





# The End of Rehabilitation

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#### Objectives

- 1. Define recovery from MSK trauma from a future-oriented perspective
- 2. Describe new ways of measuring the process and state of recovery

#### Disclosures

- I am owner-operator of David Walton Rehabilitation Education, Consulting and Research.
- I am lead developer of the tools described herein, but both are freely available and I make no profit off of their use.

### The end of physiotherapy

#### **Ioannis Poulis**

Australian Journal of Physiotherapy 2007 Vol. 53

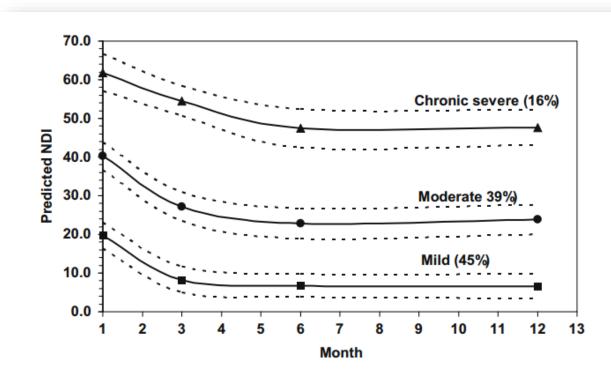
It is well understood but seldom remarked that physiotherapy intervention has no obvious or well-defined end point. There is a real sense in which there cannot be too much therapy since all, or almost all, people benefit both from exercise and from instruction in how to exercise safely given individual variables such as physical condition or age. In this sense, the relationship with the patient is 'open ended'.

### What is Recovery – Empirical Information

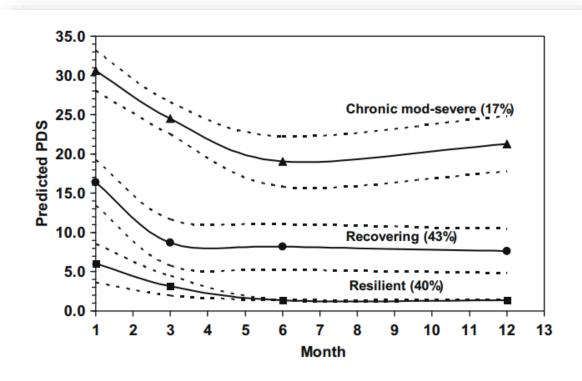
- Most commonly identified through (Walton 2009)
  - Pain Intensity
  - Standardized neck-related disability scale
  - Work status
  - Claims status
  - Psychiatric morbidity
- People usually follow 1 of 3 trajectories over 6-12 months:
  - 1. Rapid, complete recovery (~30-50%)
  - 2. Slow, incomplete recovery (~30-40%)
  - 3. No recovery, significant disability (~10-25%)

#### Compensation claim lodgement and health outcome developmental trajectories following whiplash injury: A prospective study

Michele Sterling a,\*, Joan Hendrikz b, Justin Kenardy b



**Fig. 1.** Predicted NDI trajectories with 95% confidence limits and predicted probability of membership (%). Suggested cut-offs for the NDI are 0-8% (no pain and disability); 10-28% (mild pain and disability), 30-48% (moderate pain and disability), 50-68% (severe pain and disability) and >70% (complete disability) [13].



**Fig. 2.** Predicted PDS trajectories with 95% confidence limits and predicted probability of membership (%). Suggested cut-offs for the PDS total symptom severity score are 0 no rating, 1–10 mild, 11–20 moderate, 21–35 moderate to severe and  $\geqslant$ 36 severe [15].

### What is Recovery – Pragmatic Considerations

- First must consider
  - What is health?
  - What is disease?
  - What drives healthcare consumption?
  - From who's perspective?



