

**Title: Improving chronic pain patients' self-efficacy in pain management and reducing emergency department visits**

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**ABSTRACT**

**Aim:**

High needs chronic pain patients tend to have multiple healthcare visits for pain, resulting in poor satisfaction. This project aims to improve self-efficacy in pain management in this group of patients, thereby reducing the frequency of emergency department visits and hospital admissions due to inadequately controlled pain.

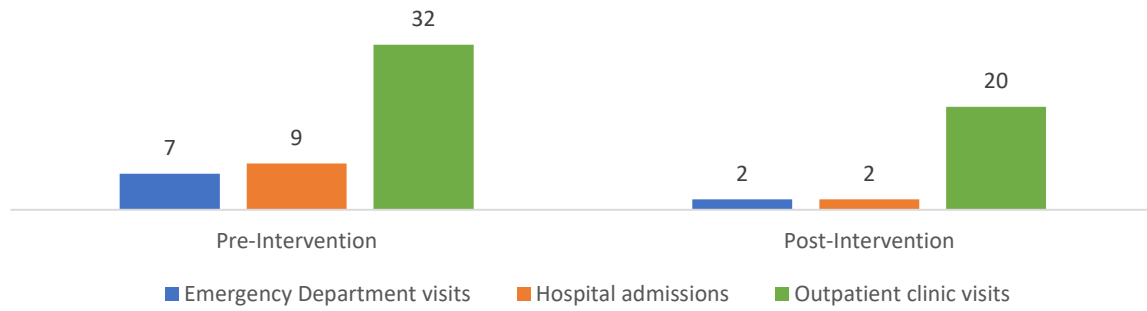
**Methodology:**

A nurse-led telephonic support service was initiated. High needs chronic pain patients were followed up at monthly to three-monthly intervals over six months. Calls addressed non-adherence to pain medications through education and pharmacist referral if required. Suitable patients were connected to community nursing teams and resources. Data on patients' pain control, medication adherence, adequacy of medication stock, number of healthcare visits due to pain and satisfaction scores were collected before and after the intervention.

**Results:**

Twenty-seven patients were recruited. Their median age was 77 years and all had mobility impairment. Post-intervention, there was a 33.3% increase in the number of patients with a Medtake Score of 100%, and a 26% increase in the number of patients with adequate medication stock. The post-intervention median (IQR) Pain Interference Score remained stable at 5.3 (3.6 to 6.1) compared to 5.6 (3.9 to 6.9) pre-intervention, demonstrating no deterioration in pain control. The median (IQR) Pain Catastrophising Score was also reduced from 25 (2.5 to 38) pre-intervention to 15 (5.5 to 31.5) post-intervention. There was an overall reduction in the number of emergency department visits and admissions in the six months after initiation of this project (Figure 1). 100% patient satisfaction was achieved.

**Figure 1. Number of healthcare visits related to pain**



**Conclusion:**

The nurse-led telephonic initiative demonstrated improved patient satisfaction and self-efficacy in managing their pain medications. It prevented deterioration in patients' pain control, leading to reductions in healthcare visits and admissions due to pain. With these promising results, this service will be implemented in our department's community pain service programme.