WIP-0495 COMBINING EXERCISE WITH EDUCATION BASED ON TRANSFORMATIVE LEARNING PRINCIPLES IN FIBROMYALGIA PATIENTS: A CASE SERIES
C. Caerio, R. Fernandes, E. Cruz, A. Valverde, S. Rodrigues
Physiotherapy, Health School, Polytechnic Institute of Setubal, Setubal, Portugal

Objectives: Research has suggested that exercise is effective in addressing pain, fatigue and function in fibromyalgia. Education has also been recommended; however there is little information concerning the type of educational approach that should be adopted to address mal-adaptive cognitions that seem to impact pain and function. This study aims to describe the pragmatic use and effects of combining exercise with an educational approach based on the transformative learning theory in fibromyalgia patients.

Methods: A case series design was carried out on 11 fibromyalgia patients, referred to physiotherapy. The patients (screened for inclusion/exclusion criteria) underwent an 8-week (3 times weekly) standardised programme of exercise and education. The educational component (45–60 minutes) preceded 9 of the 24 exercise sessions of equal duration. Patients were assessed at baseline, 4 and 8 weeks later. Outcome measures included the Numeric Pain Scale, the Revised Fibromyalgia Impact Questionnaire, the Fatigue Severity Scale and the Patient Global Impression Scale.

Results: The 11 patients (females; 49.5 ± 9.9 years; ≥24 months of fibromyalgia) attended an average of 18.4 ± 3.4 (mode = 22) sessions. Of the 11 patients, 9 improved function, 7 decreased pain intensity, 7 decreased fatigue severity and 9 reported being “better” or “much better” in at least one of the outcomes (pain/fatigue/function).

Conclusion: These results support a combination of exercise with an educational approach based on the principles of transformative learning theory for fibromyalgia patients. This methodological approach limits cause-effect relations, reinforcing the need for further research.

WIP-0452 LOOKING FOR CHRONIC NECK PAIN RESPONDERS TO PHYSICAL THERAPY MULTIMODAL TREATMENT
S.T. Duarte¹, E.B. Cruz², R.N. Fernandes³, M.F. Carnide³
¹Physiotherapy, Medicine and Rehabilitation Center of Alcoitão, Lisbon, ²Physiotherapy, School of Health Care – Polytechnic Institute of Setubal, Setubal, ³CIPEF-LBMF, Faculty of Human Motricity – Technical University of Lisbon, Lisbon

Objectives: This study aimed to identify predictors of short-term functional recovery in chronic neck pain (CNP) patients undergoing a multimodal physical therapy (PT) treatment.

Methods: A prospective cohort study with 112 CNP patients referred to PT treatment. Patients were assessed at baseline and 7-weeks after starting a multimodal PT treatment. Sociodemographic and clinical characteristics at baseline were included as potential outcome predictors. Based on a previous study, functional recovery was defined as a change in the Neck Disability Index of ≥6 (minimal clinically important difference). Logistic regression (backward conditional) was used to find associations between predictors and functional recovery (p < 0.05). The multivariate model was submitted to a clusters analysis, highlighting the post-test probability of functional recovery after treatment.

Results: Of the 112 participants enrolled, 108 completed the follow-up (mean age: 51.76 ± 10.19); 58 patients reported functional recovery, and 50, treatment failure (pre-test probability: 54%). In the multivariate model, functional recovery was associated with high levels of disability at baseline (OR = 1.123; 95% CI 1.056–1.194) and pain duration for less than 12 months (OR = 2.704; 95% CI 1.138–6.424). For a positive likelihood ratio of 3.57, the probability of obtaining functional recovery increases from 54 to 81% in the presence of these two predictors at baseline.

Conclusion: CNP patients with a score higher than 19 on NDIs-PT and with pain complaints for less than 12 months at baseline are more likely to benefit from a multimodal PT treatment to achieve functional recovery.

