Self-management toolkit and delivery strategy for end-of-life pain: the mixed-methods feasibility study

Michael I Bennett,1* Matthew R Mulvey,1 Natasha Campling,2 Sue Latter,2 Alison Richardson,2 Hilary Bekker,1 Alison Blenkinsopp,3 Paul Carder,4 Jose Closs,5 Amanda Farrin,6 Kate Flemming,7 Jean Gallagher,1 David Meads,1 Stephen Morley,1† John O’Dwyer,1 Alexandra Wright-Hughes6 and Suzanne Hartley6

1Leeds Institute of Health Sciences, Faculty of Medicine, University of Leeds, Leeds, UK
2Faculty of Health Sciences, University of Southampton, Southampton, UK
3School of Pharmacy, Faculty of Life Sciences, University of Bradford, Bradford, UK
4Bradford and Airedale NHS, Bradford, UK
5School of Healthcare, University of Leeds, Leeds, UK
6Leeds Institute of Clinical Trials Research, University of Leeds, Leeds, UK
7Department of Health Science, University of York, York, UK

*Corresponding author M.I.Bennett@leeds.ac.uk
†In memoriam

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Plain English summary

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Plain English summary

Pain affects most people approaching the end of life and can be severe for some. Opioid pain medicines (such as morphine) are effective, but evidence is needed about how best to support patients who are approaching the end of life in managing these medicines.

By reviewing published research and interviewing patients, carers and health-care professionals, we designed a self-management support toolkit (SMST). This consisted of factsheets, a pain diary, medication chart and a goal-setting sheet. We trained clinical nurse specialists in palliative care to deliver the tool using a four-step coaching process [the Self-Management of Analgesia and Related Treatments at the end of life (SMART) intervention]. We then asked the trained nurses to trial the SMART intervention with a group of patients over a 6-week period. The purpose of this trial was to see what patients, their carers and nurses thought of the SMST and to decide if it was possible to run a larger trial.

Many patients were unable to take part because they were not prescribed strong enough painkillers or were too unwell. We approached 37 patients, and 19 took part. The SMART intervention was acceptable and valued by patients and nurses. In general, the study nurses delivered the intervention as planned. We were able to collect information from patients on a regular basis and that this was not too much for them. We interviewed the nurses at the end of the trial and this showed that we need to make some refinements to the study: allowing patients on more types of painkiller to be included and providing more training support to nurses. Based on these findings we have concluded that a larger study in the NHS is feasible. This will determine whether or not SMART can provide cost-effective benefits to patients who are approaching the end of life.
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