Functional assessment of chronic pain patients in a multidisciplinary pain clinic

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Purpose

Improved function is quickly becoming a required outcome in pain management. However, it has suffered from a lack of quantitative and simple quick testing procedures. The purpose of this study was to determine the applicability and efficacy of a simple functional test, the 6 minutes walk test (6 MWT), in assessing chronic pain patients response in a multidisciplinary pain clinic (MDC). The 6 MWT has been validated in certain cardiac and pulmonary diseases as well as other areas, but not in the chronic pain population.

Method

Utilizing chart review methodology, we evaluated the use of the 6MWT in determining functional improvement over time. Forty-five patients were evaluated on the 6MWT upon entry to a MDC in a medium sized urban center, and again 3 to 6 months later as part of the clinic’s normal assessment. During that time, patients were exposed to a full range of possible therapeutic modalities of the pain clinic, including behavioral medicine, multiple classes of medication management, and interventions. As this was a chart review study, interventions followed a typical course and were driven by clinical presentation and judgment of the managing physician.

Results

A total of 45 patient charts were selected from a consecutive series of patients who had completed the 6MWT on at least two occasions, separated by a minimum of 3 months between testing periods. The sample was comprised of 32 women (71.1%) and 13 men (28.9%). At pre-evaluation on the 6MWT, patients were able to walk an average of 272.87 yards (SD=152.95, range=10-560 yards). At follow-up, mean walk distances had improved to 339.04 yards (SD=152.19, range=0-560 yards), which represented a significant improvement (t1,89=18.61, P<.0001). The normal range in health adults for the 6MWT is, 400 m to 700 m. However, our subjects didn’t even achieve the low normal range of 400 m. A change of 45 m to 50 m has been shown to be clinically important for COPD and stroke patients. Therefore our patients do show a clinically important change, premeasurements and postmeasurements.

Conclusions

There is some evidence that MDC services can have an impact on functionality. The 6MWT may be a suitable addition in assessing chronic pain patients and their treatment regimens. Improved function is an important goal in pain patients, especially those on opioids and the 6MWT shows promise for assessment. Although not validated in chronic pain, except in fibromyalgia patients. This is the first reported study on the 6MWT use in a MDC. We plan on a prospective study to validate this test.