



# Health literacy and pain neuroscience education in an interdisciplinary pain management programme: a qualitative study of patient perspectives

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## Abstract

**Introduction:** Pain neuroscience education is part of interdisciplinary pain management programs (PMPs). To date, the role of health literacy on patients' understanding of pain neuroscience education has not sufficiently been examined.

**Objectives:** Drawing on interviews with patients with diverse levels of health literacy, this article explores patient perspectives on pain neuroscience education.

**Methods:** Purposively sampled patients from an IPMP were interviewed twice (waiting list and after 4 weeks). A directed qualitative content analysis was performed with the Integrated Conceptual Model of Health Literacy as an analytic framework.

**Results:** Thirteen patients with chronic musculoskeletal pain were interviewed: 4 men and 9 women aged from 21 to 77 years with diverse educational and mostly low health literacy. One participant dropped out after baseline. Some participants gained access to health information actively; others relied on the expertise of their healthcare providers. Most participants did not seem to receive the information in the pain neuroscience education as intended, experienced difficulties with understanding the message, negatively appraised the information, and were not able to apply this in their daily lives. Health literacy levels likely played a role in this.

**Conclusions:** Pain neuroscience education tailored to patients' health literacy levels, information needs, and learning strategies is needed.

**Keywords:** Health literacy, Patient education, Qualitative research, Interview, Pain management, Musculoskeletal pain

## 1. Introduction

Patients with persistent chronic musculoskeletal pain are frequently referred to interdisciplinary pain management programmes (IPMPs). A biopsychosocial approach, based on the understanding that chronic pain should be viewed as a dynamic interaction involving biological, psychological, and social factors unique to each individual, is used to help patients develop effective pain management strategies.<sup>1,2</sup> Pain neuroscience education (PNE), an evidence-based form of pain education, aims to

reconceptualize patients' pain, encouraging them to understand it through a biopsychosocial (rather than biomedical) lens by explaining pain biology.<sup>3,10,15,23</sup> A systematic review has shown that PNE reduces catastrophising and increases knowledge about the complexity of pain.<sup>10</sup> Pain neuroscience education is therefore an important part of these programs to improve patients' understanding of their chronic musculoskeletal pain. Pain neuroscience education outcomes are expected to be highly dependent on whether the patient can grasp the content of the education. Low

Sponsorship or competing interests that may be relevant to content are disclosed at the end of this article.

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# Pain New Perspectives In Therapy And Research

**Michel Hersen, Richard M. Eisler, Peter  
M. Miller**



## **Pain New Perspectives In Therapy And Research:**

**Pain** Matisyohu Weisenberg, 1976 *Published Scientific Papers of the National Institutes of Health* National Institutes of Health (U.S.), 1977 Each issue lists papers published during the preceding year Progress in Behavior Modification Michel Hersen, Richard M. Eisler, Peter M. Miller, 2013-10-22 Progress in Behavior Modification Volume 8 covers the developments in the study of behavior modification The book discusses the conceptual issues and treatment interventions for obsessive compulsives the behavioral study of clinical phobias and fear reduction techniques with children The text also describes the behavioral treatments for marital discord the behavioral treatment of headaches and the behavioral assessment and treatment of clinical pain The modification of academic performance in the grade school classroom is also considered Psychologists psychiatrists sociologists and educators will find the book invaluable The Body and Psychology Henderikus J Stam, 1998-04-29 The body has come to provide a central site for theory and debate from social theory to cultural studies This important and compelling book looks beyond psychology's traditional biological body to explore what insights can be gained from recent theories of embodiment Taking the body as inscribed by social and disciplinary practices leading contributors explore a wide range of psychological topics in new and challenging ways Questions surrounding health gender history and culture are addressed in contexts such as the psychology of pain the treatment of anorexia nervosa and psychology's relationship to transgender activists The material in this volume was previously published as a Special Issue of the journal Theory Psychology *The Myth of Pain* Valerie Gray Hardcastle, 1999 Valerie Gray Hardcastle argues that both professional and lay definitions of pain are wrongheaded with consequences for how pain and pain patients are treated how psychological disorders are understood and how clinicians define the mind body relationship Pain although very common is little understood Worse still according to Valerie Gray Hardcastle both professional and lay definitions of pain are wrongheaded with consequences for how pain and pain patients are treated how psychological disorders are understood and how clinicians define the mind body relationship Hardcastle offers a biologically based complex theory of pain processing inhibition and sensation and then uses this theory to make several arguments 1 psychogenic pains do not exist 2 a general lack of knowledge about fundamental brain function prevents us from distinguishing between mental and physical causes although the distinction remains useful 3 most pain talk should be eliminated from both the folk and academic communities and 4 such a biological approach is useful generally for explaining disorders in pain processing She shows how her analysis of pain can serve as a model for the analysis of other psychological disorders and suggests that her project be taken as a model for the philosophical analysis of disorders in psychology psychiatry and neuroscience *Rehabilitation and Treatment of Head and Neck Cancer* Eugene N. Myers, Ivan Barofsky, Jerome William Yates, 1986 This monograph is the result of a workshop entitled Head and Neck Cancer Integration of Treatment and Rehabilitation which was held in January 1984 and sponsored by the National Cancer Institute The purpose of the workshop was to review past research directions focused on

