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CREATE CHANGE

Reassurance for people with WAD and neck pain - what do they want?

RECOVER Injury Research Centre

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How many of you are told - that by telling your patients:

“your neck pain has a good prognosis and full recovery is expected” - that this is offering reassurance?

Reassurance Needs vs Protocols

WAD Patients

Report **higher pain levels** and
disability

Report **higher levels of psychological
distress**

Different conditions may require **alternative
reassurance methods**



Clinical Approaches

What **reassurance** should comprise of?

How should it be **delivered**?

Clinical practice guidelines for neck pain
recommend **reassurance** as a **first line of
treatment**.

Reassurance Benefits

**Patients feel acknowledged,
understood and respected.**

**Facilitating optimistic recovery
expectations.**

**The approach to
reassurance, for both the
patient and practitioner,
would be better if it was
tailored to meet the concerns
of the individual patient.**

Aims

Perceptions of reassurance in patients

AIM
01

Identify and compare the concerns, worries and fears associated with their condition that patients with WAD and NTNP have.

AIM
02

Determine and compare whether patients believe their concerns are addressed by their primary care providers.

Physiotherapists reassurance approaches

Identify and compare what physiotherapists perceive to be the main concerns and fears patients with WAD and NTNP have about their condition

AIM
01

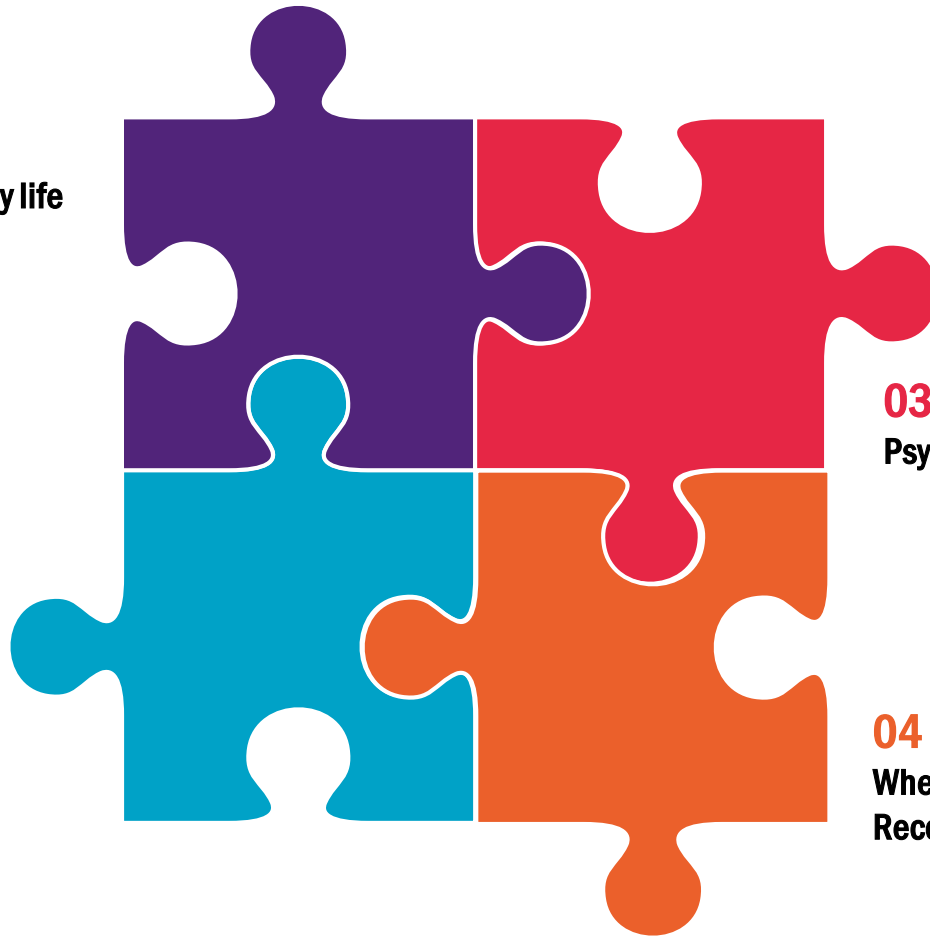
Identify and compare methods of delivering reassurance used by physiotherapists to address fears and concerns of patients between the two neck pain groups.

