

The Use of Self-Management Strategies in Physiotherapy for Chronic Musculoskeletal Pain

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Editorial / Perspectives / Opinions Article

Chronic musculoskeletal pain (CMP) is a pervasive condition affecting millions worldwide, characterised by persistent discomfort and dysfunction in the musculoskeletal system. While often stemming from underlying diseases or injuries, CMP is recognized as a distinct condition with its medical definition and taxonomy(1) The recent adoption of the International Classification of Diseases, 11th Revision (ICD-11), reflects a paradigm shift in understanding CMP, integrating both biomedical and psychosocial perspectives into its evaluation and treatment. The ICD-11 classifies CMP into two main types: primary and secondary. Primary CMP denotes pain not attributable to a specific classified disease, whereas secondary CMP arises as a symptom of an underlying disease elsewhere in the body, leading to persistent nociception. This classification aims to facilitate patient-centred multimodal pain management and enhance research efforts through more accurate epidemiological analyses.(2, 3) Psychological factors significantly impact the onset, progression, and outcomes of common musculoskeletal disorders, profoundly influencing how patients experience pain and respond

to treatment. The recognition of these factors has led to a paradigm shift in the clinical management of musculoskeletal conditions, emphasizing the importance of addressing both physical and psychological aspects to optimize patient outcomes. One key strategy in improving outcomes for musculoskeletal disorders is the stratification of treatment based on psychological and prognostic characteristics. This approach recognizes that not all patients respond to treatments in the same way and that individual differences in psychological factors such as fear avoidance, catastrophizing, and depression can influence treatment efficacy. Stratified care involves tailoring interventions to match patients' specific needs, targeting psychological factors alongside physical symptoms. For example, in the case of low back pain, stratified care models have shown promise in improving outcomes. By identifying patients at higher risk of poor outcomes based on psychological and prognostic factors, healthcare providers can offer targeted interventions such as cognitive-behavioral therapy, mindfulness-based stress reduction, or multidisciplinary pain management programs. These interventions aim to address maladaptive beliefs and coping strategies, reduce fear and avoidance behaviors, and improve self-efficacy and resilience in managing pain. Similar benefits are anticipated for non-specific pain at other anatomical sites, where psychological factors also play a significant role. By incorporating psychological assessments into routine clinical practice, healthcare providers can better understand the complex interplay between physical symptoms and psychological distress, guiding treatment decisions and optimizing outcomes for patients with musculoskeletal disorders. Furthermore, addressing low mood in patients with musculoskeletal pain is crucial for enhancing their overall well-being. Psychological interventions, such as cognitive-behavioral therapy and mindfulness-based approaches, offer effective strategies for managing symptoms of depression and anxiety while promoting adaptive coping skills and resilience. Pharmacological interventions, including antidepressant medications, may also be

considered in conjunction with psychological therapies for patients with significant mood disturbances.(4, 5)

Physiotherapeutic interventions form a cornerstone of CMP management, encompassing a range of modalities such as exercise therapy, transcutaneous electrical nerve stimulation (TENS), ultrasound, laser therapy, patient education, massage, traction, lumbar supports, and heat/cold therapy. While these interventions effectively manage pain in the long term, equal attention must be paid to addressing the psychosocial aspects accompanying chronic pain. Multidisciplinary pain management programs, such as those offered in pain clinics, embrace a biopsychosocial approach to treatment, empowering patients to take control of their pain and lead fulfilling lives despite its presence. However, implementing such approaches requires a paradigm shift in healthcare systems, necessitating organizational support and reshaping clinicians' roles to meet the evolving needs of patients with CMP. Self-management strategies are increasingly recognized as essential components of CMP treatment, encompassing exercise, education, and psychological interventions like mindfulness, metacognitive beliefs, and cognitive emotion regulation strategies. (6, 7)

Self-management interventions in chronic musculoskeletal pain (CMP) offer short-term improvements in physical function and pain intensity while yielding long-term benefits for self-efficacy. These strategies involve diverse skills like problem-solving, decision-making, and self-tailoring, empowering patients to engage actively in their care. Physical therapists, integral to promoting self-management, emphasize active lifestyles, exercise, and address biomechanical, psychosocial, and individual aspects of CMP. Drawing from cognitive-behavioural therapy, shared decision-making, mindfulness, and motivational interviewing, therapists support patients in pain management. By fostering partnerships with healthcare professionals, patients learn to utilize resources effectively. While short-term advantages are limited, long-term gains in self-efficacy are significant. Therapists play a crucial role in imparting skills necessary for sustainable pain management and overall well-being. Through a holistic

approach, integrating various therapeutic modalities, therapists facilitate patients' journeys toward improved health outcomes and enhanced quality of life amidst chronic pain challenges. (8-11)

Evidence-based approaches targeting factors such as self-efficacy, illness beliefs, and pain catastrophizing have shown promising results in improving pain management and overall health outcomes in individuals with chronic pain conditions. By addressing these factors, interventions aim to empower individuals to better cope with their pain and enhance their quality of life. Self-management programs are often at the forefront of such interventions, providing individuals with the tools and skills necessary to effectively manage their pain on a day-to-day basis. These programs typically incorporate elements of cognitive-behavioral therapy, mindfulness techniques, and education about pain physiology to help individuals develop a deeper understanding of their condition and learn strategies for coping with pain flare-ups and setbacks. However, despite the benefits of self-management programs, challenges persist in their implementation and uptake. Biopsychosocial factors such as biographical disturbance (disruption to one's life narrative due to chronic pain), uncertainty about the future, psychological discomfort, and lack of social support can hinder individuals' ability to engage fully in self-management strategies. Facilitators of self-management include acceptance of one's condition, optimism about the possibility of improvement, the use of pain-relieving techniques such as relaxation and imagery, and social support from friends, family, and healthcare professionals. These factors can help individuals overcome barriers to self-management and adopt healthier coping strategies. To address the complexities of chronic pain management, interventions need to be comprehensive, patient-centred, and tailored to the individual needs and circumstances of each person. This may involve conducting thorough assessments of patients' beliefs, attitudes, and coping styles and collaboratively developing treatment plans that take into account their unique strengths and challenges. Furthermore, ongoing support and reinforcement are crucial to sustaining the gains made through self-

management interventions. Healthcare providers play a key role in providing encouragement, guidance, and feedback to individuals as they navigate the ups and downs of living with chronic pain.(12-16)

In conclusion, chronic musculoskeletal pain presents a complex challenge requiring a multifaceted approach that integrates biomedical, psychosocial, and self-management strategies. By embracing a holistic understanding of CMP and employing evidence-based interventions, healthcare professionals can empower patients to effectively manage their pain and lead fulfilling lives despite its presence.

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