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Evaluation of New Zealand osteopathy patients experiences of their treatment



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ABSTRACT

Objectives: To investigate the experiences of patients seeking osteopathy treatment in New Zealand; and to describe their perceptions of osteopathic treatment.

Design: Survey-based research design.

Setting: Private osteopathy practices.

Main outcome measures: Demographic survey and the Patient Perception Measure-Osteopathy (PPM-O).

Results: Twelve osteopaths were recruited as practitioners. Responses from 107 patients were analysed. Approximately 75% of patients reported receiving a 'mostly cranial' treatment approach. The majority of patients (96.2%) indicated that osteopathic treatment helped their condition. The most frequently experienced sensation was 'relaxed'. A positive relationship was observed between the PPM-O and demographic variables.

Conclusions: This is the first study to report on New Zealand osteopathy patient's experience of their treatment. The sensations and emotions experienced are largely consistent with previous Australian research. Predominantly positive perceptions of osteopathic treatment were reported. The current study provides some evidence of the construct validity of the PPM-O in a New Zealand patient population.

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1. Introduction

Osteopathy is a form of manual therapy that utilises a variety of 'hands-on' treatment approaches including mobilisation, manipulation and soft tissue techniques [1]. A number of systematic reviews have highlighted the role 'structural' osteopathy approaches may play in the management of a variety of musculoskeletal [2–5] and non-musculoskeletal complaints [6]. Another treatment approach utilised by osteopaths is Osteopathy in the Cranial Field (OCF). OCF was conceived by Sutherland [7] who proposed a mechanism by which an inherent and involuntary rhythm within the body could be palpated through the manifestation of cranial bone movement. A number of studies have researched the validity of this involuntary rhythm's palpability [8,9], and potential clinical uses [10–13]. However, only a limited number of studies have investigated the patient experience of OCF [14–16].

A lack of data on patient perception and treatment outcomes associated with OCF lead Mulcahy et al. [16] to develop a questionnaire to collect and analyse patient experiential data. Originally intended only for patients receiving OCF [16], the questionnaire was later revised and condensed using both confirmatory factor analysis and Rasch analysis [17]. The questionnaire was titled the Patient Perception Measure – Osteopathy (PPM-O) and these authors suggested that it may be useful to evaluate both 'cranial' and 'structural' osteopathic treatments [15,17]. In further work Mulcahy and Vaughan [15] also observed that the sensations patients experience during their OCF treatment may be associated with how those patients perceive their treatment. Furthermore, patient self-rated satisfaction with life also appears to be related to positive treatment perception [18,19].

The aim of the present study was to explore the experience of patients receiving a structural treatment approach, OCF treatment approach (or both) in New Zealand osteopathy clinics. Patients' perception of treatment was explored, as well as the sensations and emotions patients experienced during and immediately after their treatment. The relationships between demographic variables, Satisfaction with Life (SWL), the Meaningfulness of Daily Activities

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(MDA), and patients reported experiences of treatment were also considered.

2. Methods

Ethics approval for the study was obtained from the Unitec Institute of Technology (Auckland, New Zealand) Research Ethics Committee.

2.1. Participants

Two groups of participants were recruited: 1) registered osteopaths in New Zealand who used Osteopathy in the Cranial Field techniques regularly in practice; and, 2) their patients, who had received treatment consisting mostly of cranial techniques.

Osteopaths were recruited via an internet search (keywords 'cranial osteopath New Zealand'), the Sutherland Cranial Teaching Foundation for Australia and New Zealand website [20], word of mouth, and through personal communication. Interested osteopaths were screened for their suitability using a 'practice style' survey [21]. The screening tool used was a question taken from an unpublished survey, developed to determine an osteopath's practice style [21]. This survey was based on work by Jette, Bacon [22] assessing the beliefs and attitudes of physical therapists toward evidence-based practice. The practice-style question from Blaser's survey [21] used in the present study, was a simple method to determine which techniques practitioners were most likely to use when treating patients. The screening tool was delivered to the osteopaths via Survey Monkey. Practitioners were selected for the study if their responses indicated a predominantly non-structural approach to their treatment and if selected, were sent research packs containing the questionnaires to be completed. Patients were then recruited by the participating osteopaths, using convenience sampling. In order to be eligible, patients were required to be at least 18 years old, and have received a treatment consisting mostly of OCF techniques. Patients were each provided with the PPM-O and a demographic survey following their OCF treatment session. Patients completed the questionnaires and returned them to the primary researcher via pre-paid post.

