Migraine Patient School (MPS)

a structured multimodal educational programme for patients with high frequency and chronic migraine

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Objective

High frequency and chronic migraine is disabling, leads to loss of function and affects family and working life.

The effect of a structured multimodal educational program for patients with high frequency and chronic migraine was studied analysing various health related aspects.

Methods

The MPS programme consisted of a preintervention phase, an intervention phase and a postintervention phase, see study design fig 1. Questionnaires used table 1.

During the interventions 7 group sessions with different themes were held table 2. Content of group sessions see table 3.

Table 1.

Questionnaires used						
PSS -14	Perceived Stress Scale -14	(0-56)				
MSQOL	Migraine Specific Quality of Life Questionnaire	(0-100)				
HIT-6	Headache Impact Test - 6	(36-78)				
HAD A	Hospital Anxiety and Depression Scale - anxiety	Maximal score 21				
HAD D	Hospital Anxiety and Depression Scale - depression	Maximal score 21				
PIPS A	The Psychological Inflexibility in Pain Scale - Avoidance	Maximal score 70				
PIPS F	The Psychological Inflexibility in Pain Scale - Fusion	Maximal score 42				



Aura by Britt Ingrid Persson

Study design.

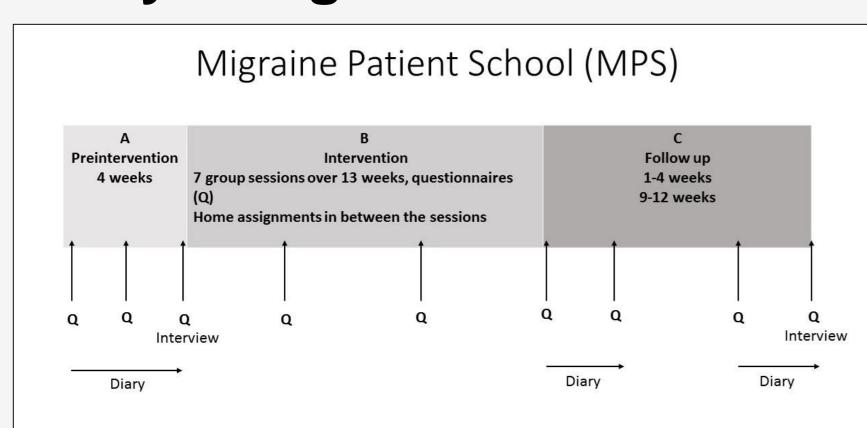


Figure 1. Q= questionnaires distributed.

Table 2

Themes							
S	Stress and calm	Exercise	Diet	Thought pattern	Handling of emotions	Approach to yourself and your environment	Follow up

Table 3

Content of g	Content of group sessions							
Education	Themes	Group discussion	Body awareness	Home work	Follow up			

Statistics

Median values; Wilcoxon's Signed Rank test.

Results

Twenty-three female and 1 male of the 30 patients included fulfilled the MPS (fig 2). For demographic data see table 3. A reduction in group median values in these patients (N=24) were seen in HIT-6, 65 to 62; p=0.002 and PSS-14, 30 to 26; p=0.01, while median MSQOL increased 38 to 50; p=0.036. PIPS (avoidance) was reduced 33 to 30; p=0.025. PIPS (fusion) and HAD (anxiety, depression) showed no

significant changes.

Outcome per patient is shown in fig 3 (HIT-6), fig 4 (PSS-14) and fig 5 (MSQOL).

