



Service Priorities and Programmes
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KEC Multidisciplinary pain management program (STEPS program) reduce chronic pain patients medial utilization and improve physical and psychological outcome

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Introduction

Pain management programmes are shown to be effective to improve physical and psychological status of chronic pain patients internationally. STEPS programme was established to help local chronic pain patients.

Objectives

Targets: Chronic pain patient with severe pain, significant physical disability or significant psychological comorbidities

1. Discharge them to community without further medical utilization or discharge from pain clinic without any further pain clinic appointment
2. Take off all analgesics
3. Improve functional capacity
4. Reduce pain related psychological comorbidities
5. Improve sleep efficiency

Methodology

Multidisciplinary pain management programme (STEPS) was founded in June.2015 including Pain specialist physician, clinical psychologists, pain nurses, physiotherapists and occupational therapists. The clinical pathway and programme manual were written up.

Severe disability is defined by one of the following

Disability:

Pain intensity: >8 on BPI intensity

Depression: >20 on depression scale of DASS

Pain self-efficacy: <20 on PSEQ (pain self efficacy scale)

Catastrophising: >30 on PCS (Pain catastrophising scale)
Severe functional impairment: sleep disorder secondary to pain or related mental illnesses, significant social and occupational functional impairment
After multidisciplinary structured assessment, all patients will undergo combined physical and psychological pain management program throughout 5-6 weeks conducted by Pain specialist, Clinical Psychologist, Pain nurses, physiotherapist and occupational therapist.

Result

4 out of 11 patients could be discharged to community without any medical utilization. All other patients could be discharged from pain clinic.

10/11 patients took no analgesics after the program.

In 2nd class of 6 participants, the walking, sitting and standing tolerance was increased by 110% (10-200%), 127% (61-200%) and 110 (10-200%) respectively after the program. The PCS score was reduced by mean of 13.5 and PSEQ was increased by mean of 17.2. On psychological aspect, the depression, anxiety, stress and total score of DASS were reduced by 13.6 ($p<0.05$), 11 ($p<0.05$), 13 ($p<0.05$) and 38 ($p<0.05$).

Conclusion

STEPS combined physical and psychological pain program is capable to discharge patient to community