Availability and Nursing Implementation of Measurement Tools in the Co-Occurrence of Depression and Chronic Pain: An Integrative Literature Review

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Availability and Implementation of Screening Tools measuring the Co-occurrence of Chronic Pain and Depression

Background
- Chronic pain negatively affects 116 million adults in the US because of the reduction in quality of life and cost to society
- Depression affects 65% of the population and costs $83.1 billion
- 43% of depressed patients also had chronic pain
- Muscle, stomach, or headache pain are 2.5 to 10 times more likely to increase anxiety or depression
- Chronic pain and depression are not only present simultaneously, but also respond to similar treatment, exacerbate each other and share overlapping biological mechanisms

Research Questions
1) What are the most frequently used tools to measure pain and depression in studies that focus on the pain-depression dyad?
2) How are these screening tools currently being used to influence the nursing role for treating patients with chronic pain and depression?

Methods
- Integrative review using Psychinfo, CINAHL, and Pubmed.
- Search Terms:
  - screening, intervention or treatment, co-occurrence or comorbidity AND chronic pain AND depression
  - Clinical setting or clinical, nursing role or nursing AND chronic pain AND depression

Research Questions
- Interventions must be multifaceted because symptoms interact with each other and affect the trend of overall healing
- Recognizing the factors of this framework enhances symptom assessment by quantifying intensity, duration, distress, and quality
- Symptoms trigger or intensify each other so if screening tools are quantifying distress then primary care providers will have a better predictor of co-morbidity symptom onset
- This theory recognizes psychological factors such as mental state and reaction to illness as fundamental to affecting symptoms and in turn functional, cognitive, and physical performance.

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Results

Screening Tool Descriptions

Nursing Role
- Empathy
- Education
- Promoting Self Efficacy
- Strengthening & Stretching exercises
- Mind-body approach
- Mindfulness
- Nonpharmacological techniques
- Assessment

Limitations
- Focus of this treatment can be applied to various fields such as physical therapy and chiropractic practice rather than nursing so some reasonable assumptions had to be made to connect to nursing
- Specialization

Nursing Implications
- To apply these changes there would have to be flexibility and schedule availability
- Understanding the nurses role in this type of treatment will provide better patient outcomes and patient-provider relations
- There is nursing responsibility that can be expanded through these interventions such as broadening education topics and assessment

Future Research
- Assess feasibility and retention of nursing screening tools on the floor
- Create comprehensive screening tool for nurses
- Assess comprehensive testing
- Health Informatics application to EMR documentation of intervention, assessment, and education
- Community health program and materials related to the pain-depression dyad.

Conclusion
- A need for a comprehensive screening tool for standardization in treatment and to keep up with cycles of symptom change
- Expanded role for nurses
- Conceptual Framework
  - Factors:
    - Focus on coping influences, lifestyle change
    - PDI, PDI’s & PDI-5A, QOLS, MHL
- Symptom:
  - Screening tools that focus on distress, duration, intensity, and quality
  - Somatic symptom report
  - Criticism: self-report, overestimation
- Performance:
  - Nursing role in treating patients suffering from this dyad
  - Focus on activity levels in screening tools as baseline to improvement
  - PDI