ATTRIBUTIONS, EXPECTATIONS AND PAIN INFLUENCE EXERCISE ADHERENCE IN CHIROPRACTIC PATIENTS WITH NON-SPECIFIC CHRONIC LOW BACK PAIN (NS-CLBP)

Katherine Harman, Ph.D.
Dalhousie University, School of Physiotherapy

INTRODUCTION / AIM

Chiropractors commonly prescribe exercise for their NS-CLBP patients. Exercise is one of few NS-CLBP interventions demonstrated to consistently reduce pain and improve function (van Middelkoop et al., 2010). However, the effect sizes are small and adherence is poor. An exploration of chiropractors and patients' expectations and beliefs regarding the barriers and facilitators to prescribed exercise adherence was undertaken.

METHODS

A focused ethnographic approach was used, involving audio-recorded, semi-structured interviews with chiropractors that frequently prescribe exercise and NS-CLBP patients under chiropractic care who had been prescribed exercise. The interviews were transcribed verbatim and imported into NVIVO!. Both authors used the systematic approach for analysis developed by Roper & Shapira (2000) resulting in mutually agreed upon categories and themes.

RESULTS

Two of the four categories of barriers and facilitators found are presented here. Attributions and Expectations included issues of diagnostic uncertainty and expectations for a fix; Pain included balancing exercise prescription with passive treatment for pain relief. Pain was also found to act as a motivator to avoid or confront exercise.

DISCUSSION / CONCLUSIONS

Consistent with existing literature (Slade et al. 2014), most of the barriers and facilitators to exercise adherence appear modifiable. In contrast to other reports that identify poor exercise adherence as a patient problem, this study has revealed a complex patient/practitioner interplay, where both sides of the therapeutic alliance are positioned to have an influence on adherence.

OTHER AUTHORS

Peter Stilwell