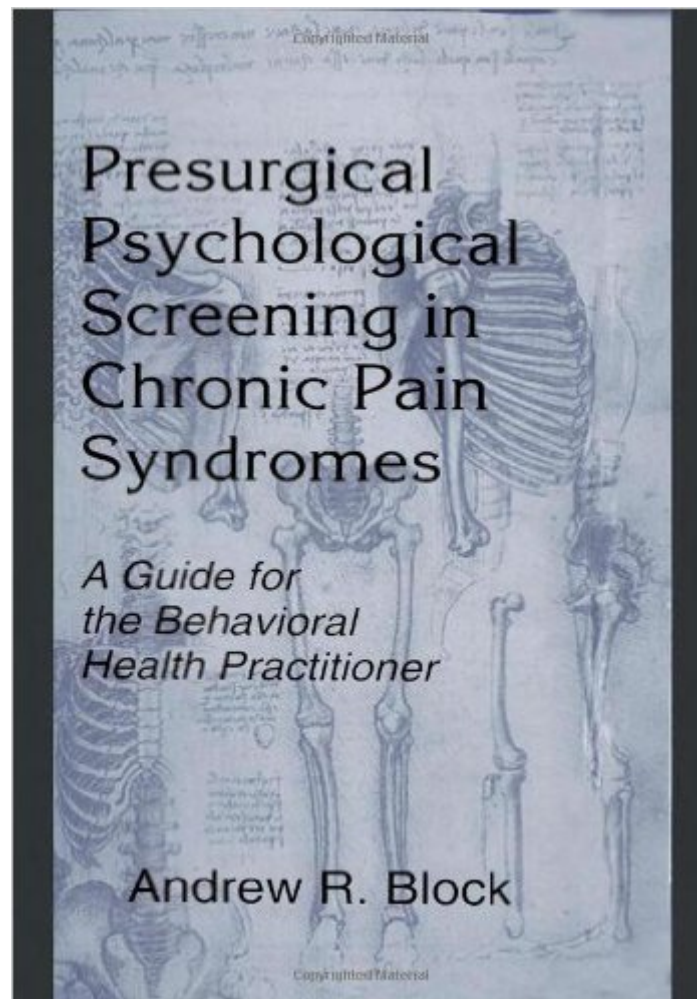


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Presurgical Psychological Screening In Chronic Pain Syndromes: A Guide For The Behavioral Health Practitioner



Synopsis

Pain is an unfortunate daily experience for many individuals. Chronic pain -- lasting six or more months -- is suffered by approximately 30% of the population in the United States. These individuals wake up, function during the day and go to sleep, trying to keep pain at a minimum while, at the same time, maintaining some quality of life. They may make frequent visits to the doctor and the pharmacy. When they find relief, it is usually short-lived and comes at a cost such as dependence on narcotic medications or complete limitation of activity. Pain often becomes the central point of their existence. This practice guide describes an approach to psychological evaluation of the chronic pain patient who is being considered for surgery. A large body of research is accumulating which demonstrates that the outcome of surgical procedures aimed at chronic pain relief can be strongly influenced by psychological and emotional factors. This approach, termed "presurgical psychological screening" (PPS) uses interview and testing techniques to identify emotional, behavioral, and psychosocial difficulties which have been demonstrated to negatively impact surgical outcome. Studies show that even patients with clearly identifiable pathophysiology may respond poorly to surgery, due to issues such as pain sensitivity, medication dependence, rewards for pain behavior and personality style. Thus, some insurance carriers, rehabilitation nurses and state worker's compensation systems are encouraging, or even requiring, presurgical psychological screening in cases of surgery designed to relieve chronic pain. The first to present a comprehensive, unified approach to PPS in chronic pain syndromes, this text is designed to provide the behavioral health practitioner, as well as the trainee, with all the tools and information necessary to conduct PPS evaluations. It identifies a multitude of risk factors for poor surgical outcome and reviews research associated with each risk factor. Hands-on techniques for eliciting information from the patient about risk factors is also detailed. Toward this end, the practice guide also contains a number of forms and session outlines which can be directly utilized, or which can be altered to fit readers' needs. Models for weighing and combining surgical outcome risk factors are also provided. Thus, practitioners are able to reach valid and reliable predictions of surgical results. Finally, the text provides outlines of psychological interventions which can facilitate surgical outcome as well as surgical treatment alternatives. Upon completion of this practice guide, readers should be able to begin providing PPS evaluations which are scientifically valid, clinically sound, and which result in significant overall improvement in the treatment of chronic pain syndromes.

Book Information

Hardcover: 200 pages

Publisher: Psychology Press; 1 edition (August 1, 1996)

Language: English

ISBN-10: 0805824073

ISBN-13: 978-0805824070

Product Dimensions: 0.8 x 6.5 x 9.5 inches

Shipping Weight: 1.1 pounds (View shipping rates and policies)

Average Customer Review: 5.0 out of 5 starsÂ Â See all reviewsÂ (2 customer reviews)

Best Sellers Rank: #1,670,326 in Books (See Top 100 in Books) #125 inÂ Books > Medical Books > Psychology > Medicine & Psychology #199 inÂ Books > Health, Fitness & Dieting > Diseases & Physical Ailments > Chronic Pain #1256 inÂ Books > Textbooks > Medicine & Health Sciences > Medicine > Clinical > Surgery > General

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This book starts at the beginning and has all of the necessary steps. Now if we could only get insurance companies to read the book and see the importance of this work!

Good review of the relevant issues and excellent practical advice with many specific examples/samples. Good resource for a professional working in the field.

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