

Evaluation of a multidisciplinary cognitive behavioural programme for coping with chronic neuropathic pain following spinal cord injury.

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A multidisciplinary cognitive behavioural programme for coping with chronic neuropathic pain following spinal cord injury has a positive effect on pain intensity and pain related disability.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON27517

Bron

NTR

Verkorte titel

CONECSI (COping with NEuropathic Spinal cord Injury pain)

Aandoening

multidisciplinary
behavioural program
coping
chronic neuropathic pain
spinal cord injury

multidisciplinair
gedragsinterventie
chronische neuropathische pijn
dwarslaesie

Ondersteuning

Primaire sponsor: Rehabilitation Centre De Hoogstraat, Utrecht, The Netherlands

Overige ondersteuning: This study was performed within DALI for PAIN, a national program that focuses on neuropathic paincare optimisation. DALI for PAIN is an initiative of Pfizer. This project is supported by an unrestricted grant from Pfizer.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Pain intensity and pain related disability:
Chronic Pain Grade questionnaire (CPG)
at t1, t2, t3, t4, and t5.

Toelichting onderzoek

Achtergrond van het onderzoek

Background:

The effective treatment of pain following spinal cord is difficult. Particularly in regards to neuropathic spinal cord injury pain, there are no treatments that produce satisfactory pain relief in most people. Therefore, psychosocial factors in the maintenance and aggravation of chronic pain following spinal cord injury have been considered.

Objective:

To evaluate a multidisciplinary cognitive behavioural programme for coping with chronic neuropathic pain following spinal cord injury.

Study design:

A multi-centre, randomised intervention study with a waiting list control group. Care as usual will continue, but patients will be requested to hold pain medication and other pain treatments constant during the intervention period (3 months). A maximum of 80 persons will be included (four intervention groups of 10 persons and four control groups of 10 persons).

Study population:

Patients visiting the outpatient departments of rehabilitation centre De Hoogstraat (Utrecht), Rijndam (Rotterdam), Het Roessingh (Enschede), and Adelante zorggroep (Hoensbroek) will be invited to participate.

Study parameters:

Demographic (e.g., age and gender), disease and pain characteristics (e.g., type of SCI), pain treatment, and functional independence (Barthel Index) will be registered at the baseline measurement. The participants complete a questionnaire on satisfaction with the programme immediately after completion of the programme at 3 months. Measures of primary and secondary outcomes, and pain treatment will be administered at all measurements. Psychological variables will be administered at t1, t2, t3, and t5.

Doel van het onderzoek

A multidisciplinary cognitive behavioural programme for coping with chronic neuropathic pain following spinal cord injury has a positive effect on pain intensity and pain related disability.

Onderzoeksopzet

t1 (start intervention)

t2 (end intervention)

t3 (3 months follow-up)

t4 (6 months follow-up)

t5:(9 months follow-up)

Onderzoeksproduct en/of interventie

The multidisciplinary programme, comprising educational, cognitive, and behavioural interventions for coping with chronic neuropathic pain following spinal cord injury, consists of ten sessions of 3 hours over a 10-week period and a comeback session three weeks later. Each meeting will be supervised by a psychologist and physical therapist assisted by guest speakers and a role model in three sessions. The intervention is directed at knowledge about chronic neuropathic pain, modifying passive coping, negative illness cognitions and feelings of depression and hopelessness, at relaxation and attention-distraction techniques and at stimulating an active lifestyle.

Elements of the intervention are:

1. provision of information;
2. guided group discussions;
3. exercises and sport workshops;
4. homework.

Contactpersonen

Publiek

Rembrandtkade 10
M. Heutink
Utrecht 3583 TM
The Netherlands
+31 (0)30-2561211

Wetenschappelijk

Rembrandtkade 10
M. Heutink
Utrecht 3583 TM
The Netherlands
+31 (0)30-2561211

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Spinal cord injury;
2. at least 18 years old;
3. at least one year and at most ten years after discharge from first inpatient spinal cord injury rehabilitation;
4. informed consent;
5. main type of pain is neuropathic pain;

6. duration of neuropathic pain is at least six months;
7. pain intensity score at least 40 on the Chronic Pain Grade last week;

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Spinal cord injury by metastatic tumour;
2. former cognitive behavioural therapy for coping;
3. inability to function in a group by major language problems or psychopathology;
4. insufficient mastery of the Dutch. language

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-01-2009
Aantal proefpersonen:	60
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	11-12-2008

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL1509
NTR-old	NTR1580
Ander register	08-152/E METC : 007-04 Pfizer/DALI voor PIJN
ISRCTN	ISRCTN wordt niet meer aangevraagd

Resultaten

Samenvatting resultaten

Heutink M, Post MWM, Luthart P, Pfennings LEMA, Dijkstra CA, Lindeman E. A multidisciplinary cognitive behavioural programme for coping with chronic neuropathic pain following spinal cord injury: the protocol of the CONECSI trial. BMC Neurology 2010;10:96 (doi:10.1186/1471-2377-10-96).

Heutink M, Post MWM, Bongers-Janssen HMH, Dijkstra CA, Snoek GJ, Spijkerman DCM, Lindeman E. The CONECSI trial: A randomized controlled trial of a multidisciplinary cognitive behavioral program for coping with chronic neuropathic pain following spinal cord injury. Pain 2012;153(1):120-8.