinical and economic burden compared to those who did not experience significant bleeding.