Cognitive group therapy in the treatment of catastrophizing in patients with chronic non-cancer musculoskeletal pain

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The objective of the study is to gain more understanding of the effectivity of cognitive therapy, specifically aimed at the treatment of pain catastrophizing in (chronic) pain.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON30827

Source
ToetsingOnline

Brief title
Cognitive grouptherapy for catastrophizing in chronic non-cancer pain

Condition

- Other condition

Synonym
chronic musculoskeletal pain

Health condition

chronische niet-oncologische musculoskeletale pijn

Research involving
Human

Sponsors and support

Primary sponsor: Academisch Ziekenhuis Maastricht
Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Catastrophizing, Chronic pain, Cognitive, Group therapy

Outcome measures

Primary outcome

The primary study parameters/outcome measures of the study are the level of

pain catastrophizing, fear of pain, the level of disability, and pain intensity

after treatment in relation to the baseline.

Secondary outcome

Not applicable

Study description

Background summary

Today, there are numorous studies in which the important role of pain catastrophizing in relation to various pain-related problems such as pain intensity, depression, and disability is demonstrated (for an extensive review see Sullivan et al., 2001). Given this relationship, pain catastrophizing seems an important starting point in the treatment of chronic pain. Pain catastrophizing is about an extremely negative way of thinking about pain and its possible consequences in which threat and fear of pain are important ingredients. Not surprisingly therefore, pain catastrophizing is closely related to fearful cognitions about pain. Given this cognitive nature of pain catastrophizing, it is obvious to use the principles of cognitive therapy in its treatment. In a meta-analysis of rct's of cognitive behavior therapy for chronic pain, Morley et al. (1999) found that treatments based on the principles of cognitive behavior therapy were effective compared to waiting list conditions. Also, there are two studies that showed that patients with chronic low back pain treated with cognitive behavior therapy improved on a number of outcome measures (such as disability, pain intensity, depression and pain behavior). Moreover, this improvement was mediated by a reduction in pain

catastrophizing (Smeets et al., 2006; Spinhoven et al., 2004). Remarkably, the level of pain catastrophizing decreased in various treatment conditions and by using different techniques, even though none of these techniques were specifically targeted at the reduction of catastrophizing (Smeets et al., 2006; Spinhoven et al., 2004).
In this study we want to examine whether a treatment specifically aimed at reducing pain catastrophizing is effective in treating patients with chronic pain who catastrophize highly about their pain. In this respect the study fits with the idea that treatments for chronic pain may be improved by tailoring them to the specific characteristics and needs of the patient (in this case patiets who catastrophize highly about their pain).
We hypothesize that, compared to a baseline period, the treatment period will involve a reduction in the level of pain catastrophizing, fear of pain, and level of disability.

Study objective

The objective of the study is to gain more understanding of the effectivity of cognitive therapy, specifically aimed at the treatment of pain catastrophizing in (chronic) pain.

Study design

The study design is a so-called 'replicated single-case experimental design'. It consists of a baseline period lasting two weeks, followed by a treatment period of eight weeks (Onghena & Edgington, 2005).

- Onghena, P., & Edgington, E. S. (2005). Customization of pain treatments: single-case design and analysis. Clinical Journal of Pain, 21(1), 56-68; discussion 69-72.

Intervention

The intervention consists of a cognitive grouptherapy of eight weekly sessions of one and a half hour each.

Study burden and risks

Participation holds no specific risks for the participants. The burden for the participants consists of eight 90-minutes sessions of grouptherapy, the completion of 4 questionnaires on 4 different occasions during the study (catastrophizing, fear of pain, disability, and pain), and keeping a diary during the course of the study (63 days). The latter consists of 13 VAS-scales concerning catastrophizing, fear of pain, disability, and pain. The estimated total time load is approximately 22 hours.

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

18 and older, chronic non-cancer musculoskeletal pain, informed consent, a high level of catastrophizing (a PCS score > 31), no more other medical treatment options

Exclusion criteria

- not able to speak, read and write Dutch
- the presence of an anxiety and/or a mood disorder

Study design

Design

Study type: Interventional

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	01-08-2007
Enrollment:	6
Type:	Anticipated

Ethics review

Approved WMO

Date:	29-10-2007
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	NL17912.068.07