AIM
02

Themes of Convergence (physiotherapists' perception)

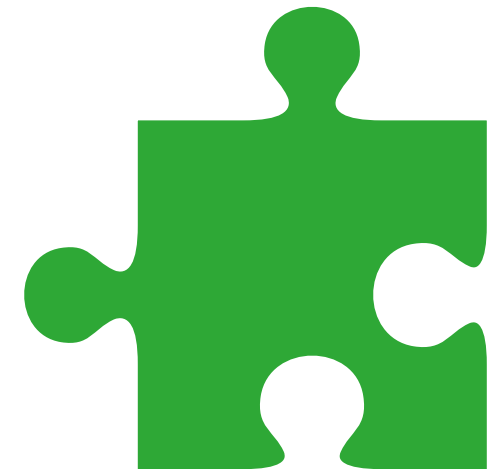
01
Interference with daily life

02
Pain related concerns



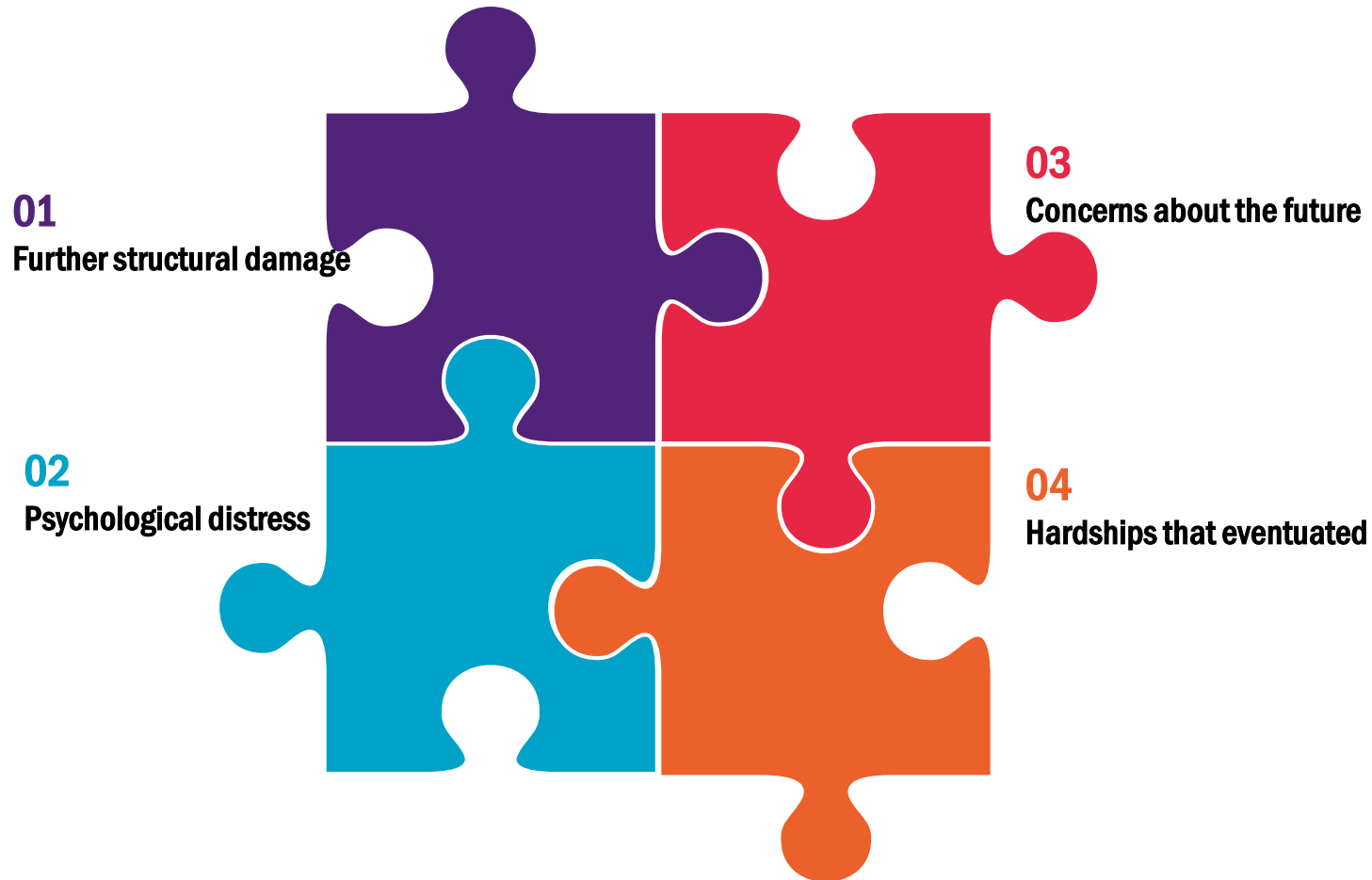
03