head and neck cancer and set new goals where appropriate As discussed at the meeting the goal of integrating treatment and rehabilitation is to prevent or minimize the physical cosmetic or functional disability and the emotional sequelae commonly associated with head and neck cancer and its treatment The meeting afforded an opportunity for a diverse group of professionals to exchange ideas and information on effective and desirable methods of treatment and rehabilitation for head and neck cancer patients Papers were presented and discussions were held with the aim of identifying and resolving some of the problems faced by those who make treatment decisions and provide care for these patients This workshop highlighted the need for an integration of multi disciplinary rehabilitation planning at the time of initial treatment for head and neck cancer It also demonstrated major deficiencies in objective outcome measures used to assess physiological and social function over and above the usual measures of patient survival Centers which provide multidisciplinary patient management programs and follow adequate patient populations thus assuring management proficiency provide the best means of avoiding many of the pitfalls that threaten patients who are managed by a single physician and exposed sequentially to other disciplines only when problems develop Few other cancers demonstrate the need for anticipatory treatment and rehabilitation to the magnitude required in the management of head and neck cancer

**International Handbook of Behavior Modification and Therapy** Alan S. Bellack, Michel Hersen, Alan E. Kazdin, 2012-12-06 It is particularly gratifying to prepare a second edition of a book because there is the necessary implication that the first edition was well received Moreover now an opportunity is provided to correct the problems or limitations that existed in the first edition as well as to address recent developments in the field Thus we are grateful to our friends colleagues and students as well as to the reviewers who have expressed their approval of the first edition and who have given us valuable input on how the revision could best be structured Perhaps the first thing that the reader will notice about the second edition is that it is more extensive than the first The volume currently has 41 chapters in contrast to the 31 chapters that comprised the earlier version Chapters 3 9 29 and 30 of the first edition either have been dropped or were combined whereas 14 new chapters have been added In effect we are gratified in being able to reflect the continued growth of behavior therapy in the 1980s Behavior therapists have addressed an ever increasing number of disorders and behavioral dysfunctions in an increasing range of populations The most notable advances are taking place in such areas as cognitive approaches geriatrics and behavioral medicine and also in the treatment of childhood disorders

Using Guided Imagery and Hypnosis in Brief Therapy and Palliative Care Rubin Battino, 2020-11-16 Using Guided Imagery and Hypnosis in Brief Therapy and Palliative Care presents a model for effective single session therapy Chapters include more than a dozen case studies with transcripts and commentary Readers will learn how to use an adapted model of Remen's healing circle for preparing patients for surgery and guided imagery and other approaches are presented for enhancing palliative care Extensive appendixes provide a wide variety of valuable tools that psychotherapists can use with clients concerned with end of life issues

**Pelvic Pain: New**

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*Musculoskeletal Medicine* L. Burn,J.K. Paterson,2012-12-06 Neck and back pain are common symptoms which vary from the trivial to the incapacitating Conventional medical textbooks concentrate disproportion ately on those causes which have clear cut diagnostic patterns and pathological features demonstrable by investigations Discussions of treatment often overemphasize the importance of the tiny minority of patients who proceed to surgery Real life is very different The majority of patients who consult their general practitioners do not suffer from readily categorized diseases have no diagnostic investigational signs and often respond to treatment in no other way than that expected from the passage of time It is not surprising that such a situation has led to the emergence of a number of gurus both orthodox and unorthodox who provide diagnostic labels and treatment methods united by only one thing certainty I had expected two such prominent exponents of manipulative techniques as the authors of this book to be among those offering certainty and demanding blind acceptance but I was wrong This book

explores the scientific basis for treatment and evaluates a variety of therapeutic options. It offers an approach to assessment and treatment which is overtly pragmatic but firmly based in conventional clinical medicine. It is a book which invites discussion, comment and criticism in an area where many texts offer little but dogmatism.

**Medical Psychology** Charles K. Prokop, Laurence A. Bradley, 2013-10-22. *Medical Psychology: Contributions to Behavioral Medicine* discusses the relationship between medical psychology and behavioral medicine and includes critical reviews of the status of diagnostic treatment and preventive approaches to a wide variety of medical disorders such as hypertension, cancer and chronic pain. A quantitative and qualitative approach to neuropsychological evaluation is also presented. Comprised of 26 chapters, this book begins by tracing the history of the relationship between psychology and medicine and assessing the status of psychology's role in the medical center. The second and third sections deal with approaches to the assessment, treatment and prevention of various medical disorders including hypertension, cancer and cardiovascular disease. The third section also examines several special problems within the provinces of medical psychology and behavioral medicine. The fourth section presents reviews of clinical and research topics of particular interest to all medical psychologists and behavioral medicine specialists, including adherence to health care regimens and professional services evaluation in a medical setting. This monograph will be of value to research investigators and practitioners within the behavioral sciences and medicine.

