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# Digital Pain Management in Palliative Care

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# Summary

- Introduction
  - Digital Health in Palliative Care
  - MSK and Palliative care using digital pain self management
  - The proposed tool
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## Key Messages

Accessible care

Continuous  
Support

Adaptable rehab

Patient & Family  
Empowerment

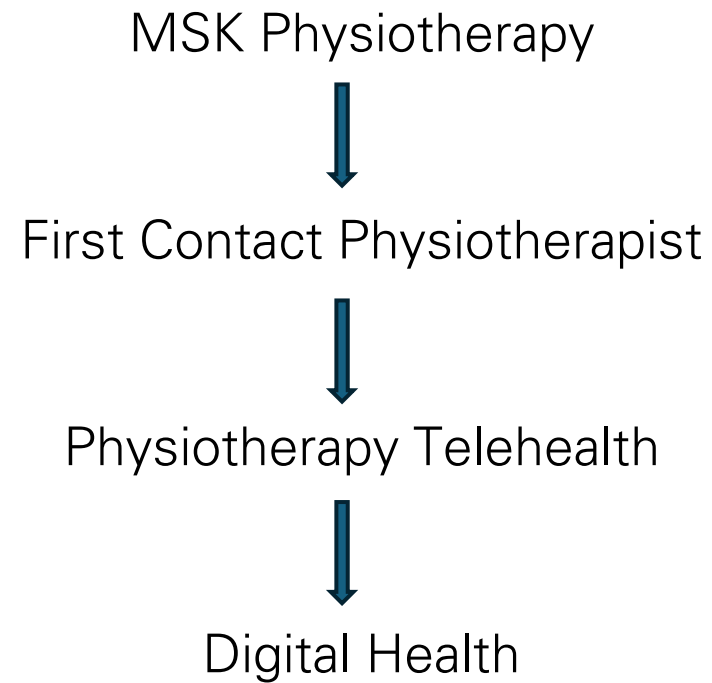
Non-  
Hospitalised  
rehab

Free HCP Time

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# My BackGround



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# Inspiration / Trigger

- COVID – 19 boosted remote physiotherapy services
  - First Contact Physiotherapist assessing 23 patients per day (20 min each) – HYBRID
  - Long waiting times
  - 85% of patients directed to self-management route
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# Self management options

- Prescribe Home Exercise Program
  - Targeted patient education
  - Goal setting rehab plan
  - Refer to psychosocial services
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# From Inspiration to Idea

Empowerment of  
Patient **Self management**  
using **digital health Platforms**

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# Digital Health in Palliative Care

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## Digital Health Interventions were found

- Mostly **positive** for

Education / Information Sharing / Decision making Communication & Costs

- **Inconclusive** for

Quality of life / Physical & Psychological Symptoms

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# Therapist – Palliative Patient relationship on the digital health landscape

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- **Benefits**

- Improves communication between patients and professionals

- Direct access to specialist palliative care for patients that live in underserved areas

- Empowerment of patient and family caregivers to navigate health systems

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## Considerations

- Privacy and confidentiality of data
- Possibility of missing holistic patient management
- Low levels of digital health literacy especially in older population
- Focus on “easy to see” physical aspect and miss psychosocial spiritual aspects

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# Patient perspective on Palliative digital health

- **75,9 %** of patients have a **positive attitude** toward digital health technologies
- According to patients the most feasible technologies were **Smartphones, Wearables** and **VR**

Wicki et al. (2024) Questionnaire based study

- Digital Palliative care **design and implementation** should consider the **characteristics** and **diversity** of patient and family member

Choi & Chia-Chin (2023) Guest Editorial

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# Digital MSK Pain self-management and palliative care

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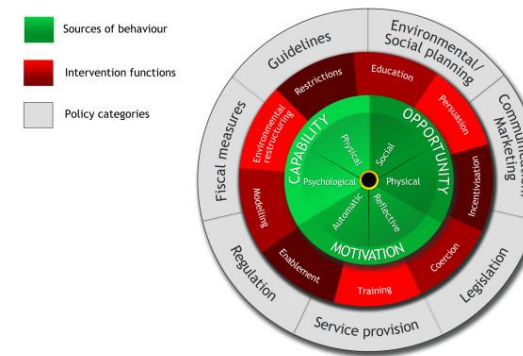
# Introduction to digital MSK pain management

- Patient education and information dissemination
- Remote monitoring with feedback (exercise plans & ADLs)
- Adherence support
- Psychological support
- Lifestyle interventions

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# Digital Pain Management in MSK & Oncology

- Targeted education
- Contemporary **pain science** education
- CBT aiming on behaviour change
- Poor **social support** led to higher levels of pain
- HCP-supported eHealth Intervention



