

Single Session Group Intervention for Pain Management in Chronic Pain Patients

Moore Ted*

Department of Pain, Behavioral Medicine Institute, Weisgarber, USA

Accepted on 29th November, 2021

Description

Behavioral and psychological interventions are unit key elements of treating chronic pain. However, there are unit logistic barriers to providing such treatments, together with a scarcity of psychological employees to supply such interventions and restricted ability of patients with chronic pain to attend multiple sessions. As different areas of psychological state have shown promise in providing single session interventions for numerous conditions, this pilot study hypothesized that one cluster session for chronic pain patients may be useful in decreasing patient pain catastrophizing. The 5 content areas addressed within the cluster were termed understanding, accepting, calming, balancing, and coping. Chronic pain may be a bio-psychosocial condition during which psychological factors play a vital role. Associate in nursing analysis of the literature on low back pain finds that many activity therapies (operant, respondent, and cognitive) are unit effective in reducing the incapacity of low back pain. Psychological feature activity treatment has been shown to be effective in treating jaw pain [1,2].

Statistical Analysis

Multi-Disciplinary Pain Treatment (MDPT) has been shown to be extremely effective within the treatment of chronic pain conditions. This study presents the results of providing some key aspects of the MDPT model to chronic pain patients during a single session model. If prospering, this is able to supply a cheap manner during which additional aid practitioners could supply a crucial service that decreases patient catastrophizing and should improve outcomes in chronic pain treatment. once a review of many books on dealing with chronic pain and supported the authors' clinical expertise, the authors created a theoretical model that posits 5 key skills that pain patients ought to have if they're too with success manage their pain. These skills, named for simple patient reference, are unit understanding, accepting, calming, balancing, and coping. Additionally to being documented by clinicians within the books concerning chronic pain, every of those skills have empirical support for its inclusion during a cluster of patients with chronic pain (understanding and education. In sum, the present pilot study was designed to explore the helpfulness of one cluster session for patients with a spread of chronic pain disorders. the one session cluster, one hundred twenty min long, addressed the 5 skills areas thought to be necessary in managing chronic pain: understanding, accepting, calming, balancing, and coping. The hypothesis tested was that one session cluster would be an efficient intervention to decrease patient catastrophizing, a primary treated of patient outcomes in pain treatment. The common cluster size was 3 to four

patients. The session started with a short summary of the explanation for the category followed by personal introductions. This allowed patients time to concisely share their stories with one another, another necessary facet of getting a pain cluster [3].

Intervention for Pain Management in Chronic Pain

The authors then spent roughly twenty min on every of the 5 ability areas mentioned previously: understanding, accepting, calming, balancing, and coping. There was a stress on sensible ability coaching and experiential learning. Transient exercises were conducted on diaphragmatic respiratory and distraction as a pain cope tool. Material was bestowed during an informative manner; however care was taken to speak at Associate in nursing applicable level to make sure info was with success relayed. Once a pre-intervention assessment, the session was conducted while not a possibility (patients were allowed to square, move, and stretch PRN throughout group) [4,5]. At the tip of the session, the patients crammed out 2 Likert scale rating things concerning the category, the PCS, and that they got an opportunity to supply general written feedback concerning the category. some three months once session completion patients got at their often regular medical appointment, a listing victimization an equivalent things as within the post-session analysis, including the PCS.

References

1. Severeijns R, Vlaeyen JWS, van den Hout MA, et al. Pain catastrophizing predicts pain intensity, disability and psychological distress independent of the level of physical impairment. *Clin J Pain* 2001; 17: 165-72.
2. Smeets RJEM, Vlaeyen JWS, Kester ADM, et al. Reduction of pain catastrophizing mediates the outcome of both physical and cognitive-behavioral treatment in chronic low back pain. *J Pain* 2006; 7: 261-71.
3. Sullivan MJL, Bishop S, Pivik J, et al. The pain catastrophizing scale: development and validation. *Psychol Assess* 1995; 7: 524-32.
4. Sauer SE, Burris JL, Carlson CR, et al. New directions in the management of chronic pain: self-regulation theory as a model for integrative clinical psychology practice. *Clin Psychol Revb* 2010; 30: 805-14.
5. Rockwell WK, Pinkerton RS. Single session psychotherapy. *Am J Psychother* 1982; 36: 32-40.

*Correspondence to:

Moore Ted

Department of Pain
Behavioral Medicine Institute

Weisgarber, USA
E-mail: Ted@rediffmail.com