**Measuring Health** Ian McDowell, 2006-03-09. Worldwide economic constraints on health care systems have highlighted the importance of evidence based medicine and evidence based health policy. The resulting clinical trials and health services research studies require instruments to monitor the outcomes of care and the output of the health system. However, the over abundance of competing measurement scales can make choosing a measure difficult at best. *Measuring Health* provides in depth reviews of over 100 of the leading health measurement tools and serves as a guide for choosing among them. Now in its third edition, this book provides a critical overview of the field of health measurement with a technical introduction and discussion of the history and future directions for the field. This latest edition updates the information on each of the measures previously reviewed and includes a complete new chapter on anxiety measurement to accompany the one on depression. It has also added new instruments to those previously reviewed in each of the chapters in the book. Chapters cover measurements of physical disability, social health, psychological well being, anxiety, depression, mental status, testing, pain, general health status and quality of life. Each chapter presents a tabular comparison of the quality of the instruments reviewed, followed by a detailed description of each method covering its purpose and conceptual basis, its reliability and validity, and where possible shows a copy of the actual scale. To ensure accuracy of the information, each review has been approved by the original author of each instrument or by an acknowledged expert.

**Behavioral Medicine** Daniel Doleys, 2012-12-06. *Pain: New Insights for the Healthcare Professional: 2013 Edition*, 2013-07-22. *Pain: New Insights for the Healthcare Professional: 2013 Edition* is a ScholarlyEditions book that delivers timely, authoritative and comprehensive information about Diagnosis and Screening. The

editors have built Pain New Insights for the Healthcare Professional 2013 Edition on the vast information databases of ScholarlyNews You can expect the information about Diagnosis and Screening in this book to be deeper than what you can access anywhere else as well as consistently reliable authoritative informed and relevant The content of Pain New Insights for the Healthcare Professional 2013 Edition has been produced by the world s leading scientists engineers analysts research institutions and companies All of the content is from peer reviewed sources and all of it is written assembled and edited by the editors at ScholarlyEditions and available exclusively from us You now have a source you can cite with authority confidence and credibility More information is available at <http://www.ScholarlyEditions.com>      **National Library of**

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## **Table of Contents Pain New Perspectives In Therapy And Research**

1. Understanding the eBook Pain New Perspectives In Therapy And Research
  - The Rise of Digital Reading Pain New Perspectives In Therapy And Research
  - Advantages of eBooks Over Traditional Books
2. Identifying Pain New Perspectives In Therapy And Research
  - Exploring Different Genres
  - Considering Fiction vs. Non-Fiction
  - Determining Your Reading Goals
3. Choosing the Right eBook Platform
  - Popular eBook Platforms
  - Features to Look for in an Pain New Perspectives In Therapy And Research
  - User-Friendly Interface
4. Exploring eBook Recommendations from Pain New Perspectives In Therapy And Research
  - Personalized Recommendations
  - Pain New Perspectives In Therapy And Research User Reviews and Ratings
  - Pain New Perspectives In Therapy And Research and Bestseller Lists
5. Accessing Pain New Perspectives In Therapy And Research Free and Paid eBooks
  - Pain New Perspectives In Therapy And Research Public Domain eBooks
  - Pain New Perspectives In Therapy And Research eBook Subscription Services
  - Pain New Perspectives In Therapy And Research Budget-Friendly Options

6. Navigating Pain New Perspectives In Therapy And Research eBook Formats
  - ePub, PDF, MOBI, and More
  - Pain New Perspectives In Therapy And Research Compatibility with Devices
  - Pain New Perspectives In Therapy And Research Enhanced eBook Features
7. Enhancing Your Reading Experience
  - Adjustable Fonts and Text Sizes of Pain New Perspectives In Therapy And Research
  - Highlighting and Note-Taking Pain New Perspectives In Therapy And Research
  - Interactive Elements Pain New Perspectives In Therapy And Research
8. Staying Engaged with Pain New Perspectives In Therapy And Research
  - Joining Online Reading Communities
  - Participating in Virtual Book Clubs
  - Following Authors and Publishers Pain New Perspectives In Therapy And Research
9. Balancing eBooks and Physical Books Pain New Perspectives In Therapy And Research
  - Benefits of a Digital Library
  - Creating a Diverse Reading Collection Pain New Perspectives In Therapy And Research
10. Overcoming Reading Challenges
  - Dealing with Digital Eye Strain
  - Minimizing Distractions
  - Managing Screen Time
11. Cultivating a Reading Routine Pain New Perspectives In Therapy And Research
  - Setting Reading Goals Pain New Perspectives In Therapy And Research
  - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Pain New Perspectives In Therapy And Research
  - Fact-Checking eBook Content of Pain New Perspectives In Therapy And Research
  - Distinguishing Credible Sources
13. Promoting Lifelong Learning
  - Utilizing eBooks for Skill Development
  - Exploring Educational eBooks
14. Embracing eBook Trends
  - Integration of Multimedia Elements

- Interactive and Gamified eBooks

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