INFLUENCE OF DOMESTIC VIOLENCE, CHILDHOOD ABUSE AND SOCIAL SUPPORT ON RESPONSE TO A MULTIDISCIPLINARY INTERVENTION FOR SELF-MANAGEMENT OF CHRONIC PAIN

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BACKGROUND

Group interdisciplinary intervention aimed to self-management of pain is a good therapeutic strategy to fibromyalgia (FM) treatment; however, the response to this kind of treatment is heterogeneous. A variable that could explain this difference is the presence of trauma throughout life, a factor that is known to have a significant relationship with chronic pain. The aim of the present study was to evaluate the influence of domestic violence, childhood abuse and social support on the therapeutic response to an interdisciplinary intervention for self- management of chronic pain in FM patients.

METHODS

Longitudinal observational study including woman with FM who participated of 70% of the meetings of a multidisciplinary intervention for self-management of chronic pain. One year after the end of the intervention, the patients answered validated questionnaires about social support, domestic violence and childhood abuse. Patients were considered responders if the percentage change in the revised fibromyalgia impact questionnaire (FIQR) score and the physical and mental components of the 12-item short-form health survey (SF-12) was greater than or equal to 14% in relation to baseline scores. In addition, clinical and demographic variables were evaluated as predictors of response. Approval research ethics committee: No. 4.073.740-06/06/2020.

RESULTS

Thirty-one patients were evaluated. When physical health was used as the response parameter, worse preintervention physical health ($p = 0.019$) was related to the response after one year. When mental health was used as a criterion, worse preintervention mental health ($p < 0.001$), higher overall levels of domestic violence ($p = 0.026$), emotional violence ($p = 0.030$) and physical violence ($p = 0.048$) were predictors of response one year after the end of the intervention. When the impact on quality of life was used as an outcome, lower preintervention pain intensity ($p = 0.031$) was a predictor of response. Childhood abuse and social support were not prognostic factors.

CONCLUSION

Lower pain intensity, worse physical and mental health and higher overall levels of domestic violence, emotional violence and physical violence were predictors of response after one year of follow-up. On the other hand, childhood abuse and social support were not prognostic factors.

KEYWORDS

Fibromyalgia, Self-management, Domestic violence.