

Self-management interventions for individuals with persistent pain – Enablers and barriers

*A systematic review and meta-synthesis of
qualitative studies*

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Background

- Persistent pain is the leading cause of disability worldwide (Breivik, 2006; Blyth, 2001)
- Evidence for self-management interventions (e.g. cognitive behavioural therapy) is promising (Nicholas, 2015)
 - Improve self-efficacy
 - Enable adaptive behavioural change

What we don't know?

- Evidence for multidisciplinary, self-management interventions is predominantly quantitative (Du, 2011; Newman, 2004; Barlow, 2002; Nicholas, 2015)
- Given the bio-psycho-social impact of persistent pain, understanding patient perspectives is crucial (Dwarswaard, 2015)

Aim of the review

To synthesise the patients' perspectives on the enablers and barriers of incorporating self-management strategies in daily life after completing a self-management intervention.

Methods

Inclusion criteria

Participants

Adults (16 years and above) with persistent pain

Interventions

At least four of the following core skills:

(a) Self-efficacy building

(b) Self-monitoring of symptoms

(c) Goal-setting and action planning

(d) Shared decision-making

(e) Problem-solving

(f) Self-tailoring

(g) Partnership between the views of patients and health professionals

(h) Proactive follow up

No restriction on setting, provider, format and duration

Study design

Qualitative and mixed method studies

Results

- 33 papers were included for final synthesis
- 512 participants were interviewed
- Persistent pain conditions included:
 - *Persistent primary pain, musculoskeletal pain, orofacial pain, provoked vestibulodynia, migraine*
- Self-management programmes
 - *Education, pacing, relaxation, cognitive behavioural strategies, music, technology*
- Predominantly from high-income countries (UK, Europe, USA, Canada, Australia)