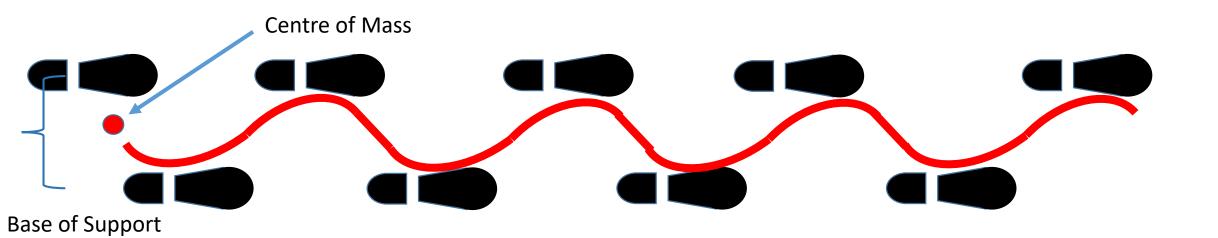
### The concept of Recovery

• Traditional

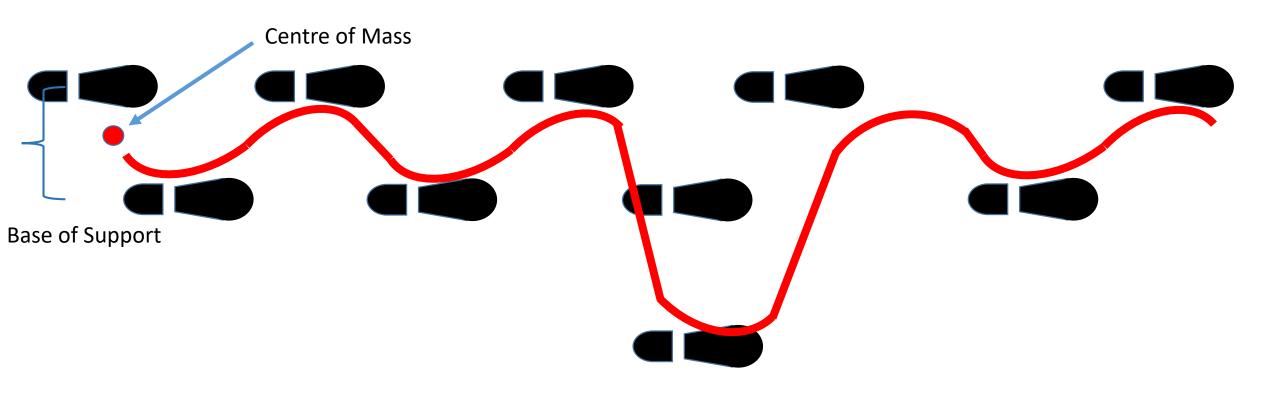




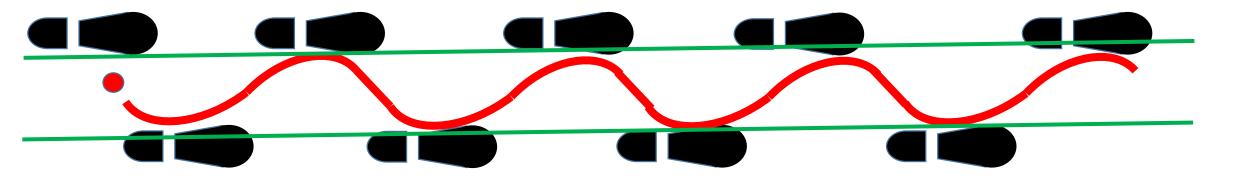
## Recovery (from a biomechanical perspective)



