Self-management behaviour after a physiotherapist guided blended self-management intervention in patients with chronic low back pain
a qualitative study

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Introduction
Self-management support is considered an important component in the physiotherapeutic treatment of people with chronic low back pain (1-3). Nowadays, more apps come available to support patients in self-management alongside their physiotherapy, so called blended care. Little is known about patients’ perspectives on their self-management behaviour after a blended self-management intervention.

Methods
Participants from the Exercise Low Back Pain trial (4) Semi-structured Interviews Respondent validation
Two independent coders Data triangulation Hybrid deductive and inductive analysis

Results
Aim
To gain an in-depth understanding of the self-management behaviour after a physiotherapist guided blended self-management intervention in people with chronic low back pain.

The blended care intervention e-Exercise Low Back pain:

➢ 12 interviews (male: n=7, female n=5)
➢ Mean age participants 54.1 years (range 23 – 83).
➢ 71.4% of the participants were experiencing low back pain at the time of the interviews.
➢ Participants completed the e-Exercise low back pain program on average 18.8 months ago.

All themes, extracted from the data, contributed to the way participants dealt with their low back pain. Since the themes describe the overarching self-management behaviour, they cannot be seen separate from each other. The majority of the participants seemed to show adequate self-management behaviour when experiencing low back pain, however the motivation to maintain this behaviour diminishes in pain free periods.

Self-management behaviour was clustered within the following six interrelated themes:

• Illness beliefs
• Coping
• Cognitions
• Social support and resource utilization
• Physiotherapeutic involvement
• Motivation

Conclusion
• Most participants first try to gain control over their low back pain themselves before contacting the physiotherapist when experiencing a relapse.
• Participants struggle in continuing their healthy behaviour in pain free periods in between relapses of low back pain.
• Physiotherapists are recommended to enhance structural behaviour change.
• Since participants experience a lack of social support, this should be facilitated in future by, for example, the physiotherapist or functionalities in the app.

References

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