

The importance of the clinician-patient interaction on outcomes in musculoskeletal pain: a systematic review

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- Numerous treatments for musculoskeletal pain produce similar outcomes (Miciak et al 2012)
- Possibly due to: (Miciak et al 2012)
 1. Treatments targeting different specific factors
 2. Non-specific factors such as clinician-patient interaction
- It is unclear the magnitude of effect of this interaction on outcomes for musculoskeletal pain (Hall et al 2010)
- Previous systematic review highlighted positive interaction tends to have beneficial effect on outcome in rehabilitation settings (Hall et al 2010)

Methods

- Nine databases (Embase, Medline, Academic Search Complete, PsycINFO, CINAHL, AMED, SportDiscus, Biomedical and PsycARTICLES) were searched in March 2015 using terms related to:
 - clinician AND patient AND interaction AND pain/disability
- 35,917 studies identified initially with 33 studies reviewed and 8 studies included in the review
- Data on participant demographics, intervention, main findings and study quality was extracted for each study

Results

- Clinician-patient interaction had a weak-moderate positive effect on pain and disability outcomes
- Participants who qualitatively rated their interaction as positive were more likely to rate their outcome as positive
- Participants who engaged in more negative rapport building were more likely to have a negative outcome
- If clinicians engage in emotional rapport building it reduced the progression rate of acute to chronic pain
- More interaction is not always beneficial

Conclusion

- Positive clinician-patient interaction has a weak beneficial effect on outcomes
- The magnitude of effect remains unclear
- Validated tool to measure the strength of the clinician-patient interaction should be developed