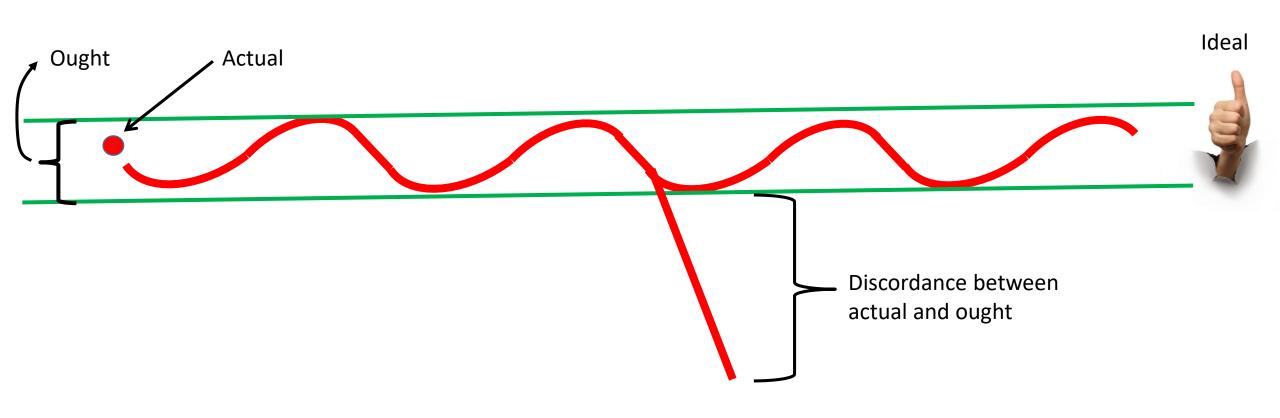
### Stumble



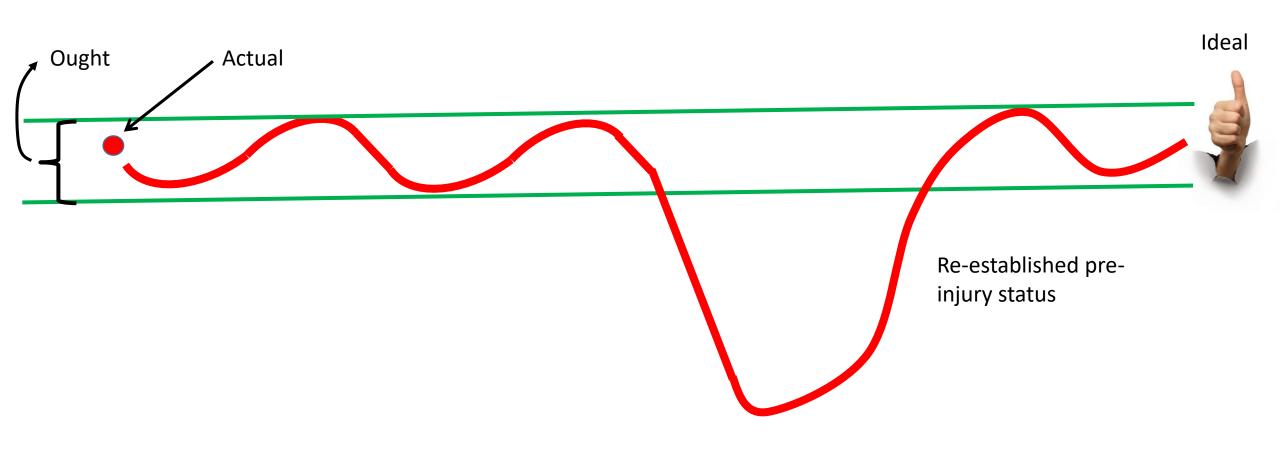
## Recovery (carrying on)



