A randomized controlled trial of health coaching for Veterans with chronic pain: Study protocol

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Abstract

Background. Chronic pain is a particularly debilitating source of disability found to disrupt and decrease overall quality of life. Pain predominant chronic multisymptom illness (Pain-CMI; e.g., chronic widespread pain) is a treatment resistant chronic pain condition which is common among combat Veterans. Current practice guidelines recommend non-pharmacological treatments for Pain-CMI. However, no one treatment is, or is likely to be, acceptable and efficacious for all patients. Evidence suggests offering multiple non-pharmacological approaches increases uptake. Health coaching is an appealing choice because it is widely available in the Veterans Affairs and we have found it to be generally acceptable to Veterans with Pain-CMI. What is not known is if health coaching is efficacious for Pain-CMI.

Objectives. To describe the study protocol of a clinical trial seeking to determine the efficacy of health coaching to reduce the disability and pain impairment of Pain-CMI for Veterans.

Methods. Data will be collected from 250 Veterans with Pain-CMI. The randomized controlled trial will have two arms: remote-delivered health coaching versus remote-delivered supportive psychotherapy. The health coaching intervention will consist of 12 weekly tele-health health coaching sessions which aim to assist the Veterans in developing and maintaining health behaviors that meet their personal life goals. A major aim of this intervention is behavior change and development of long-term health habits. The control condition will be remote-delivered supportive psychotherapy focused on non-directive and supportive discussion of weekly stressors. Veterans will complete four assessments: Baseline assessment following screening, 6-week mid-treatment assessment, 12-week post-treatment assessment, and 24-week follow-up assessment.

Discussion. This study will test the efficacy of health coaching in reducing the disability and pain impairment from Pain-CMI. The health coaching intervention is designed to be administered remotely by supervised non-licensed mental health trainees and may provide a more accessible, patient-centered intervention that is acceptable to Veterans. We will discuss limitations and initial recruitment efforts.

References

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