WIP-0273 SELF-RATING OF PHYSICAL CONDITION (QUESTIONNAIRE) COMPARED TO MOTOR ASSESSMENT IN PERSONS WITH CHRONIC PAIN TO PROVIDE OBJEKTIVE EVIDENCE FOR DECONDITIONING
A. Prilet, A. Ljutow
Swiss Paraplegic-Centre, Centre for Pain Medicine, Nottwil, Switzerland

Objectives: Chronic musculoskeletal pain is presented in a large percentage of persons with chronic pain. In daily routine, there are no standardised diagnostic tools in use to address the state of physical condition or fitness of these pain patients. As we know, fear avoidance behaviour and deconditioning are connected in a vicious circle. Deconditioning is a clinical reality and plays a major role as an obstacle to successful pain reduction. It is in fact astonishing, that this factor is seldom evaluated in a standardised way. The purpose is to provide evidence for deconditioning in persons with chronic pain.

Methods: We introduced a questionnaire for self-rating of physical fitness (FFB-Mot) into our daily routine. Patients with signs of deconditioning in clinical assessment or in the questionnaire were referred to physiotherapist or sports therapist, who performed a standardised motor assessment (Rickli 2002).

Results: The results of self-rating and clinical assessment of physical condition are presented in comparison. The correlation between those data and pain parameters as chronicity of pain or impairment due to pain are analysed. Data collection will be completed in march 2014.

Conclusion: The value of a self-rating questionnaire to screen persons with chronic pain for deconditioning as a risk factor for pain persistence is evaluated. Furthermore the importance of standardised tools, either questionnaires or clinical exams, is emphasised.

WIP-0454 EFFECTIVENESS OF PAIN NEUROPHYSIOLOGY EDUCATION AND AQUATIC EXERCISE PROGRAM COMPARED TO AQUATIC EXERCISE PROGRAM ALONE FOR INDIVIDUALS WITH CHRONIC LOW BACK PAIN
D. Pires¹, C. Caerio², E.B. Cruz²
¹Physiotherapy, Escola Superior de Saude Dr. Lopes Dias – Instituto Politécnico de Castelo Branco, Castelo Branco, ²Physiotherapy, Escola Superior de Saude – Instituto Politécnico de Setúbal, Setúbal, Portugal

Objectives: The aim of this single-blinded randomized controlled trial was to investigate the effects of a 6-week program of aquatic exercise and two sessions of pain neurophysiology education (experimental group) compared to aquatic exercise program alone (control group) in individuals with Chronic Low Back Pain (CLBP).

Methods: Sixty two individuals with CLBP were randomly distributed in the experimental group (n = 30) and in the control group (n = 32). Outcome measures included pain intensity (Visual Analogue Scale), functional disability (Quebec Back Pain Disability Scale) and fear of movement (Tampa Scale of Kinesiophobia). Participants were assessed before the intervention, three weeks after the start of the aquatic exercise program, at the end of the intervention and 3 months follow-up.

Results: Significant improvements were found at the end of the intervention in both groups in what intensity of pain and
The results show that the aquatic exercise program and pain neurophysiology education were more effective in improving pain intensity at a short and medium term than aquatic exercise alone. This study demonstrates that pain neurophysiology education can optimize results when combined with other active interventions such as aquatic exercise.

WIP-0211 SEXUAL TRAUMA IN CHRONIC PELVIC PAIN
A.F. Plante
Chronic Pelvic Pain Clinic, Royal Women’s Hospital, Melbourne, Australia

Objectives: This review aims to alert health practitioners dealing with female adolescents with pelvic pain, remind them of its complexity, especially in relation to underlying trauma. Research showed that there is high prevalence of sexual trauma in early adolescent female. Most of that happened before the age of 17 and had significant impact in their health outcomes. Methods: History of Adolescent or Child sexual abuse and related health conditions: Research clearly demonstrates that abuse adversely impact survivors’ psychological functioning (Hedtke et al., 2008), including elevated anxiety, depression, and fear (Elliott, Mok, & Briere, 2004) and deflated self-esteem and sexual satisfaction (van Berlo & Ensink, 2000).

