

Mindfulness Meditation for Managing Chronic Pain



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SETTINGS AND BACKGROUND

Chronic Pain is defined as a pain that persists for extended periods of time either as an accompaniment to a disease process or following the usual amount of time expected for an injury to heal (Hylands-White et al., 2017). The International Association for the Study of Pain defined chronic pain as that which lasts for longer than 3 months (Hylands-White et al., 2017).

Pain is highly prevalent in older adults, especially those in institutional settings such as nursing homes (Rostad et al., 2018). Pain reduces patient quality of life, preventing many from leading an independent lifestyle (O'Brien et al., 2017).

This project was tailored to the needs of a 116-bed skilled nursing facility located in the state of Maryland. As per the demographics 55% of the total population of this facility was above the age of 65 years.

A wide array of medical diagnosis was observed amongst the residents of this skilled nursing facility such as dementia, stroke, cardiovascular conditions, neurological dysfunctions, musculoskeletal injuries, degenerative disorders, etc. Pain was one of the most common complaints reported by the residents at this skilled nursing facility.

PIO QUESTION

Is mindfulness meditation effective in managing chronic pain in the geriatric population in a skilled nursing facility?

SIGNIFICANCE

Chronic pain acts as a major barrier for clients towards their engagement in meaningful and purposeful activities. Chronic pain may lead to poor/ reduced quality of life in individuals.

Occupational therapists have a unique contribution towards improving the client's participation in activities of daily living and improve quality of life.

Occupational therapists utilize various techniques and interventions for pain management however the use of mindfulness is not commonly seen in skilled nursing facilities despite gaining significant popularity.

This project emphasizes the use of mindfulness techniques by occupational therapists for pain management, it highlights the unique role and contribution of our profession in improving the quality of life of individuals and hopefully reducing the client's dependence on opioid use.

LITERATURE REVIEW

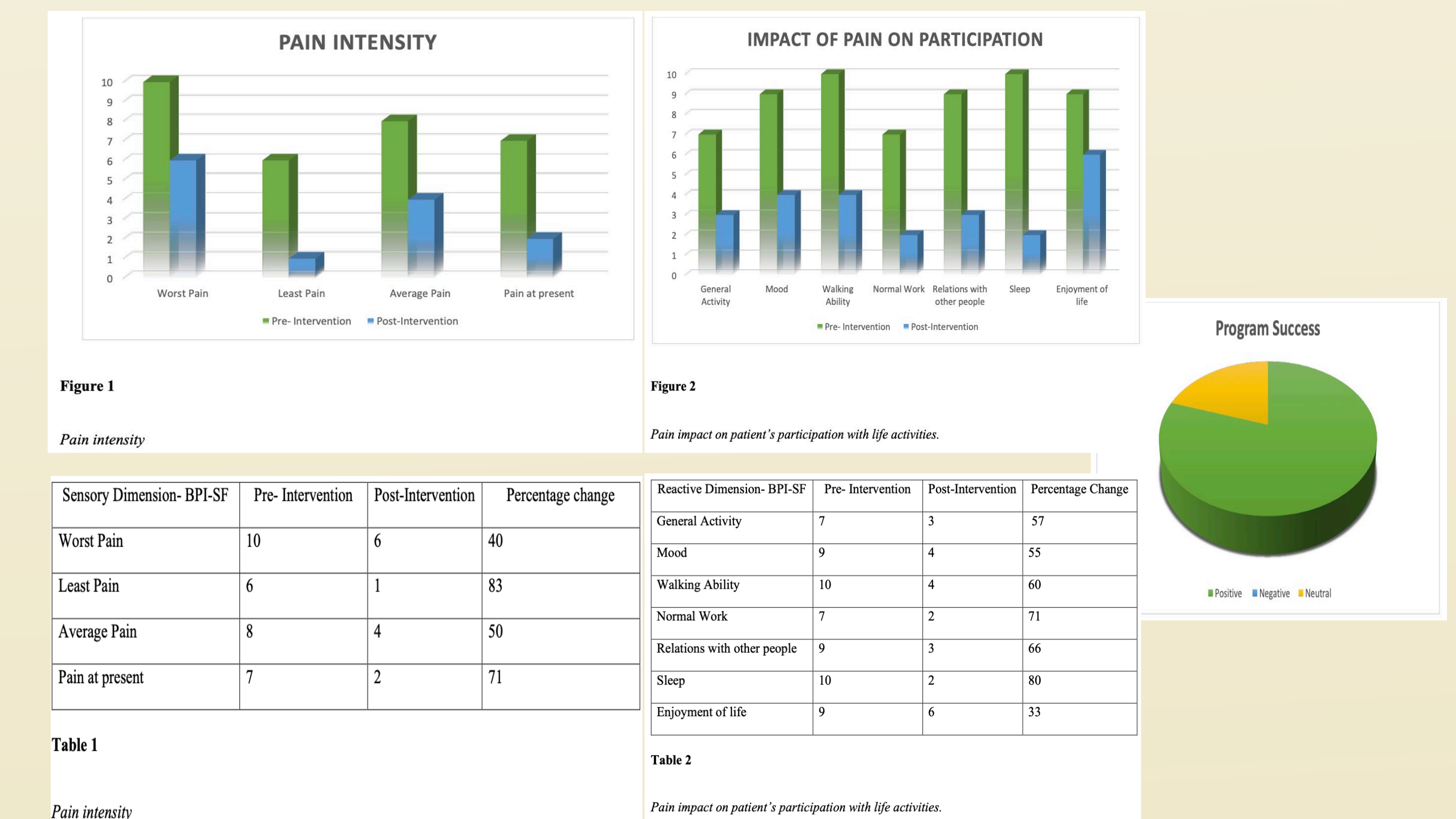
Mindfulness is both the meditative practice, which is an occupation itself, and a means to enhance the experience of occupations (Elliot, 2011). Reid (2011) discussed the theoretical perspectives and empirical research on flow and mindfulness and the relevance of these concepts to occupational engagement. Mindfulness meditation has become an increasingly popular self-management technique for many long-term conditions, including chronic pain (Bawa et al., 2015). Morone et al., (2016) studied the effectiveness of a mind-body program at increasing function and reducing pain in older adults with chronic low back pain. Westenberg et al. (2018) studied the efficacy of using mindfulness in improving the outcomes in the upper extremity patients. Simpson et al., (2018) studied the benefits of mindfulness-based stress reduction in people with multiple sclerosis. Hoge et al., (2017) explains the efficacy of mindfulness meditation training on improving occupational functioning in adults. Hardison & Roll, (2016) suggested that mindfulness interventions are helpful for patients with musculoskeletal and chronic pain disorders and demonstrate trends toward outcome improvements for patients with neurocognitive and neuromotor disorders.