Psychological distress

04
When will I recover?
Recovery timeline & prognosis



05
Fear avoidance
(unique to NTNP)

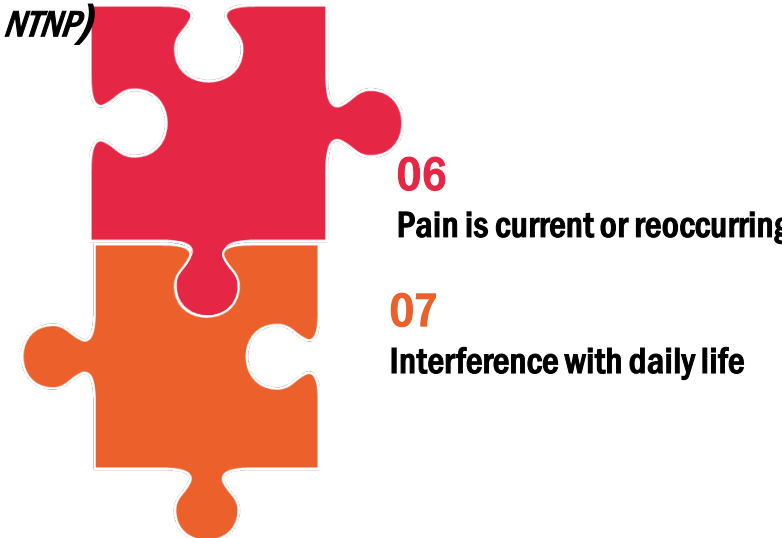
Themes of Convergence (patients' perception)



(unique to WAD)

