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A systematic review of outcome measures utilised to measure the change in self-management in clinical trials in non-cancer chronic pain

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Background: There is lack of clarity and consistency in assessing the outcomes of self-management support programmes. Measures used often focus on particular constructs or behaviours such as pain, functional disability or self-efficacy.

Aim: Appraise and synthesise the evidence on outcome measures utilised to measure the effectiveness of self-management intervention in patients with non-cancer non-episodic chronic pain.

Methods: Medline, Embase, CINAHL, PsycINFO, the Cochrane Library and Google Scholar were searched in March 2015 (updated in February 2016). Included full text primary research reports of randomised or nonrandomised controlled trials, using SM outcome measure to examine effectiveness of nonsurgical interventions in adult participants. Study selection and risk of bias assessment was performed by two independent reviewers. Cochrane Handbook, the Cochrane Back Review Group and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines were followed.

Results: 2381 records were identified. 27 studies were included (24 in original 2015 search, further 4 in updated 2016 search). All were RCTs including 30-812 patients with chronic pain conditions including hip/knee osteoarthritis, rheumatoid arthritis, chronic low back pain, fibromyalgia and chronic fatigue syndrome. Most included studies had low risk of bias with the exception of blinding. 14 different validated measures were used in measuring SM and its change.

Conclusions: This systematic review presents the range of scales available for assessing change in SM in non-cancer chronic pain. Multi-construct scales are recommended for assessing SM alongside traditional pain and disability scales in chronic pain research and clinical practice.