

# Effect of a cognitive behavioral intervention with or without a Functional Capacity Evaluation on work ability in patients with musculoskeletal pain.

No registrations found.

<b>Ethical review</b>	Not applicable
<b>Status</b>	Pending
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON22460

### Source

NTR

### Brief title

Workability

### Health condition

chronic pain, Functional Capacity Evaluation, Cognitive behavioral intervention, work ability  
chronische pijn, Functionele Capaciteit Evaluatie, Cognitieve gedragsmatige interventie, werkvermogen

## Sponsors and support

**Primary sponsor:** Condite

**Source(s) of monetary or material Support:** fund = initiator = sponsor

## Intervention

## Outcome measures

### Primary outcome

Work ability measured with the Work Ability Index.

## **Secondary outcome**

Quality of life measured with the RAND and self efficacy measured with the Pain SE Questionnaire.

# **Study description**

## **Background summary**

Rationale:

Chronic nonspecific musculoskeletal pain (CMP) can lead to prolonged absence of work and thereby high costs related to work absenteeism and treatment. Cognitive behavioural interventions have demonstrated effectiveness for improvement of work ability. Addition of a Functional Capacity Evaluation (FCE) to a cognitive behavioral intervention can further improve work ability.

Objective:

To measure whether adding a FCE to a cognitive behavioral intervention will improve work ability, quality of life and self efficacy.

Study design:

Randomized controlled trial.

Study population:

Patients with CMP with decreased work ability.

Intervention:

The intervention consist of six treatment sessions of 45 minutes in 16 weeks time. The patient receives instructions and assignments about how to handle the pain more

adequately. Attention will be paid to the principles of chronic pain, improvement of health behaviour, and graded activity to improve the activity level. The program will be given by a physiotherapist or a psychologist and is specifically aimed at individual treatment goals. In the experimental group the treatment program will be extended with and based on a FCE which consist of a maximum of seven work- and complaints related physical tests.

Main study parameters/endpoints:

Work ability measured with the Work Ability Index.

Nature and extent of the burden and risks associated with participation, benefit and group relatedness:

The risk of the study is negligible. All test are considered safe for the patients and with a low burden.

### **Study objective**

The addition of a Functional Capacity Evaluation to a cognitive behavioral intervention will improve work ability, quality of life and self efficacy.

### **Study design**

At the beginning and end of the intervention period.

### **Intervention**

The regular intervention consist of six treatment sessions of 45 minutes in 16 weeks time. The patient receives instructions and assignments about how to handle the pain more adequately. Attention will be paid to the principles of chronic pain, improvement of health behaviour, and graded activity to improve the activity level. The program will be given by a physiotherapist or a psychologist and is specifically aimed at individual treatment goals.

In the experimental group the treatment program will be extended with and based on a FCE which consist of a maximum of seven work- and complaints related physical tests. The tests takes two hours two complete.

## **Contacts**

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## **Eligibility criteria**

### **Inclusion criteria**

1. Patients with chronic nonspecific musculoskeletal pain;
2. Pain persists for three months or longer;
3. Work absenteeism of six weeks or longer;
4. Age between 18 and 60 years;
5. Referral for treatment by insurance or work physician.

### **Exclusion criteria**

1. Insufficient knowledge of the Dutch language;
2. Medical co-morbidity with significant influence on work ability, like hernias or diagnosed psychiatric illness.

## **Study design**

### **Design**

Study type: Interventional

Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

## Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-02-2012
Enrollment:	70
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	NL2975
NTR-old	NTR3122
Other	ABR : 38523
ISRCTN	ISRCTN wordt niet meer aangevraagd.

# Study results

## Summary results

N/A