

Pain experience and pain coping in rheumatoid arthritis and osteoarthritis: How do patients manage their pain?

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Background: Pain is a cardinal symptom in rheumatic diseases and its successful management is central to health-related quality of life of patients. However, relationships between pain experience and pain coping can assume distinct patterns considering distinct diseases. Thus, the study of illnesses specificities in this domain is needed.

Goals: To compare transformation, distraction, reducing demands, retreating, worrying, and resting (pain coping strategies), pain threshold, as well as perception of intensity, frequency, and interference of pain in rheumatoid arthritis (RA) and osteoarthritis (OA) patients; to identify associations among pain coping strategies and indicators of pain experience in both groups.

Method: 61 participants diagnosed with RA (n = 31) and OA (n = 30) were asked to complete a Clinical and Sociodemographic Questionnaire, Pain-Coping Inventory, visual analogic scale (VAS) for pain, perception of frequency and interference of pain (items of Medical Outcomes Study 36-item Short Form Health Survey - SF-36v2), and dolorimeter for pain threshold. SPSS was used to perform statistical analyses.

Results: No differences were found in pain threshold, perception of intensity, frequency, and interference of pain between RA and OA patients. However, RA patients reported higher levels of transformation, distraction, reducing demands, and retreating in coping with their pain. Moreover, indicators of pain experience are mainly associated to worrying and retreating strategies in RA patients, but associated to reducing demands in OA patients. Pain threshold in OA patients is negatively associated to reducing demands, retreating, worrying, and resting but no association was found in RA patients. In both groups, worrying is negatively associated to beliefs of personal ability in diminishing pain level.

Conclusions: Pain assessment and intervention with rheumatic patients should include a biopsychosocial approach considering specificities associated to each illness.

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