BCW: Michie, Stralen & West, 2011

Evenepoel et al., (2022) Systematic Review

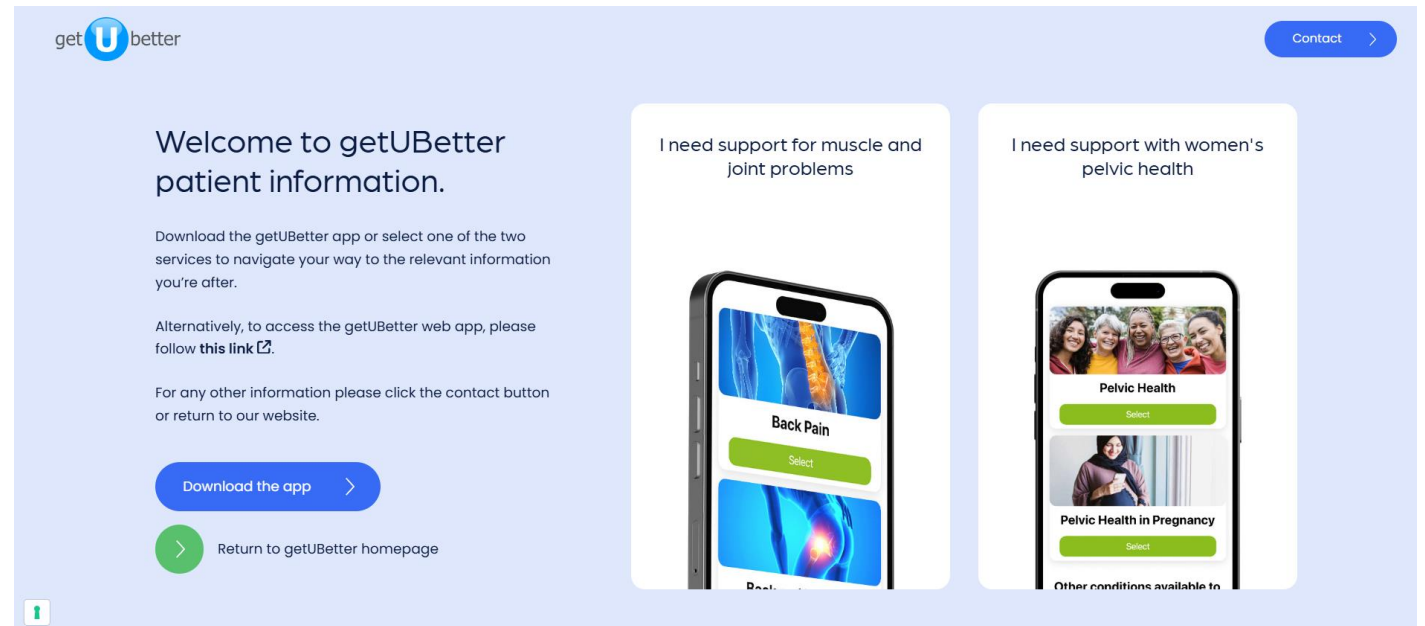
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- **L** High Heterogeneity & High risk of bias
  - **S** Examined sole effect of digital health without HCP presence
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# Case Study of Digital MSK Tool - GetUBetter (UK)

- Patient-Centred Design
- Education and Empowerment
- Pathway Integration
- Focus on Self-Management
- Data driven adaption



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**What can we learn from it?**

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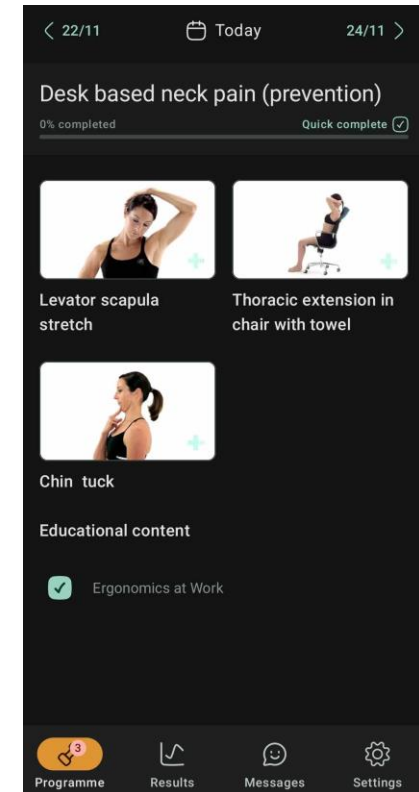
# The Proposed Tool

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# Web & Mobile App

- Personalised rehabilitation with self-management strategies
- Patient pain neuroscience education
- Remote monitoring with patient and/or caregiver feedback
- ADL / Psychological / Social / Family / Work Support



Source: PhysiApp

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# Who will this benefit?

- Patients in palliative care who experience chronic pain
  - Family members of palliative patients
  - Healthcare practitioners time
  - E.Σ.Υ. – less appointments needed / less costs / less resources
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## Improve healthcare accessibility

Decrease need  
for analgesics

Telehealth option for  
house-bounded  
patients

Reducing  
waiting times  
to access  
palliative care  
program





## Key Messages

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Free HCP Time

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**Thank you for your attention!**

**I am available for questions**

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