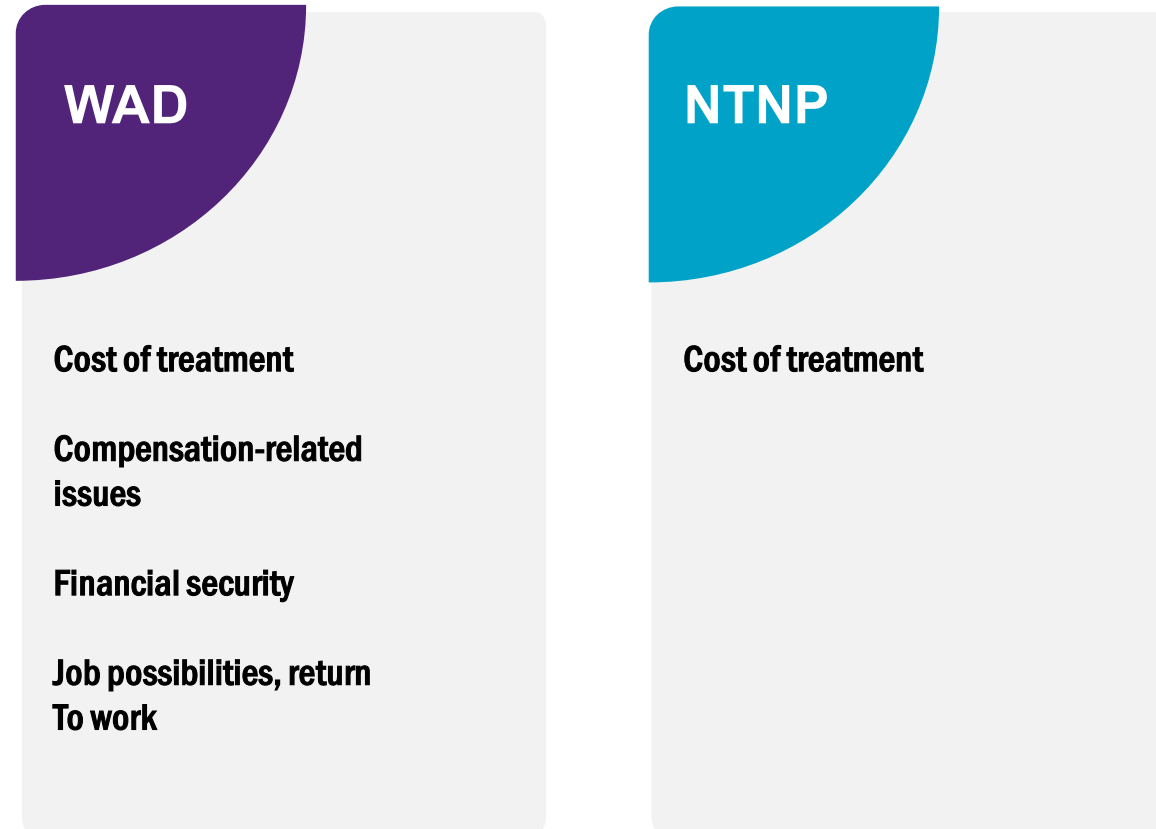


(Themes unique to NTNP)



Contrasting Perceptions

Main patient concerns (hardships that eventuated)



Hardships WAD (burden of disease/treatment)

The cost of the up keep of treatment... it really adds up.



The at-fault party I believe provided false personal information and I was unable to afford further treatment at the time.

I was cleared for full time work. Work cover stopped paying for my treatment.

Contrasting Perceptions (Psychological distress)

Main patient concerns

WAD

Uncertainty

Driving issues

Changing/ adjusting
expectation of life

Losing the purpose of life

NTNP

Impact on their mental health

Possibility of losing the
enjoyment of life

Physiotherapists perceptions of patient concerns

WAD

Despair, fear about the
future

Anger

Thoughts about not resolution

NTNP

Despair, fear about the
future

Uncertainty

Anxiety

Psychological Distress (WAD)

*The deferment of my usual life..
Uncertainty as to the level of
activity to which I'll recover.*



*I was and still am nervous
when driving and specially
being a passenger as I think
every car is not going to stop*

Psychological Distress (WAD)

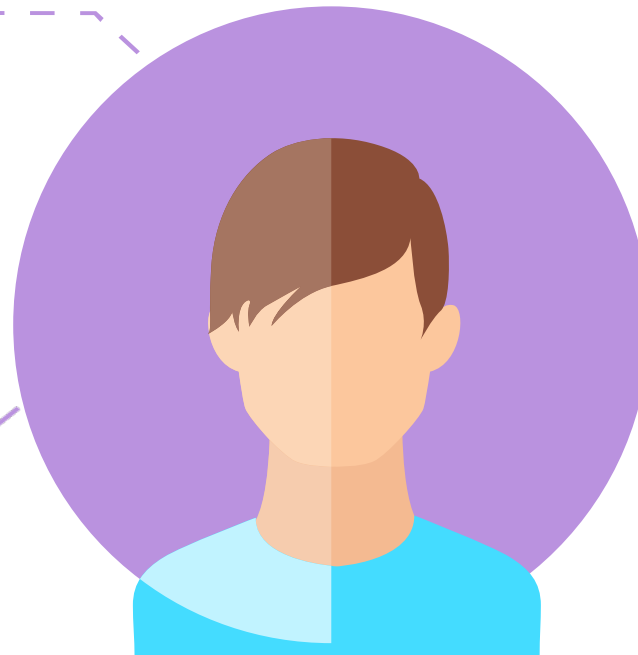


I want to work and live life to the fullest but my body is holding me back.

How long it might be before (or if) I will reach a level of activity that enables me to live my life in the ways that make it meaningful & worthwhile

Psychological distress (NTNP Patients)

My absolute number one concern was that I would have this condition, and the associated pain, for life. If that was true I would be robbed of nearly everything I enjoy

