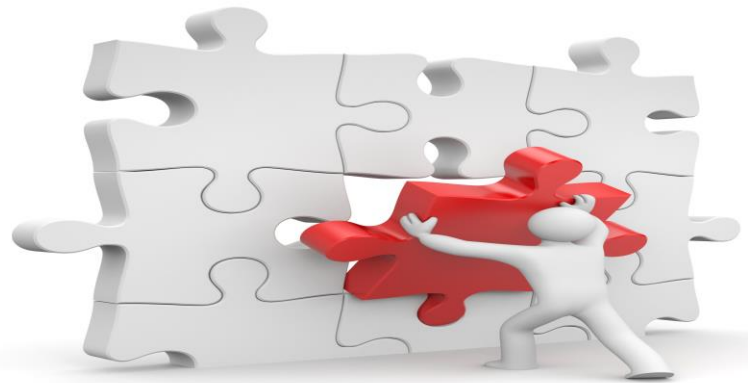




Shine

Integrative Primary Care for patients with somatic distress problems / MUS



A novel approach...

1

Patients learned how to utilize bodily functions such as breathing properly and experienced "the positive impact of the breath in controlling pain, reducing stress and relaxation."

Layla Smith, Therapist

2

"Our clinicians delivered body oriented interventions which responded to the patients' needs and significantly helped them to bear their pain and other somatic symptoms"

Nina Papadopoulos, Project Manager & Clinical Supervisor

3

"Participants left with a new set of tools, potentially a new way to language their pain and move forward their experience."

Claire Burrell, Therapist

"Overall the evidence shows that it is an effective service which can be run with minimal administrative costs and provide something, which is not available" GP lead

A study was conducted with funding from The Health Foundation (Innovation programme) to evaluate the feasibility and explore the cost / clinical effectiveness of a novel holistic Primary Health Care service for patients with Medically Unexplained Symptoms (MUS). Care was delivered in a "one-stop-shop" fashion in GP surgeries including the following steps: Identification, Assessment, Engagement and Group Interventions – Mindfulness Based Stress Reduction (MBSR) and Body Oriented Interventions ("Strategies for Better Living Group"/SBLG). Both interventions were entirely focused towards helping patients to improve their overall coping and to foster wellbeing, without challenging their health beliefs or explicitly working psychologically.



The study findings are very encouraging and suggest exploring the benefits of the care pathway in other services

"I am now helping myself rather than depending completely on family and I'm able to cope better with the symptoms."

"I learned to be kind to myself. It has really turned my life around and empowered me."

"Out of coming I got really some way of handling my pains, I learned how to use my breath of handling the pain."

Patient feedback

"I have loved the positive approach taken by the MUS service which is to help ease the pain and not worry too much about the medical diagnosis causing the pain." (GP)

All the primary care staff we worked with were enthusiastic about the project and keen to embed it in their service.

"I found to be coming to the sessions gave me a better perspective and gave me some coping strategies. I find the breathing exercise a good tool for lowering stress levels also the guided body scan was useful for me."

A patient

Currently, patients with MUS (also called somatisation disorder or "functional symptom/distress disorder") have unmet health needs as a result of unclear diagnosis and because it is often difficult to engage these patients in holistic care. Consequently treatment is often ineffective despite frequent presentation at primary and secondary care services, resulting in high cost pressures to the health economy. Existing models have not met the complex requirements necessary to achieve positive health outcomes for this group.

The findings of the project demonstrate that those who participated in the project gained significant improvements in somatic symptom levels and this resulted in corresponding significant reduction in health care utilisation (GP contacts & consultations, referrals to specialist services, A&E attendances).

The analysis of qualitative data (feed-back from patients and therapists structured accounts) suggested that patients who participated in the intervention had additional health benefits in terms of a more inclusive understanding of their health condition and improved self-management capabilities and coping skills.

The GP lead concluded:

"The patient centered approach of the project and the lack of labeling with a 'mental health diagnosis' has been very beneficial for my patients. It has also helped my clinical team and me; often the GPs mirror the frustration of the patients' pain and these consultations can be time consuming with both parties frustrated."

"This innovation project demonstrates that a flexible, patient oriented approach for MUS, directly working with and through patient's bodily complaints can make a real difference"

Prof. Frank Röhricht, Project Lead

