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Occupational Therapy Practitioners' Perspectives on Pain Management Following Spinal Cord Injury

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Cleveland State University

Department of Occupational Therapy

Occupational Therapy Practitioners' Perspectives on Pain Management Following Spinal Cord Injury

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Abstract

Background

Pain management is a human right, yet is so often an unmet need for individuals with SCI.

→Pain is the most debilitating and prevalent condition following SCI, prevalence studies consistently reveal that 80% of individuals with SCI have persistent pain.

→There are remarkably few efficacious treatment options & limited access to healthcare resources in the community for this population.

→Individuals with SCI are frustrated by the lack of available treatment options & the perceived lack of knowledge of healthcare providers.

→Pain impacts a person's ability to engage in meaningful or necessary daily occupations making individuals vulnerable to occupational deprivation and reduced quality of life.

→Occupational therapy practitioners (OTPs) are uniquely qualified to address this treatment gap, yet OT is poorly represented in the literature, and little is known about how OT is currently addressing pain.

Purpose

Explore the perspectives of OTPs working in SCI to evaluate internal and external factors for improving OT practice for this population.

Methods

Study Design

→Qualitative approach

→Strengths, Weaknesses, Opportunities, Threats (SWOT) Framework guided questions

→Single one-hour interview

Results

Demographics

Mostly OTs from IPR with varied amounts of experience and varied geographic regions (n=9).

Themes

- OT practice reflects the biopsychosocial model.
- There is a need for multifaceted education at the micro, meso, and macro levels.
- The community context must be considered when addressing pain.
- There is a need to navigate a variety of barriers.

Conclusion

OT has a vital role in pain management following SCI, but multiple areas remain for improvement in interventions, advocacy, and service delivery.

About Me

I chose to investigate the involvement of occupational therapy in chronic pain after spinal cord injury to highlight the distinct value of this profession in addressing a widespread and debilitating health inequality. As an aspiring OT, I am deeply committed to advocating for and pursuing optimal functional outcomes to enhance the well-being of a varied clientele in rehabilitation settings. Scan the QR code to learn more about my experiences.