Enablers to self-management

Self-discovery

The ability to distinguish self (i.e. body, thoughts and feelings) from pain



Acceptance/being with similar others



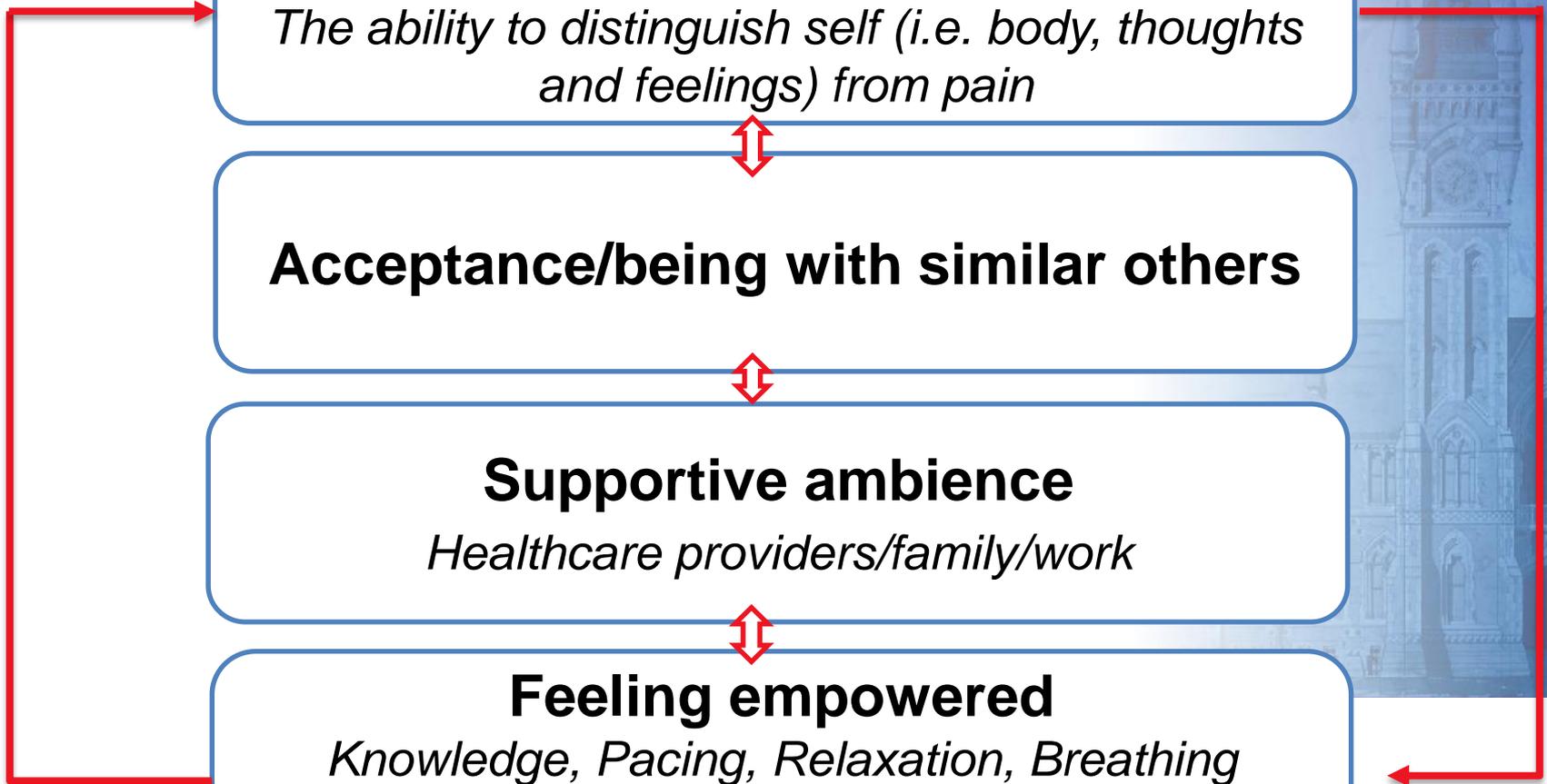
Supportive ambience

Healthcare providers/family/work



Feeling empowered

Knowledge, Pacing, Relaxation, Breathing awareness, Cognitive techniques, Exercise, Technology, Music