2.2. Measures

2.2.1. Patient demographic survey

The patient demographic survey (Supplementary File 1) collected a range of data about the patient, including age, gender, and two single-item Likert-type scale questions to evaluate the patient's satisfaction with life (SWL) and the meaningfulness of their daily activities (MDA) [18,19,23,24]. Patients were also asked to identify the predominant treatment approach they received.

2.2.2. Patient Perception Measure-Osteopathy (PPM-O)

The PPM-O is a 13-item self-report measure [17] designed to identify patient perceptions and self-reported outcomes of osteopathic treatment. The questionnaire has been used to assess patients' experiences of both cranial and structural osteopathic treatment. Previous work [17] using both confirmatory factor analysis and Rasch analysis suggests the items load onto two factors: 'Education and Information' (9 items), and 'Cognition and Fatigue' (4 items). Items are answered on a five-point Likert scale, and include both positively and negatively worded statements. The PPM-O was scored as per Mulcahy and Vaughan [17] and negatively phrased items were recoded prior to the data analysis. Patients were also asked to indicate which treatment style they predominantly received (i.e. structural or cranial), for how long they had been receiving osteopathy treatment, and whether they

experienced any specific sensations during or after treatment. A list of 24 sensations and responses was included on the PPM-O, and patients were asked to select which (if any) sensations or responses they experienced in relation to their treatment [15] (Supplementary File 2).

2.3. Data analysis

Data were entered into SPSS version 20 (IBM Corp, USA) for analysis. Descriptive statistics were generated for each of the demographic and PPM-O items, and the sensations experienced. Correlations between each of the PPM-O items and patient age, SWL and MDA were analysed using Spearman's ρ and interpreted according to Hopkins [25]. Mann-Whitney tests (alpha set at $p < 0.05$) were used to evaluate differences for gender and patient-reported treatment approach for each of the PPM-O subscales and reported sensations and emotions. Effect sizes (r) were also calculated where significant differences were observed [26]. This data analysis has been employed in a previous study involving the PPM-O and its precursors [15]. Cronbach's α was calculated as the reliability estimate for each of the individual subscales, as per Mulcahy and Vaughan [17].

3. Results

Thirty-nine osteopaths were identified through the recruitment search. Of those 39 osteopaths, 12 expressed interested in the study, were screened, and recruited as practitioners. A total of 230 research packs were sent to osteopaths to give to eligible patients. Of these, 107 (46.52%) completed questionnaires were returned via pre-paid post to the primary researcher at Unitec Institute of Technology. Completed questionnaires included responses from patients who indicated that they had received mostly 'cranial' treatment (75.7%), mostly 'structural' treatment (15.9%), both (4.7%), or neither (3.7%). Nine questionnaires (3.9%) were confirmed as being lost through the mailing process. No responses were withdrawn by patients.

3.1. Patients

The demographic characteristics of the patients who participated in this study are summarised in Table 1.

3.2. Body regions treated by the osteopath

The most common body region that patients received treatment for was the neck (cervical spine) (61.7%), the pelvis or hips (40.7%), head (39.6%), and lower back (lumbar spine) (30.9%) (Fig. 1). Other reasons for seeking osteopathic treatment included anxiety, "emotional stuff", general well-being, relief from stress, fertility, and pregnancy.

3.3. Satisfaction with Life and Meaningfulness of Daily Activities

Median values for Satisfaction with Life (SWL) and Meaningfulness of Daily Activities (MDA) were both 4 (Table 1). A SWL and MDA score of 3 or less was observed for 20.2% and 30.8% of patients respectively.

3.4. Patient Perception Measure - Osteopathy

Cronbach's α was used as the reliability estimate for the two PPM-O sub-scales [17]: 1) 'Education and information' ($\alpha = 0.71$, 95%CI 0.61–0.78), and 2) 'Cognition and fatigue' ($\alpha = 0.76$, 95%CI 0.69–0.83). Deletion of single PPM-O items did not increase the

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