

# Experienced disability of the activity level of chronic low back pain patients: the role of self-discrepancies.

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The main objective of this study is to find an answer to the question: " What is the role of self-discrepancies in patients with chronic low back pain and more specifically, in their activity level?" The answer to this question offers more...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Muscle disorders
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON30173

### Source

ToetsingOnline

### Brief title

Self-discrepancies and low back pain

### Condition

- Muscle disorders

### Synonym

Chronic low back pain

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Universiteit Maastricht

**Source(s) of monetary or material Support:** Zon-MW

## Intervention

**Keyword:** Activity level, Chronic low back pain, Disability, Self-discrepancies

## Outcome measures

### Primary outcome

disability and quality of life

### Secondary outcome

pain intensity, emotions, the daily activity level

## Study description

### Background summary

Patients with chronic low back pain often avoid activities. The fear-avoidance model offers an adequate explanation for this behavior. However, out of clinical observations and recent research findings it has appeared that there is also a group of patients who tend to persist in activities rather than to avoid activities. The fear-avoidance model cannot offer an explanation for this type of behavior. The self-discrepancy theory of Higgins is a good candidate for explaining avoidance and persistence and can therefore be an essential addition to the fear-avoidance model. Higgins divides the self into the actual self, the person you are now, the ideal self, the person you ideally would like to be and the ought self, the person you think you ought to be. Actual-ideal discrepancies lead to dejection-related emotions whereas actual-ought discrepancies lead to agitation-related emotions. Later, Carver and colleagues added the feared self, the self you fear to be.

We hypothesise that patients with large ideal or ought discrepancies tend to persist in activities whereas patients with small feared discrepancies, who are close to their feared self, tend to avoid activities. Considering the ideal discrepancy, the eagerness to approach a goal will be most important. The ought discrepancy will be more involved with a vigilance towards not living up to expectations. The feared discrepancy may be nourished by catastrophizing thoughts and may elicit a process that is comparable to the processes described within the fear-avoidance model.

### Study objective

The main objective of this study is to find an answer to the question: "What is the role of self-discrepancies in patients with chronic low back pain and

more specifically, in their activity level?" The answer to this question offers more insight to the psychological processes in the chronification of pain. This offers new perspectives on the prevention and treatment of chronic low back pain.

The research questions of this study are:

1. What is the relationship between specific self-discrepancies and specific negative emotions in patients with chronic low back pain?
2. What is the relationship between self-discrepancies on the one hand and an avoidant and persistent activity pattern on the other hand and what influence do these behaviours have on the perceived disability and quality of life.
3. What is the relationship between self-discrepancies, pain intensity and the physical activity pattern (avoidance or persistence)?
4. What is the relationship between the activity level the patient reports and the objective measured activity level in patients with chronic low back pain.

## **Study design**

A longitudinal follow-up study will be started with two measurement moments, baseline (t=1) and six months follow-up (t=2). At every measurement moment several questionnaires and an interview are assessed. Patients also get an accelerometer and a electronic diary for a registration period of 15 days.

## **Study burden and risks**

A total of 17 questionnaires will be assessed (including the interview) which will take 120 minutes to complete. Patients are asked to fill in these questionnaires two times, at baseline and six months later. Furthermore, patients are asked to register an electronic diary (palmtop) and wear an accelerometer around their waste during two weeks. Registering the diary and taking on and off the accelerometer will take around 15 minutes a day.

## **Contacts**

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

Recurrent low back pain, pain localised below the scapulae and above the gluteal folds (following IASP taxonomy). Age between 18 and 60 years.

### Exclusion criteria

Specific cause or strong suspicion of a specific cause, such as lumbar disc herniation with neurological complications, major structural back abnormality, evidence of inflammatory, systemic or neoplastic disease, pregnancy, major psychiatric illness or insufficient knowledge of the Dutch language.

## Study design

### Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

## Recruitment

NL  
Recruitment status: Recruitment stopped  
Start date (anticipated): 01-09-2006  
Enrollment: 120  
Type: Actual

## Ethics review

Approved WMO  
Date: 20-07-2006  
Application type: First submission  
Review commission: METC academisch ziekenhuis Maastricht/Universiteit Maastricht, METC azM/UM (Maastricht)

## 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
CCMO	NL12253.068.06