Capstone Experience and Implications

Capstone Activities

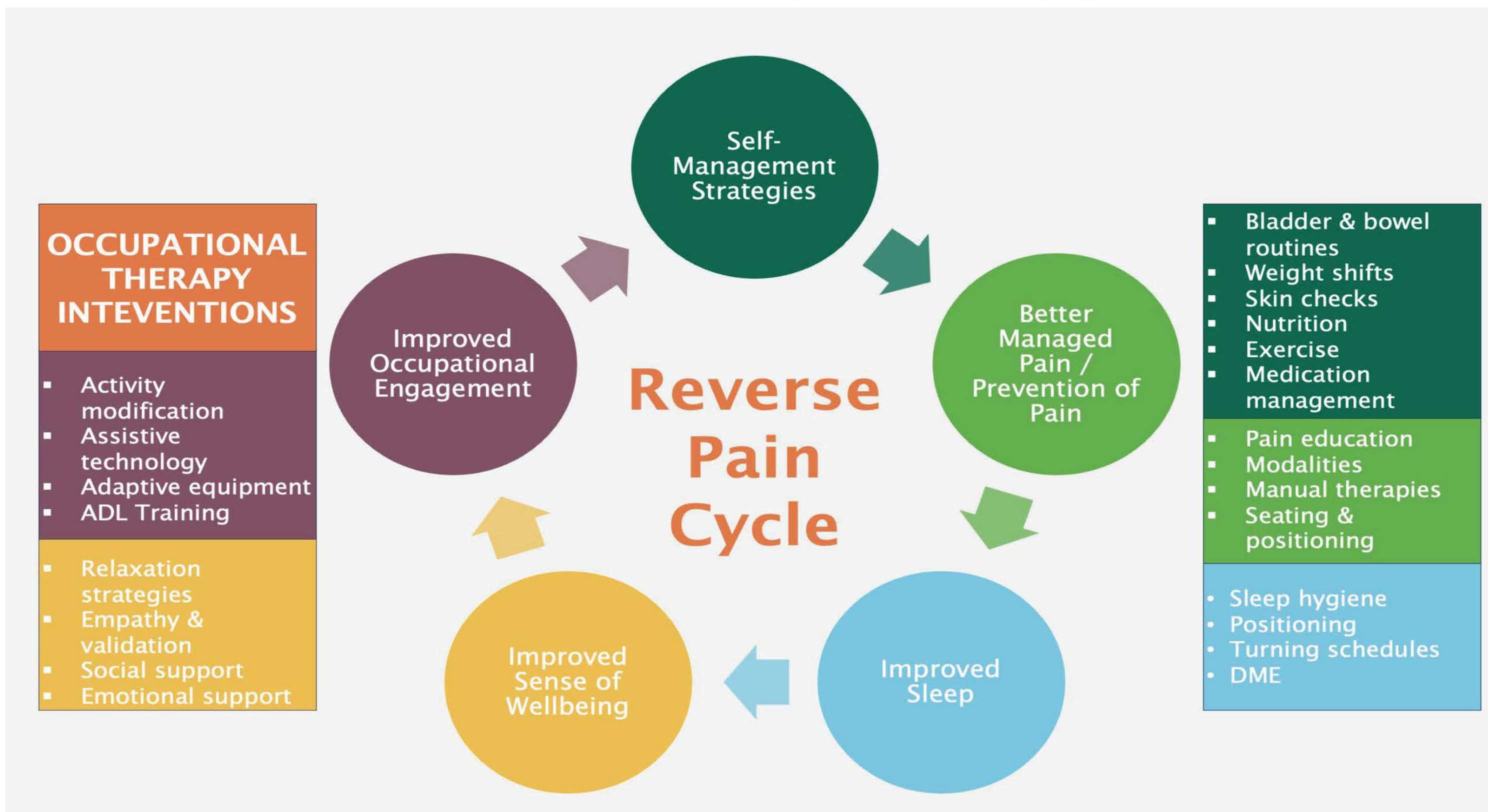
Education	Research	Deliverable
<ul style="list-style-type: none">World of Hurt: A Guide to Classifying PainInternational Association for the Study of Pain Virtual ConferencesInternational Seating SymposiumDPT 707 Clinical Applications of Pain Neuroscience EducationObserved a variety of research studies, clinics, inpatient and outpatient therapy sessions	<ul style="list-style-type: none">Data Analysis on the intersection of assistive technology and occupational justice for those with SCI and their caregivers.Independently led research study including obtaining IRB approval, recruiting and scheduling participants, facilitating interviews, transcribing data, and data analysis and synthesis.	<ul style="list-style-type: none">Wrote a draft manuscript on the role of OT in pain management for SCI:A thorough literature review addressing the complexity of this topic.A detailed description of the themes developed and how these relate to the SWOT analysis.Outlined future recommendations for OT practice.Developed two tentative frameworks to guide practice.

Main Accomplishments

- Completed a qualitative research study
- Analyzed two sets of qualitative data
- Completed several learning experiences

Main Learning Outcomes

- Improved understanding of research, including the IRB process, ethics, and qualitative data analysis techniques.
- Advanced understanding of pain and the importance of addressing pain for occupational performance.
- Enhanced clinical understanding of spinal cord injury including the complexities of secondary health conditions and health disparities for this population.



Limitations & Recommendations

Limitations

- Qualitative nature of the study | Sample limitations | Time restraints

Recommendations

Further research

- Therapeutic use of self and pain experiences
- Interventions and intervention mechanisms (to correlate with pain classification)
- Exploration of occupation-based models and pain
- Validation of self-management programs for pain & SCI

