

## ABSTRACT

**Thunberg, K (2002). Practical pain management: Professional and organisational perspectives. Department of Psychology, Göteborg University, Sweden.**

The overall aim of the present thesis was to extend the understanding of the practical management of patients with chronic pain, focusing the organisational settings in which pain management takes place. In **Studies I and II**, 22 health care professionals were interviewed. They were specialised in the treatment of patients with chronic pain. The analysis of the transcribed interviews was influenced by the principles of Grounded Theory. Study I showed that professionals' perception of chronic pain could be characterised by three categories labelled 'Professional ambiguity', 'The professionals' caring reality' and 'The professionals' thoughts on ideal care'. In Study II, the following categories described the professionals' experiences of working with patients with chronic pain; 'Crisis in professional role', 'Feelings of failure', 'Lack of control', 'Lack of support' and 'Emotional tiredness'.

**Study III** described the practical implementation of an interdisciplinary model for patients with long-term, non-malignant pain. The main purpose was to explore the organisational prerequisites for interdisciplinary work. This was achieved by interviewing 24 respondents with practical experience of multidisciplinary models, participant observation and a review of written documents. After analysing the material (following the principles of Grounded Theory), six categories were grounded in the data and were labelled 'Integrated wholeness', 'An agile organisation', 'Common core knowledge', 'Mission clarity', 'Interdisciplinary roles' and 'Integrational leadership'. The results of Studies I-III emphasise the critical link between concepts of theory and practice and indicate the need for organisational development to implement a biopsychosocial understanding of chronic pain and interdisciplinary work.

In **Study IV**, the short- and long-term effects of the treatment programme described in Study III were evaluated. Forty treatment resistant patients with chronic, non-malignant pain, all on sick leave, were included in the study. Two major outcome issues were addressed. One was related to the effectiveness of the programme as measured by a return to work, health and sense of well-being, the other related to the stability of the outcome effect over time. In most variables, a gradual improvement was noted. The most important result of the rehabilitation programme may be the lasting effects of return to work. Immediately after treatment, 55% had returned to work; this figure increased to 75% at the six-month follow-up and to 78% at the four-year follow-up. The differences in return to work between the study group and a matched comparison group were statistically significant.

The results in this thesis indicate the need for organisational development to move towards interdisciplinary collaboration in order for biopsychosocial thinking to materialise in practical management.

**Keywords:** Chronic pain, health care, organisation, professional attitudes, rehabilitation.

**Correspondence to:** Kerstin Thunberg, Department of Psychology, Göteborg University, Box 500, SE-405 30 Göteborg, Sweden. E-mail: [kerstin.thunberg@kau.se](mailto:kerstin.thunberg@kau.se)  
ISSN 1101-718X ISRN GU/PSYK/AVH—104—SE ISBN 91-628-5323-6