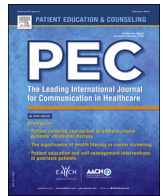




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Short communication

Patient led goal setting in chronic low back pain—What goals are important to the patient and are they aligned to what we measure?

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ABSTRACT

Objective: To determine the extent of alignment between clinical outcome measures and patient-derived goals for the management of chronic low back pain (cLBP).

Methods: A customised, patient-led goal setting intervention was implemented facilitated by a physiotherapist, in which participants identified problem areas and developed strategies to address them. Patient goals were compared to the most commonly used outcome measures in cLBP as well as research outcomes recommended by the IMMPACT consortium.

Results: From 20 participants, a total of 27 unique goals were identified, the most common goal related to physical activity (49%). Comparison of participant goals to the most common measures used by physiotherapists found none of the goals could be aligned. Comparison of goals and domains with IMPACCT outcome domains found 76% of the goals were aligned with physical functioning and 16% with emotional functioning.

Conclusion: This study has identified goals important to patients in cLBP, these were varied, and most did not correspond with current clinical measures.

Practice implications: Clinical outcome measures may not be providing accurate information about the success of treatments that are meaningful to the patient. Clinicians should consider a collaborative approach with cLBP patients to determine treatment interventions that are driven by patient preference.

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1. Introduction

The use of standardised outcome measures in the management of chronic low back pain (cLBP) is recognised worldwide. They are used to guide the health care professional (HCP) in their clinical reasoning as well as benchmarking treatment goals and success. Outcome measures are based on quantitative parameters creating the benefit of determining specific treatment goals, and hence they are ideal for assessing outcomes [1]. Several investigations into the use of outcome measures by physiotherapists have found that measures usually focus on impairments of pain, range of motion (ROM) (e.g. bending forward) and strength [2,3].

In 2005, The Initiative on Methods, Measurement, and Pain Assessment in Clinical Trials (IMMPACT) consortium recommended

that six core outcome domains should be considered when designing chronic pain clinical trials, see Table 1 [4]. The most commonly used measures in cLBP research assess disability, pain, psychosocial function and quality of life [5].

This study aims to explore and identify those goals that are important to cLBP patients and to investigate the extent of their alignment with outcome measures used in both clinical and research settings.

2. Methods

2.1. Study design

A single arm pre-post intervention longitudinal cohort study was conducted. The study involved a customised, patient-led goal setting intervention facilitated by a physiotherapist, in which participants identified personally relevant problem areas and were coached to develop strategies to address them. Problem areas,

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Table 1
IMMPACT core outcome domain.

1. Pain
2. Physical functioning
3. Emotional functioning
4. Participant ratings of improvement and satisfaction with treatment
5. Symptoms and adverse events
6. Participant disposition

goals and strategies were recorded and analysed to determine the types and prevalence of goals identified by the participant. Participant goals set in the study were compared to the most commonly used outcome measures and IMMPACT outcome domains.

2.2. Participants

2.2.1. Inclusion criteria

Aged 18–65, history of non-specific low back pain with a minimum duration of 3 months, reporting pain greater than 4 on 10 cm Visual Analogue Scale, and scoring greater than 20 on the Quebec Back Pain Disability scale.

2.2.2. Exclusion criteria

Inability to comprehend written English, or reporting red flag signs or symptoms or recent lumbar spine surgery. Ethics approval was provided by University of Sydney Human Research Ethics Committee (12-2009/12340) and St Vincent's Hospital Human Research and Ethics Committee Ref: (12/157).

2.3. Participant recruitment

Advertisements were placed in a university staff and student news bulletins, and in a major hospital physiotherapy outpatients department.

2.4. Therapist training

A training session for the therapist was conducted by one of the authors (L. Smith) in the concepts, theory and process of patient centred goal setting prior to the intervention commencing.

2.5. Intervention design

The intervention procedure comprised five fortnightly sessions with a single therapist at either the university campus or hospital outpatient department, followed by two monthly follow up sessions (Table 2).

Table 2 Intervention design—components of the intervention for each session. At the initial session the participant was given a “Participant Workbook” containing background information on the chronic pain model, tips for self-management of cLBP, information on setting goals and guidelines following the SMART model [6].

A section for the participant to fill in their goals, progress towards achieving their goals, issues or barriers towards achieving their goals and strategies to implement between sessions was included. This was filled out by the participant at each session. Participants were asked to carry out the strategies independently between sessions. They were not asked to cease any current treatments or care for their cLBP.

2.6. Outcome measures

2.6.1. Goal domains

The type of goals the participants set were thematically coded and categorised by two investigators.

Table 2
Intervention design—components of the intervention for each session.

Intervention
Session 1
Patient orientation
Consent
SMART approach explained
Goals and strategies determined
Homework task: Youtube video, read chronic pain section from participant handbook
Session 2
Chronic pain model discussed
Review of goals, progress towards and barriers to achieving goals
Strategies determined
Sessions 3 and 4
Review of goals, progress towards and barriers to achieving goals
Strategies determined
Session 5 (completion of intervention)
Review of goals, progress towards and barriers to achieving goals
Strategies determined
Monthly follow up (3 months)
Review of goals, progress towards and barriers to achieving goals
Monthly follow up (4 months)
Review of goals, progress towards and barriers to achieving goals

2.6.2. Goal attainment

Goal attainment was measured using a three-category goal attainment scale (achieved/working towards/not achieved).

2.6.3. Current outcome measures in cLBP

To determine the most commonly used outcome measures in the clinical setting a literature review was undertaken by the investigator and findings discussed amongst the research team. Medline and CINAHL databases were searched for articles on physiotherapy use of outcome measures in cLBP. The most commonly used clinical outcome measures by physiotherapists were pain, range of motion and strength. The IMMPACT core domains were taken as measures recommended for clinical trials in cLBP. The extent of alignment between the patient goals and outcome measures was evaluated by percentage agreement.

3. Results

3.1. Participants

Twenty participants completed the intervention, 18 recruited from the university advertisement and 2 from a physiotherapy outpatient department (Fig. 1).

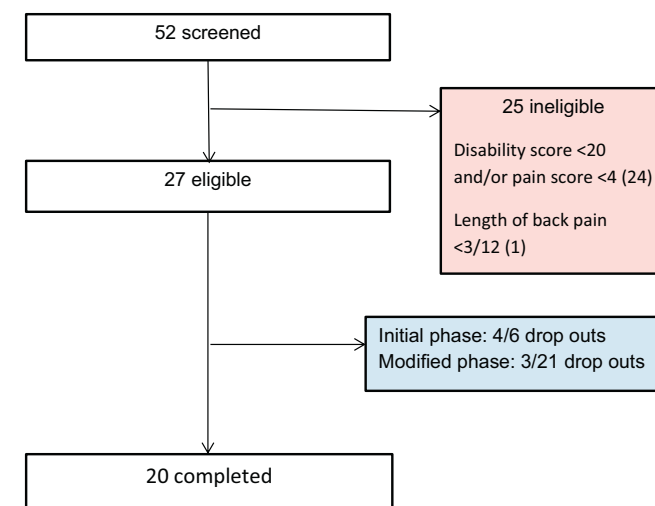


Fig. 1. Flow chart of participant recruitment process.

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