Practice

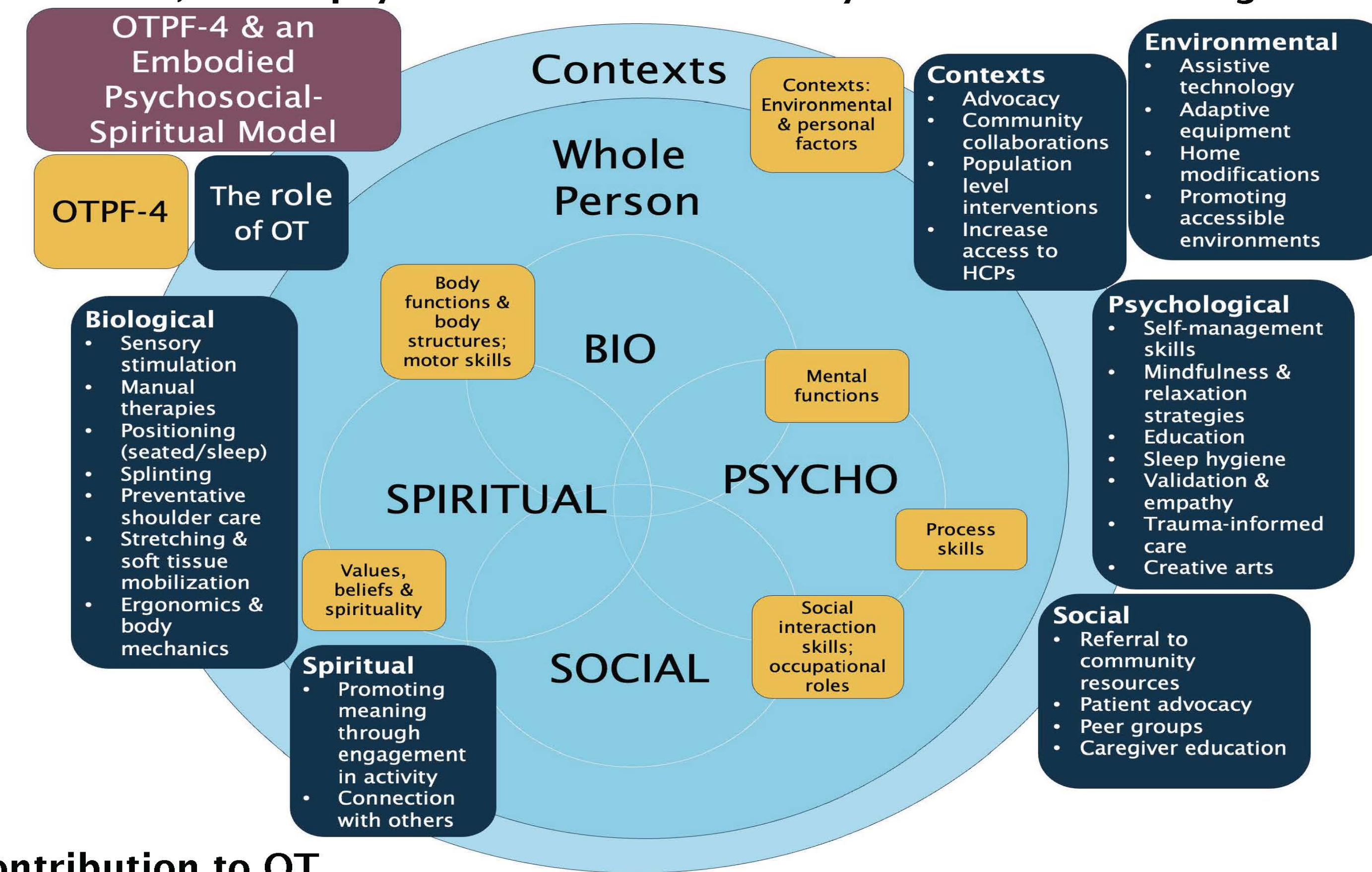
- Offer community self-management programming (telehealth)
- Increase accessible community wellness opportunities
- Extend the continuum of care / modify current rehabilitation models
- Expand pain education: CEUs, therapist mentorship, academia, and public education

Synthesis

Discussion

- Current evidence suggests that best practice is multimodal and multidisciplinary, guided by the biopsychosocial model.
- Patient pain education has been shown to improve pain outcomes for chronic pain populations and those with SCI.
- Individuals with SCI are open to and desirous of nonpharmacological interventions for the management of pain.
- Many therapists and educators report pain education as inadequate in academia and continuing education.
- Pain education, self-management practices, and the biopsychosocial model are all within the scope of practice for OT, as indicated in the *Occupational Therapy Practice Framework, 4th ed (OTPF-4)*.
- Insurance limitations have had a profound impact on rehabilitation outcomes including pain and community integration for those with SCI.

The OTPF-4, the Biopsychosocial model & study data are all well-aligned:



Contribution to OT

- This study highlighted the strengths of the OT profession in addressing pain after SCI. In addition, areas for expansion and improvement were outlined while considering barriers.
- This study advocates for increasing the role of OT in pain management following SCI.

Key References

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