

Re-thinking Recovery



Preliminary data February 2024 analysed by MEDHEALTH RESEARCH



The analysis cohort

290 referrals

127 completed

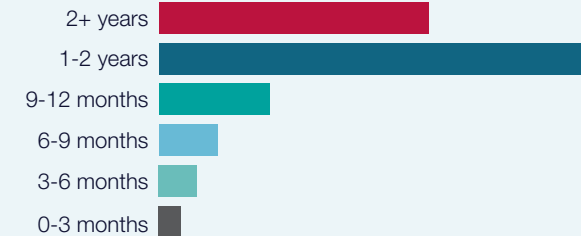
163 in progress

Average age:

49.1 years

(SD 12.1 years;
range 22- 82 years)

Average time since injury:



Re-thinking Recovery is an evidence-based service for people living with persistent pain, delivered by IPAR Pain Coaches and utilises modern pain science education, pain coaching and virtual reality (Reality Health's VR platform) to help clients re-think pain and retrain their overprotective pain system. It is delivered in metropolitan and regional locations across Australia that are convenient for the client. There is no waitlist for the service.

After completing Re-thinking Recovery, which psychosocial factors showed the largest improvement?

IMPROVED
32.7%

(PAIN) FUNCTIONAL INTERFERENCE INDEX

Assesses the impact of pain on daily functions
— *Brief Pain Inventory, Cleeland & Ryan 1994*

IMPROVED
30%

PAIN SELF EFFICACY

Assesses the confidence people with ongoing pain have in performing activities while in pain — *Pain Self-Efficacy Questionnaire, Nicholas 2007*

IMPROVED
26.1%

PAIN CATASTROPHISING

Assesses an individuals thoughts and feeling relating to pain
— *Pain Catastrophising Scale, Sullivan et al 1995*

IMPROVED
24%

PAIN SEVERITY INDEX

Assesses the severity of pain that an individual is experiencing
— *Brief Pain Inventory, Cleeland & Ryan 1994*

IMPROVED
16%

GENERAL HEALTH / QUALITY OF LIFE

General health assesses an individuals perceptions of their general health and quality of life — *Quality of Life Questionnaire, Aaronsen et al 1993*



The IPAR Re-thinking Recovery occupational rehabilitation VR-enhanced pain education program seems to offer important clinical benefits at a fraction of the cost of specialist pain services and with a much shorter delay between referral and episode of care. One might suggest that such new wave pain education should at least be seen as an important step in the pathway of returning people with disabling chronic pain to work.”

— **Moseley & Ryan 2023**



All psychosocial factors showed statistically significant positive change at follow-up

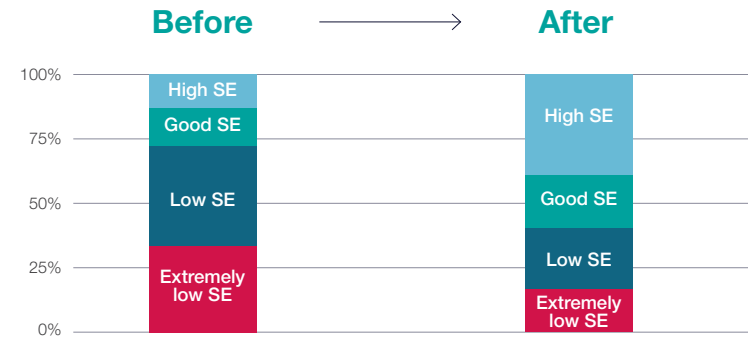
Pain Functional Interference

(BRIEF PAIN INVENTORY; CLEELAND & RYAN, 1994)



Task Confidence, Despite Pain

(PAIN SELF-EFFICACY QUESTIONNAIRE; NICHOLAS 2007)



Pain Severity

(BRIEF PAIN INVENTORY; CLEELAND & RYAN, 1994)



Feelings About Pain

(PAIN CATASTROPHISING SCALE; SULLIVAN 1995)



For full discussion paper
[Click here](#)

Moseley GL & Ryan, CG 2023 Making pain education better: historical underpinnings & recent innovations – a discussion paper. PETAL Discussion Papers. 23.01

For further information please email
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