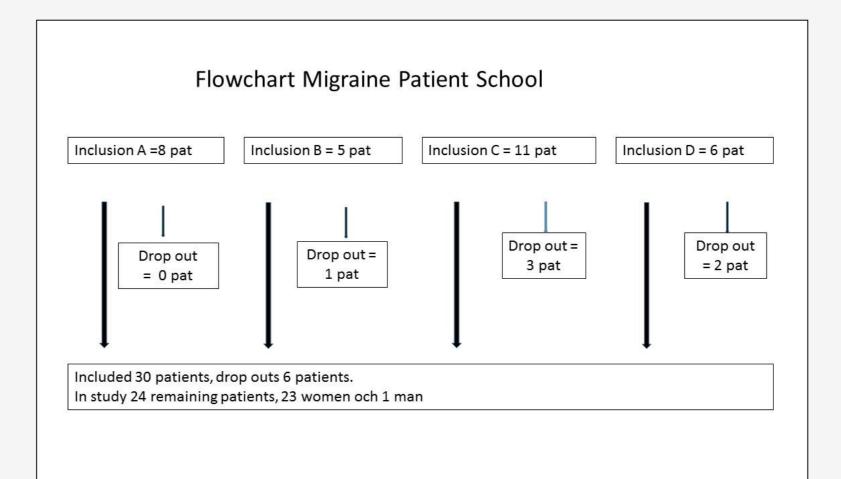


Figure 2

Table 3. Age and duration of headache

Group	Age mean (range)	Dur < 1 year	Dur 1-4 years	Dur 5-10 years	Dur >10 years	Tot
Α	41,6 (32-56)		1		7	8
В	40,8 (29-56)		1	1	3	5
С	45,3 (28-59)			3	8	11
D	41,7 (27-57)	1	1		4	6
Total	42,81 (27-59)	1	3	4	22	30

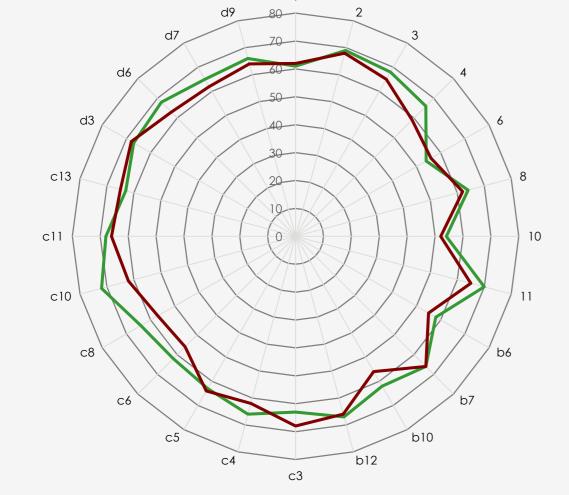


Figure 3. HIT-6 per patient preintervention (green) and postintervention (red)

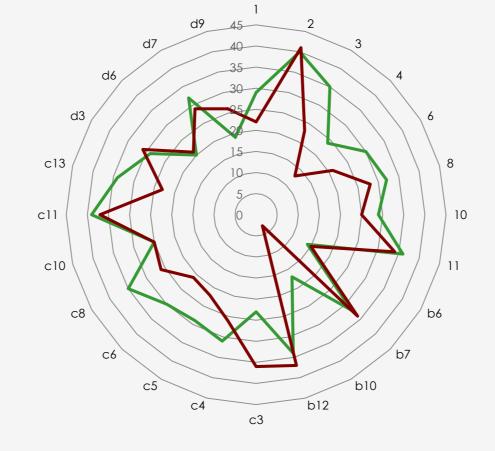


Figure 4. PSS -14 per patient preintervention (green) and postintervention (red).

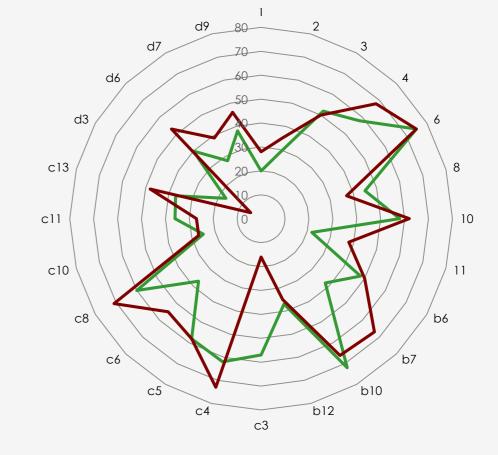


Figure 5. MSQOL per patient preintervention (green) and postintervention (red)

Conclusions

The MPS seems to add some strategies to handle the situation for the patients with the severest form of migraine (high frequency-chronic).