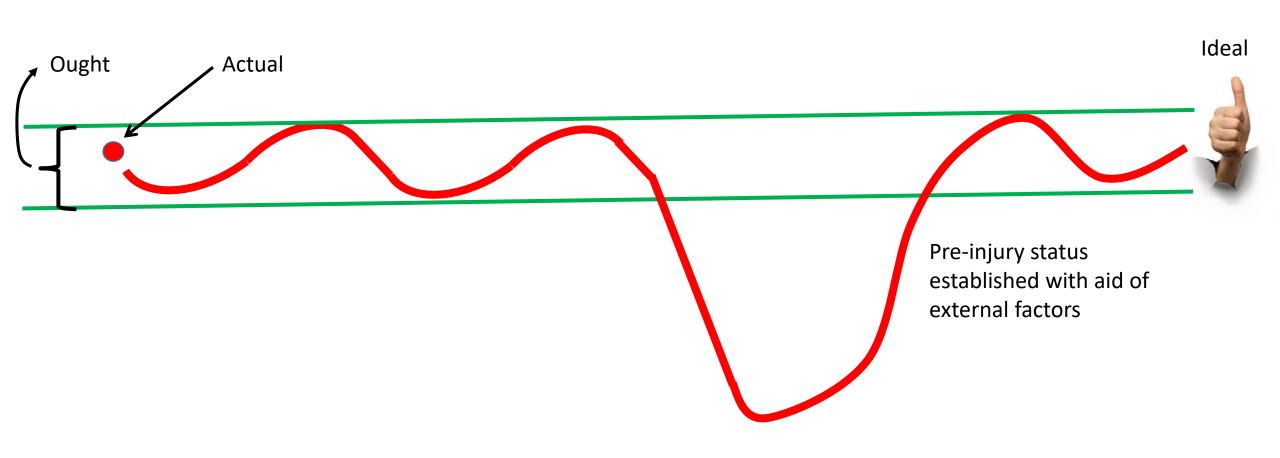
### Recovery revisited



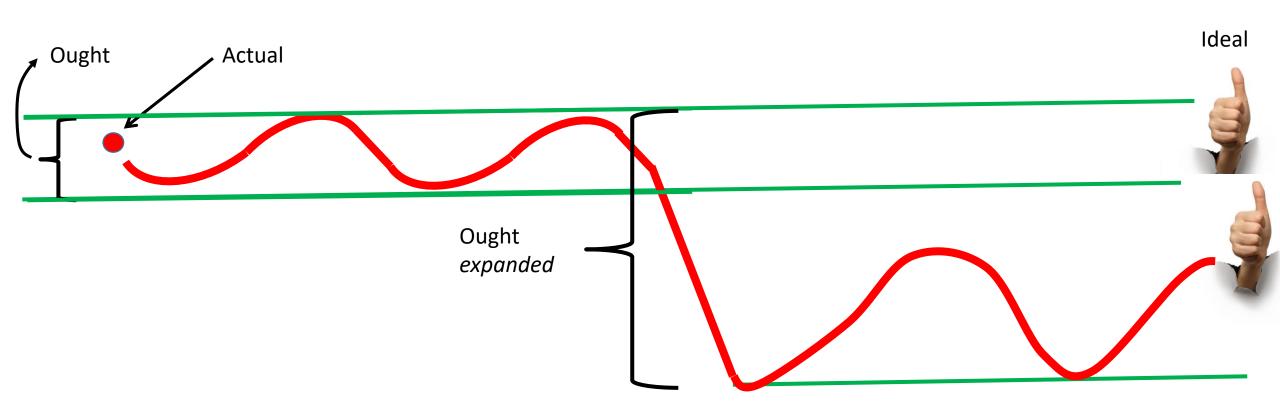
#### Resolution



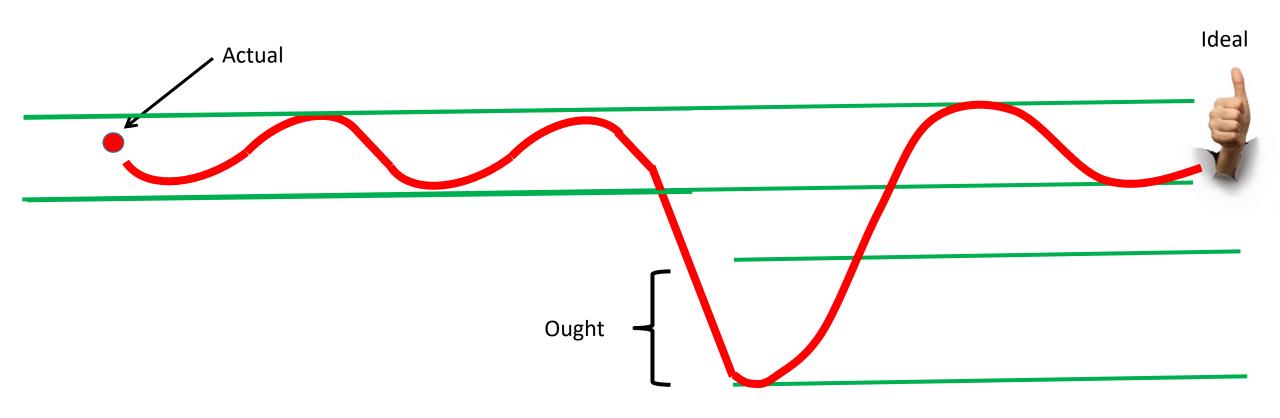
### Readjustment



#### Redefinition

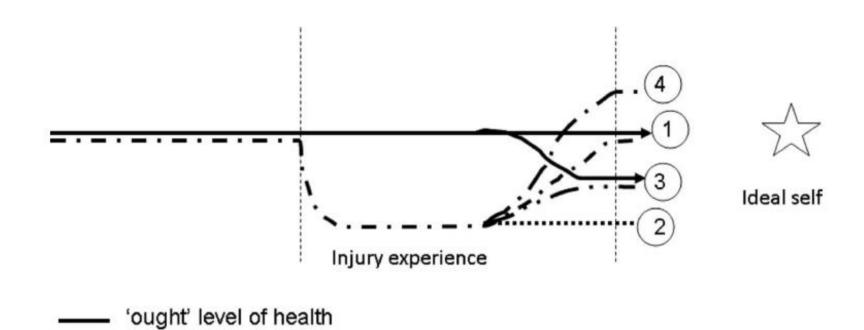


#### Survivor Pride



### Reconceptualizing recovery: Summary

'actual' level of health



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# What Does 'Recovery' Mean to People with Neck Pain? Results of a Descriptive Thematic Analysis