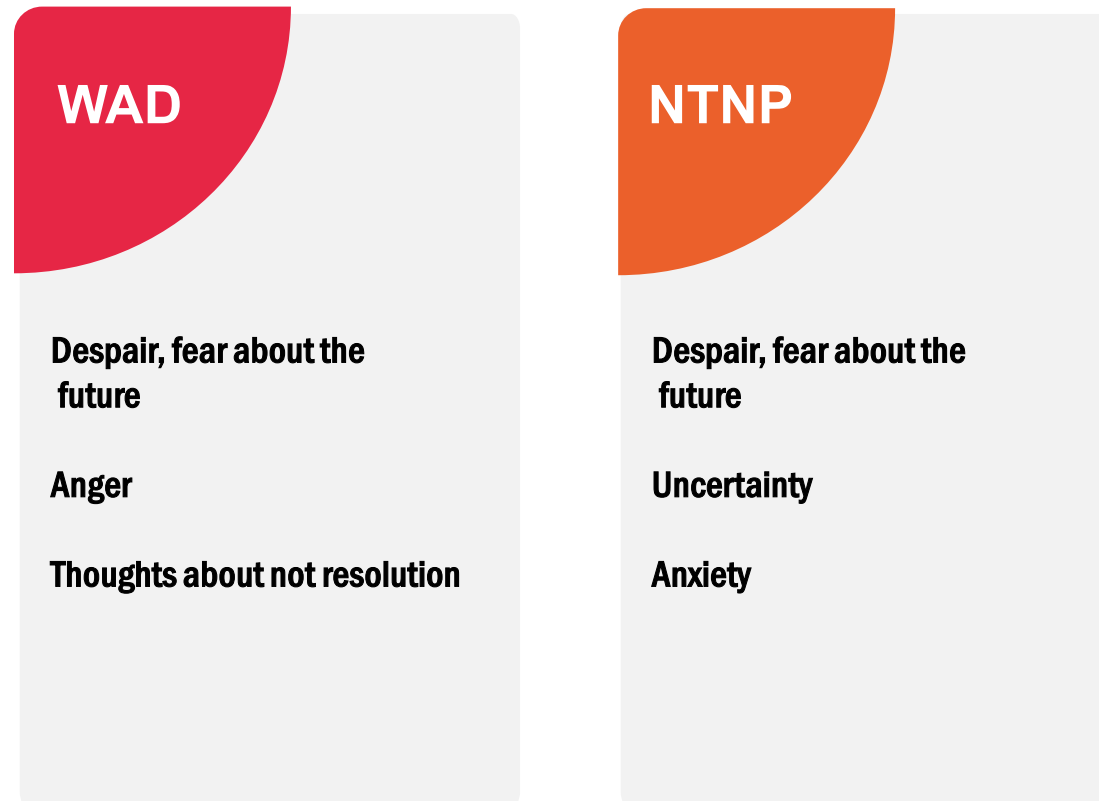


I briefly considered suicide

That it will impact on my ability to do the things I want to do ... because of the annoyance of continual pain and the impact of this on my mental health

Contrasting Perceptions (Psychological distress)

Physiotherapists perceptions of patient concerns



Psychological distress (physiotherapists' perception of WAD Patients)



Psychological distress (physiotherapists' perception of NTNP Patients)

What if I can't get better?

I haven't improved yet so I might improve in the future.

Will this get worse?

How long before I can live a full life again?



Contrasting Perceptions (Psychological distress)

Main patient concerns

WAD

- Uncertainty
- Driving issues
- Changing/ adjusting expectation of life
- Losing the purpose of life

NTNP

- Impact on their mental health
- Possibility of losing the enjoyment of life

Physiotherapists perceptions of patient concerns

WAD

- Despair, fear about the future
- Anger
- Thoughts about not resolution

NTNP

- Despair, fear about the future
- Uncertainty
- Anxiety

Converging Strategies to Address Patient Concerns (physiotherapists)



- 01 Provide reassurance statements**
- 02 Education**
- 03 Psychological Strategies**