Barriers to self-management

Sustained motivation

Overwhelming effort required to manage pain



Acceptance is hard



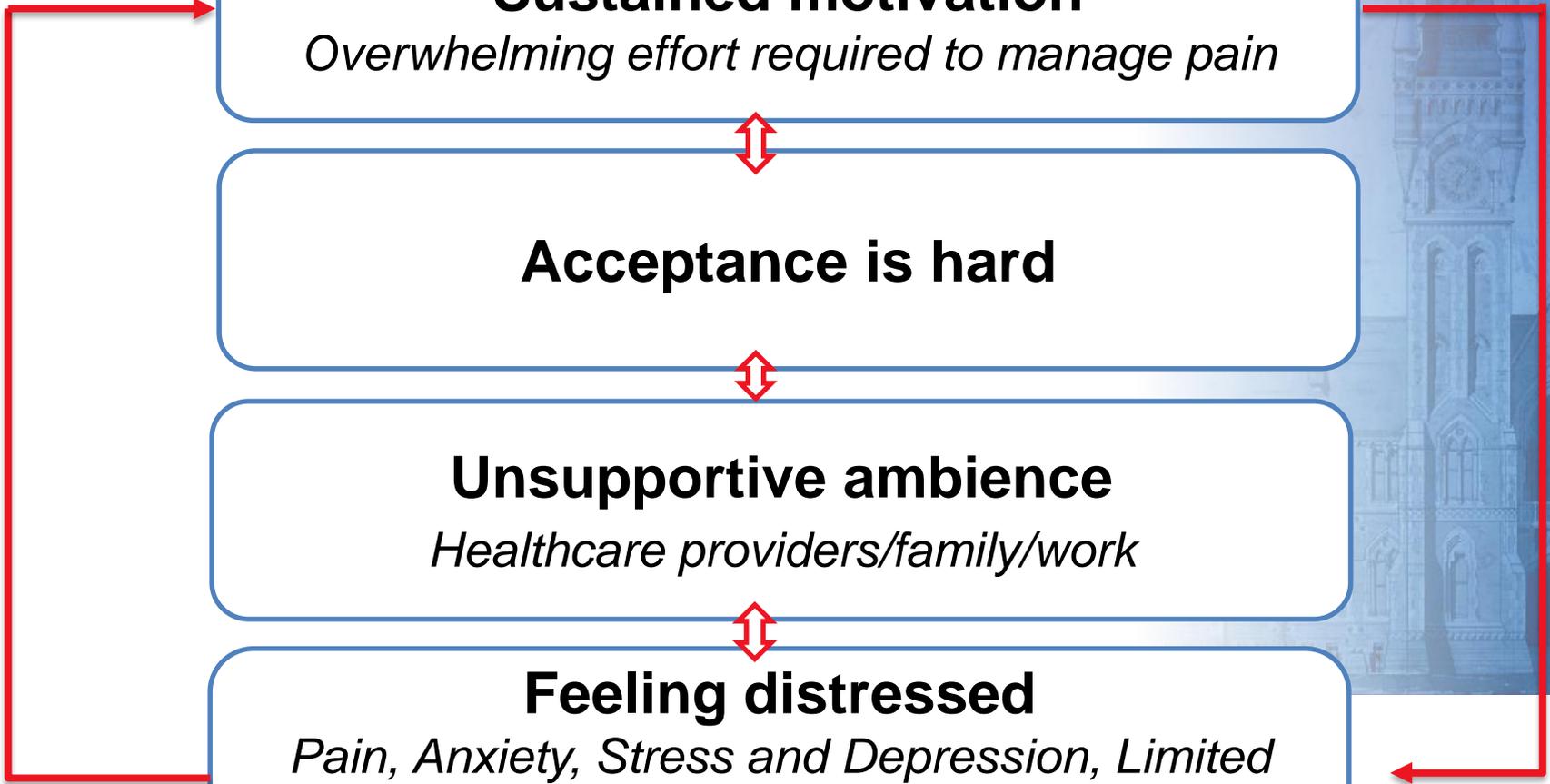
Unsupportive ambience

Healthcare providers/family/work



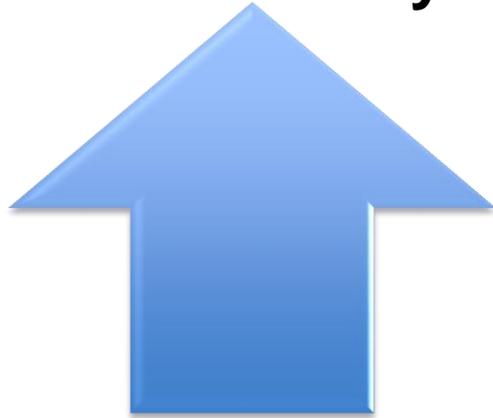
Feeling distressed

Pain, Anxiety, Stress and Depression, Limited problem solving ability, Mind and body dissonance



Self-management as a continuum

Greater ability



Self-discovery

Acceptance

Supportive ambience

Feeling empowered

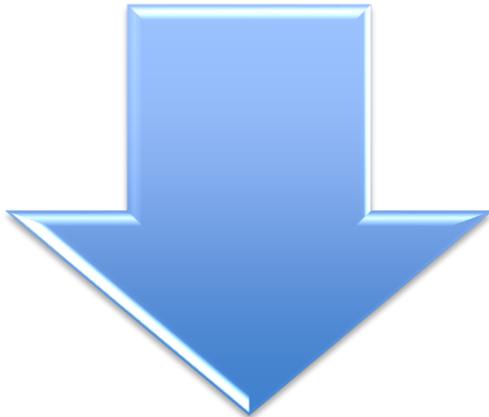
Sustained motivation

Acceptance is hard

Unsupportive ambience

Feeling distressed

Limited ability



Implications for practice and research

- **Self-discovery** - is a crucial cognitive process to enable acceptance, foster self-efficacy and influence behaviour change.
- **Intermittent support** (e.g. peer support groups, booster sessions) is required.
- **Person centred care** by means of shared decision-making and guided problem solving is important.

**THANK YOU FOR
LISTENING**



ANY QUESTIONS?

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