David M. Walton\*,1, Joy C. MacDermid2, Todd Taylor3 and ICON§

Table 2. Top 5 Most Important Indicators of Recovery, as Voted on by the Informants of Each Focus Session

GROUP 1 Mean NDI*: 82% Mean Duration: 59 Months Mean Age: 56.5 y.o.	GROUP 2 Mean NDI*: 32% Mean Duration: 20 Months Mean Age: 48.5 y.o.	GROUP 3 Mean NDI*: 55% Mean Duration: 39 Months Mean Age: 42.5 y.o.			
<ol> <li>Enjoying Intimacy</li> <li>Finding the will to make new goals for the future</li> <li>Being able to perform the necessities of everyday life</li> <li>Less financial stress</li> <li>Finding enjoyment in socializing with others (who are non-injured)</li> </ol>	<ol> <li>Be rid of symptoms</li> <li>No fear, worry or hesitation when doing basic things</li> <li>Feel more comfortable driving</li> <li>Return to "pre-accident" life, fulfill roles</li> <li>Have energy to work and still enjoy leisure time/socializing</li> </ol>	Strengthen connections with immediate family (spouse, children)     Able to shovel snow, drive long distances, mow lawn, carry children, run, exercise without worrying about after effects     Mood improved, less psychological distress (depression, anxiety, PTSD)     Would be free from medication     Could manage pain, keep it under control, decrease interference with daily life			

<sup>\*:</sup> Neck Disability Index

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- 1. Absent, or at least manageable, symptoms
- 2. Participation in valued life roles
- 3. Having the physical capacity one *ought* to have
- 4. Feeling positive emotions
- 5. Autonomy and Spontaneity
- 6. Re-establishing a satisfactory sense of self

#### Measuring Recovery

#### The Satisfaction and Recovery Index

- A 10-item Patient-Reported Outcome intended to measure both the process and state of recovery through the construct of importance-weighted, health-related satisfaction.
- 9 substantive items, 1 attention check
- Each item is rated twice: once for importance, once for satisfaction
- Score is weighted, such that more important domains influence the score more than less important domains

## Development and Initial Validation of the Satisfaction and Recovery Index (SRI) for Measurement of Recovery from Musculoskeletal Trauma

David M. Walton\*, Joy C. MacDermid<sup>2,3</sup>, Mathew Pulickal<sup>1</sup>, Amber Rollack<sup>1</sup> and Jennifer Veitch<sup>1</sup>

Table 2. Individual item analysis results.

	N = 123	Mean	Median	Range	Recovery Correlation	AUC (95% CI)
1.	Meeting your most basic needs	9.6	10	5 - 10	0.53**	0.82 (0.67, 0.97)
2.	Being mentally sharp	9.5	10	7 - 10	0.56**	0.87 (0.73, 1.00)
3.	Being physically fit compared to others like you	9.1	10	5 - 10	0.53**	0.84 (0.67, 1.00)
4.	Fulfilling your life roles	9.5	10	3 - 10	0.45**	0.74 (0.57, 0.93)
5.	Intimate relationships	9.2	10	4 - 10	0.38*	0.68 (0.48, 0.89)
6.	Being connected with your community at large	7.3	8	0 - 10	0.19	0.51 (0.25, 0.77)
7.	Being independent	9.5	10	2 - 10	0.48**	0.90 (0.79, 1.00)
8.	Being spontaneous	8.1	8	3 - 10	0.51**	0.84 (0.69, 1.00)
9.	Feeling positive emotions	9.3	10	6 - 10	0.34*	0.89 (0.77, 1.00)
	Feeling like you've got the potential to achieve new or greater things in the future	9.2	10	5 - 10	0.42**	0.81 (0.65, 0.98)

Columns 2-4: Importance ratings for each of the 10 items. 0 = not important to me at all, 10 = extremely important. Column 5: Pearson's r correlation coefficient between each item and score on a recovery NRS (0 = not recovered at all, 10 = completely recovered). Column 6: The area under the Receiver Operating Characteristic curve (AUC) for discriminating between changed and stable recovery status over a 3-month period. Bold indicates the single item that failed all 3 tests for retention and was removed from the final tool.

\* = correlation significant at the p < 0.05 level.

<sup>\*\* =</sup> correlation significant at the p < 0.01 level.

