WRUEP: to stop or continue?

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON20028

Source
NTR

Brief title
Stop-rule management in work related upper extremity pain.

Health condition

EN: Work related upper extremity pain (WRUEP), Chronic pain
NL: RSI, KANS, Chronische pijn

Sponsors and support

Primary sponsor: University Maastricht
Source(s) of monetary or material Support: NWO (VICI)

Intervention

Outcome measures

Primary outcome

- Functional disability (UEFS, DASH)

- Quality of life (SF-36)

- Participation and autonomy (IPA)

Secondary outcome

o Demographic variables (sex, age, education, onset of pain, smoking habits, previous treatments, co-morbidity)

o Stop-rules (HASQ)

o Pain related fear (TSK, PHODA-UE)

o Pain catastrophizing (PCS)

o Mood (PANAS)

o Responsibility (RQ)

o Physical activity in daily life (Actiwatch, PARQ)

o Pain intensity (MPQ-SF)

o Tenacious goal pursuing (TGPS)

Study description

Background summary

Chronic musculoskeletal pain comprises an important problem in health care and society. The fear-avoidance model has been successfully tested in chronic pain patients with avoidance behaviour, but this model appears less applicable in pain disability associated with task persistence and overuse often seen in patients with non-specific Work Related Upper Extremity Pain (WREUP). The aim of the present study is to test a novel integrative model that is based on the “mood as input” paradigm, which may account for both pain responses: task escape/avoidance and task persistence, both within and between individuals. “Mood as input” theory assumes that the informational value of the mood, rather than the mood itself, determines whether participants persist at a certain task. The basic tenet is that escape/avoidance or persistence during a task is a function of the interaction between two relatively independent factors: mood and stop-rule.

Study objective

N/A

Study design

12-2008: start inclusion and treatment (as soon as possible after METC-approval)

4-2009: last inclusions

11-2010: last FU-assessments

Intervention

Stop-rule management (SRM, experimental treatment) and regular rehabilitation (controll treatment)

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Eligibility criteria

Inclusion criteria

1. Non-specific pain or other symptoms in neck, shoulder, elbow, arm, wrist, hand (or combination).

2. The onset or ongoing of pain is related to work, household or other unpaid activities (for eample study or education).
3. Patients experience: . complaints (pain, local tiredness, cramping, tingling or dull feeling) during activities, but decreasing when ending the activity. · complaints (pain, tendon-/muscle irritation, aggravated feeling, insomnia and reduced strength) after work, that decrease during evenings or weekends. · ongoing complaints (pain, swelling, pressure pain, loss of

functional abilities, changes in skin colour, temperature, dull or tingling feeling).

4. Patients have complaints for at least 6 weeks.

5. Patients are aged between 18-65 years old and have an adequate ability to fill in Dutch questionnaires.

Exclusion criteria

1. Specific complaints (biceps tendinitis, bursitis around the elbow, carpal tunnel syndrome, cervical hernia, cubital tunnel syndrome, m. Dupuytren's syndrome, epicondylitis lateralis cubiti, epicondylitis medialis cubiti, frozen shoulder, Guyon's canal syndrome, instability of the shoulder or elbow, labrum glenoidale ruptures, local arthritis (no RA) in an upper extremity joint, Oarsman's wrist, radial tunnel syndrome, Raynaud's phenomena, rotator cuff ruptures, subacromial impingement syndrome (rotator cuff syndrome, tendonitis and bursitis around the shoulder), Complex Regional Pain Syndrome-I, suprascapulair compression, triggerfinger, Quervain's syndrome).

2. Complaints caused by acute trauma.

3. Involvement in a law suit regarding work-disability.

4. Psychopathology, assessed with the Symptom Checklist (SCL-90). Scores on IN-SEN-HOS-PSNEUR should not be "high" or "very high" compared with the norms of the group outpatient psychiatric clients.

Study design

Design

Study type:	Interventional
Intervention model:	Crossover
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL
Recruitment status: Pending

Start date (anticipated):	01-11-2008
Enrollment:	12
Type:	Anticipated

Ethics review

Not applicable
Application type: Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL1456
NTR-old	NTR1517
Other	: METC 08-3-071
ISRCTN	ISRCTN wordt niet meer aangevraagd

Study results

Summary results
N/A