METHODS

The participant participated in a structured mindfulness meditation session facilitated by the occupational therapist for five times a week for two weeks. An audio format of the meditation session using a web-based application called Headspace was utilized. The participant was expected to listen and follow the directions of the narrator and permitted to use the personal wheelchair to maintain a comfortable sitting position. The participant was asked to self-administer the Brief Pain Inventory- Short Form (BPI-SF) on the day prior to the start of intervention and on the day following the last day of intervention. BPI-SF is a self-report or interview measure that assesses severity of pain, impact of pain on daily function, location of pain, pain medications and amount of pain relief in past 24 hours or past week. The BPI-SF has excellent test-retest reliability for pain severity, interference and least pain; excellent internal consistency for intensity scale; excellent internal consistency for interference scale; and moderate construct validity for population with chronic pain. The data analysis was done by comparing the participant's pre-intervention scores on the BPI-SF with that post-intervention. To analyze the success of the proposed project semi-structured interviews with the participant and the respective nursing staff was completed post-intervention. Thematic analysis of the collected data from these interviews was completed for result interpretation.

RESULTS

Table 1 & figure 1 illustrates the sensory dimension scores and graph of pain intensity of the participant using BPI-SF pre-intervention and post-intervention indicating negative percentage change for pain intensity and decline in pain intensity post-intervention. Table 2 & figure 2 illustrates the reactive dimension scores and graph indicating the impact of pain on patient's participation in routine activities of life indicating negative percentage change for pain impact post-intervention. Figure 3 illustrates the program success utilizing the data representation based on the semi-structured interviews of the participant and the nursing staff. The codes that emerged from the data collected from the interviews were categorized into three main categories of responses a) positive b) negative c) neutral. In total there were six positive responses, three neutral responses and none negative responses.



SUMMARY

The project emphasized the use of mindfulness techniques by occupational therapists for pain management. The quantitative results indicate that mindfulness meditation was effective in managing chronic pain in the participant of this project. The qualitative results indicate that the mindfulness meditation program for pain management was successful based on the semi-structured interviews of the participant and the respective nursing staff. The project limitations included a single participant project along with the author's bias towards mindfulness meditation.

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