Below are 10 areas of life that other people in pain have identified as influencing recovery and satisfaction. For each row, please indicate 1: how *important* that area is to you personally, and 2: how *satisfied* you currently feel in that area considering any interference from your injury or symptoms. Note that it is possible to feel satisfied in an area that is not important to you, or to feel dissatisfied in an area that is important to you. Use the following scale:

1	2	3	4	5	6	7	8	9	10
				Moderat	tely				Extremely
			i	mportant	to me				important to me
1	2	3	4	5	6	7	8	9	10
all									Completely satisfied
-	1								(no interference)
	1 1 all		1 2 3 all	i 1 2 3 4	Moderat important 1 2 3 4 5 all	Moderately important to me  1 2 3 4 5 6 all	Moderately important to me  1 2 3 4 5 6 7 all	Moderately important to me  1 2 3 4 5 6 7 8 all	Moderately important to me  1 2 3 4 5 6 7 8 9 all

	Importance (0-10)	Satisfaction (0-10)
<ol> <li>Meeting your most basic needs (e.g., eating well, good sleep, good personal hygiene, etc)</li> </ol>		
2. Being mentally sharp (i.e., your ability to concentrate, remember or think quickly)		
<ol><li>Being physically fit (eg., strong, energetic or flexible) compared to other people of your age and sex</li></ol>		
<ol> <li>Fulfilling your 'life roles' (e.g., being a spouse, friend, parent, coworker and/or volunteer)</li> </ol>		
<ol> <li>Intimate relationships, whether they be physical relationships or close personal relationships above the level of normal friendship</li> </ol>		
6. For validation purposes, place a '4' in the Importance column, and a '6' in the Satisfaction column in this row		
<ol><li>Being independent (e.g., making your own decisions and being in control of your own life)</li></ol>		
8. Being spontaneous (doing things without having to plan)		
9. Feeling positive emotions (e.g. happiness, joy, self-esteem)		
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0	1	2	3	4	5	6	7	8	9	10
Not importa	ant				Modera	tely				Extremely
to me at a	II			i	important	to me				important to me
Satisfaction	<u>ı:</u>									
0	1	2	3	4	5	6	7	8	9	10
Not satisfie	d at all									Completely satisfied
(complete i	nterferen	ice)								(no interference)

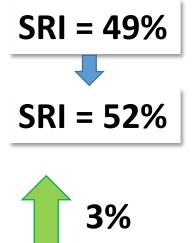
	Importance (0-10)	Satisfaction (0-10)
<ol> <li>Meeting your most basic needs (e.g., eating well, good sleep, good personal hygiene, etc)</li> </ol>	10	7
2. Being mentally sharp (i.e., your ability to concentrate, remember or think quickly)	10	5
<ol><li>Being physically fit (eg., strong, energetic or flexible) compared to other people of your age and sex</li></ol>	9	4
<ol> <li>Fulfilling your 'life roles' (e.g., being a spouse, friend, parent, coworker and/or volunteer)</li> </ol>	9	5
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**SRI = 49%** 

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Not importa	ant				Moderat	tely				Extremely
to me at a	II			i	mportant	to me				important to me
Satisfaction	<u>1:</u>									
0	1	2	3	4	5	6	7	8	9	10
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Not likely important

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Not importa	nt				Moderat	ely				Extremely
to me at all	l			iı	mportant	to me				important to me
Satisfaction	<u>:</u>									
0	1	2	3	4	5	6	7	8	9	10
Not satisfied (complete in		ce)								Completely satisfied (no interference)

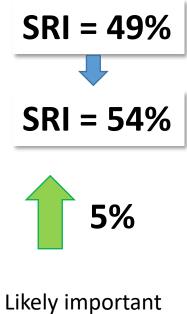
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	Responsiveness AUC (95%CI)
SRI	0.82 (0.67, 0.97)
Region-specific disability	0.79 (0.62, 0.96)
SF12 PCS	0.69 (0.42, 0.86)
SF12 MCS	0.50 (0.25, 0.70)

SRI = Satisfaction and Recovery Index; SF12 PCS = Physical Component Summary score of SF-12; SF12 MCS = Mental Component Summary score of the SF-12.

- SRI score > 80% likely indicates satisfactory recovery
- SRI score > 90% strongly indicates satisfactory recovery

#### Summary

- Encourage to change the conversation regarding 'recovery' as a return to some pre-traumatic state
  - Consider future outlook, adequate satisfaction rather than a set threshold
- The SRI appears to function as a sound approach for measuring the process and state of recovery from MSK injury from a clinician and patient perspective
- Good Patient-Reported Outcomes should open lines of communication, provide guidance for treatment decisions, and facilitate the transition to discharge and independent management

#### Thanks













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Canadian Physiotherapy Association

