Sexual abuse before age 15 and later chronic pelvic pain are significantly associated (Lampe et al. 2000). There is an increased risk of presenting pelvic inflammatory disease in adolescents whom have been sexually abused. In women presenting with premenstrual syndrome, prevalence of sexual abuse before age 17 and had significant impact in their health outcomes. Most of that happened before the age of 17 and had significant impact in their health outcomes. Most of that happened before the age of 17 and had significant impact in their health outcomes.

Conclusion: Clinicians must base practice on an understanding of the relationships among the forms and severity of abuse and chronic pain.

Treatment Approaches: Psychosocial and Cognitive

WIP-0463 MAKING A COMPARISON BETWEEN CREATIVITY IN RIGHT-LEFT BRAIN DOMINANCES
N. Alizadeh, F. Nahavie Alegha, H. Ebahimi Maghadam
Department of Psychology, Rudehen Branch of Azad University, Tehran, Iran

Objectives: The exclusive performance of brain hemispheres is the main factor of being right-left brain dominances. A one aspect of thinking is oriented action for problem solving which describes creativity. The purpose of this study is to make comparison between creativity in right-left brain dominances. Methods: Two questionnaire were used: Abedi creativity test and wagner and velz right-left laterality test. For sample size Cochran formula and for population, multiple random sampling were applied.

Results: Reg. to creativity statistics provide with 99% of certainty that there is a difference between two groups of right-left brain dominances.

Conclusion: Result indicate that there is significant differences between two groups. On the other word the mean of scores in right brain dominances are higher than the mean scores of left ones.

WIP-0235 PAIN GRADUATES CULTIVATED FROM PATIENT SUPPORT GROUPS ENHANCING HEALTH CARE PRACTITIONERS WORK
C. Du Toit1, J. Bornman2, C. van Belkum2
1Medical affairs, Janssen Pharmaceutical, Johannesburg,
2Department of Nursing, Tshwane University of Technology, Pretoria, South Africa

Objectives: Study aimed to develop a lifestyle adaptation programme enhancing the quality of life of patients diagnosed with chronic pain, what the people think or know. Specific objectives formulated:

- Explore the needs and experiences of patients and family during management phase after original diagnosis
- Compare concepts gathered from above info with national and international literature
- Develop a programme assisting patients and their families with lifestyle adaptation once diagnosed with chronic pain.

Methods: The research design chosen was a qualitative design, with an exploratory, descriptive strategy within a phenomenological framework. Naive sketches gathering data: qualitative nature of the study

Self-report technique

Open ended question “Describe which anxieties, uncertainties and new demands did you personally experience after the diagnosis”

Results:

Number sketches distributed: 60
Sketches returned: 43
Number analysed until saturation:30

Results derived from data analysed summarised as follows

<table>
<thead>
<tr>
<th>Main theme</th>
<th>Categories</th>
<th>Subcategories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxieties</td>
<td>Psychological</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Surgery</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dying</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Scared</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Uncertainty</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Depression</td>
<td></td>
</tr>
<tr>
<td></td>
<td>and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>frustration</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Change and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>adapt</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Act normal</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Return to work</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The bills</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Finances)</td>
<td></td>
</tr>
<tr>
<td>New demands</td>
<td>Physical</td>
<td></td>
</tr>
<tr>
<td>Psychosocial</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pain</td>
<td></td>
</tr>
</tbody>
</table>

Diet
To keep fit
Poor strength
Insomnia
Medication
Caregiver responsibility (Role change between spouses)

Conclusion:
The study resulted in the development of a twofold lifestyle programme within support groups developing graduates
Education, counselling and training assisting to understand the diagnosis management
Multimodal team approach enhancing patients quality of life