STEPS Combined Physical and Psychological Pain Program Helps Patients with Severe Pain, Physical Disability and Psychological Comorbidities to be Discharged to Community or from Pain Clinic with Cessation of Analgesics and Significant Improvement of Function

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Introduction
Chronic pain complicated with severe disability and psychological comorbidities incur substantial burden on the medical system and community. Intensive multidisciplinary pain management program is an cost-effective intervention for this group of 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
Methodology
Exclusion Criteria
Languages:
1. Illiteracy
2. Unable to understand and speak Cantonese
Medical:
3. Whose pain is under investigation of its origin (esp the red flags)
4. Planned for pain intervention and surgery
Psychological:
5. Presence of severe mood disorders that affect cognitive functioning required for attending the course e.g. Moderate to severe depression
6. Presence of active features of mental diseases including schizophrenia
7. Presence of indicative suggestion of physical and verbal violence or suicidal risk
8. Not Motivated
9. Who have primary focus of complete pain relief
Physical:
10. Non ambulatory (at least can walk with stick or unaided)
Inclusion Criteria
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)
After multidisciplinary structured assessment, all patients will undergo 100 hours combined physical and psychological pain management program (14 days) throughout 5-6 weeks conducted by Pain specialist, Clinical Psychologist, Pain nurses, physiotherapist and occupational therapist.
2 classes were conducted in year 2016.

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).