Effectiveness of a 30-day Wellness Program in Individuals with Chronic Pain, with and without Mental Illness

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Introduction

Chronic pain, defined as pain more than 3 months in duration, especially when it overlaps with a psychiatric disorder, is a tremendous burden to both patients and society. Typically, such individuals are treated with pain medications, and psychotherapies. There is a dearth of studies examining the role of wellness interventions in such patients. This 30-day study combined five interventions and tracked multiple markers over this time period to assess for outcomes in these patients.

Methods:
Five well-studied wellness interventions were utilized in this study. These interventions included physical exercise (30-minutes a day), mindfulness-based meditation (at least 8-minutes a day), healthy eating interventions, social connectedness enhancement practices, and optimizing nutritional recommendations (including daily tracking of meals). Participants were given a workbook containing educational materials, as well as a tracking form to measure daily adherence. Prior to starting the study, participants were asked to fill out multiple rating instruments, and at the end of the 30-day intervention, the scales were filled out again. The pre and post-data was collected and analyzed using ANCOVA analysis with a p-value set at p<0.05. The scales used in this study were the following: PHQ-9 for the measurement of depression; GAD-7 for the measurement of anxiety; PSQI for the measurement of sleep quality; MIND Diet score to measure adherence with a Mediterranean-based, brain healthy diet; MAAS to measure levels of mindfulness; SCS to measure social connectedness; and BPI to measure eight separate elements of chronic pain. In addition, wellness, as measured by WHO-5 scale improved by 57% (p<0.0001). On a 0 to 10 Likert scale we also measured four key components of mental wellness. These were the importance of suffering (9 for the measurement of depression); GAD-7 for the measurement of anxiety; PSQI for the measurement of sleep quality; MIND Diet score to measure adherence with a Mediterranean-based, brain healthy diet. The following changes were found at the end of this 30-day wellness program (WILD 5 Wellness Program): Depression, as measured by PHQ-9 improved by 42% (p<0.0001); Mental Wellness, as measured by the WHO-5 scale improved by 57% (p<0.0001). On a 0 to 10 Likert scale we also measured four key components of mental wellness. These were the importance of suffering (9 for the measurement of depression); GAD-7 for the measurement of anxiety; PSQI for the measurement of sleep quality; MIND Diet score to measure adherence with a Mediterranean-based, brain healthy diet. The following changes were found at the end of this 30-day wellness program (WILD 5 Wellness Program): Depression, as measured by PHQ-9 improved by 42% (p<0.0001); Mental Wellness, as measured by the WHO-5 scale improved by 57% (p<0.0001). On a 0 to 10 Likert scale we also measured four key components of mental wellness. These were the importance of suffering (9 for the measurement of depression); GAD-7 for the measurement of anxiety; PSQI for the measurement of sleep quality; MIND Diet score to measure adherence with a Mediterranean-based, brain healthy diet.

Results

Conclusions

It appears that offering Wellness interventions, as created by the five-pronged WILD 5 Wellness Program, is effective in chronic pain patients who may or may not have a co-morbid mental health condition. When it is added to standard pain and psychiatric interventions, there were substantial, positive benefits noted, not just on measures of mental and physical illness, but also on multiple components of mental wellness.