Practitioner Strategies Unique to WAD and NTNP



04 Pain Relief

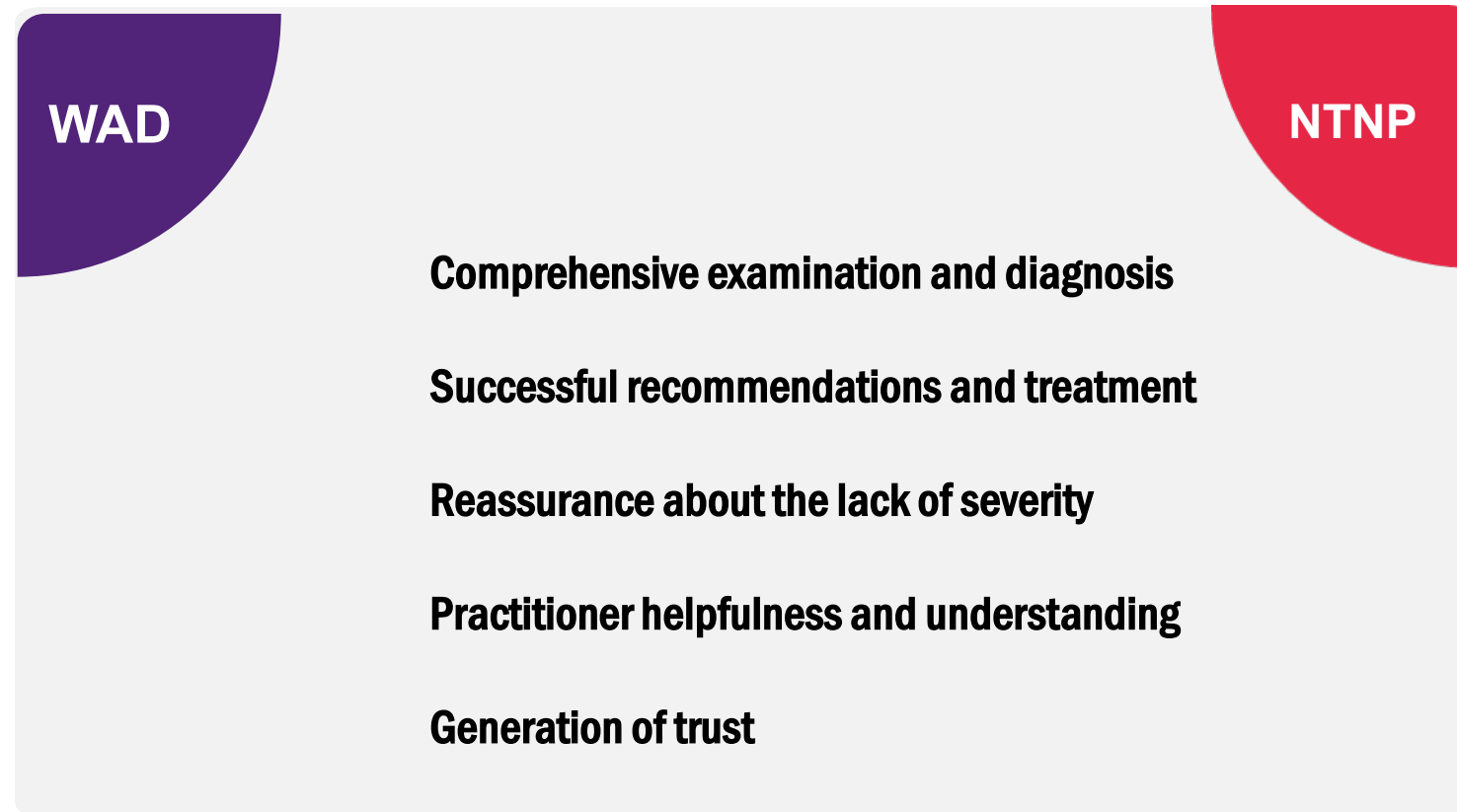
05 Empowerment

06 Creating an action plan for recovery

07 Communication Skills

08 Physical Strategies

Practitioner Strategies: concerns addressed



Practitioner Strategies: concerns not addressed

WAD

Lack of interest

Lack of understanding and/or knowledge

Non comprehensive examination and/or Dx

Lack of trust

NTNP

Lack of interest

Lack of understanding and/or knowledge

Non comprehensive examination and/or Dx

Lack of trust

Being made to feel more worried about my pain

Absence of long-term treatment plan

Findings

Perceptions of reassurance in patients

01

Inform about the important differences between patient groups and assist practitioners to address concerns.

02

Provide information about neck pain patient requirements and the need to reassure them.

03

Enhance the understanding of reassurance for neck pain.

Physiotherapists reassurance approaches

Reassurance is multifactorial and needs to be nuanced and not prescriptive.

01

The differentiated content of training programs for physiotherapists delivering reassurance to patients.

02

Greater need for additional practitioner training and professional development.

03



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Thank You

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