Clinical Application of Tai Chi for PAIN MANAGEMENT



KRISTI HALLISY PT, DSc, OCS, CMPT
Assistant Professor
University of WI-Madison

July 7, 2014

SYMPOSIUM

Health, Education, and Cultural Exchange





Presentation Objective

This lecture will explore the evidence-based practice (EBP) of Tai Chi as a Meditative Movement Therapy for the Management of Persons with Persistent Musculoskeletal Pain Conditions. Participants will learn about a physical therapy clinical application of Tricia Yu's simplified Yang-style Tai Chi Fundamentals® (TCF®) program for the rehabilitation of persons with persistent pain conditions.

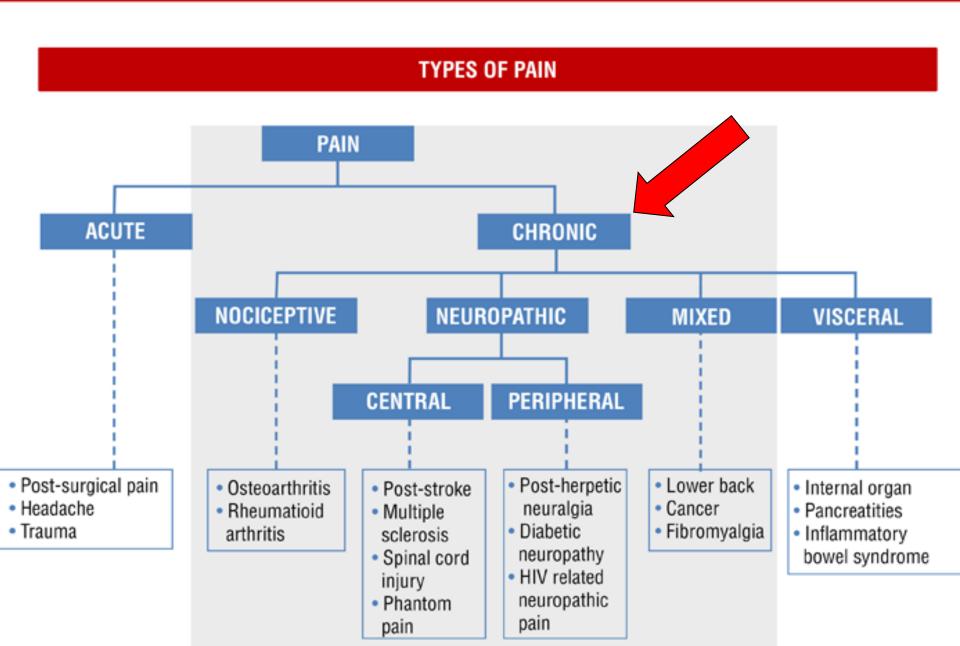


Pain Prevalence



Chronic pain affects more people than diabetes, cancer and heart disease combined.

Classifying pain



Musculoskeletal Pain: At-a-Glance

International Association for the Study of Pain (IASP) says, "Persistent musculoskeletal pain is fueled by worldwide trends, including:

- Aging populations
- Sedentary lifestyles
- Increasing incidence of obesity

Kinesophobia

Do you have a fear of movement or motion?



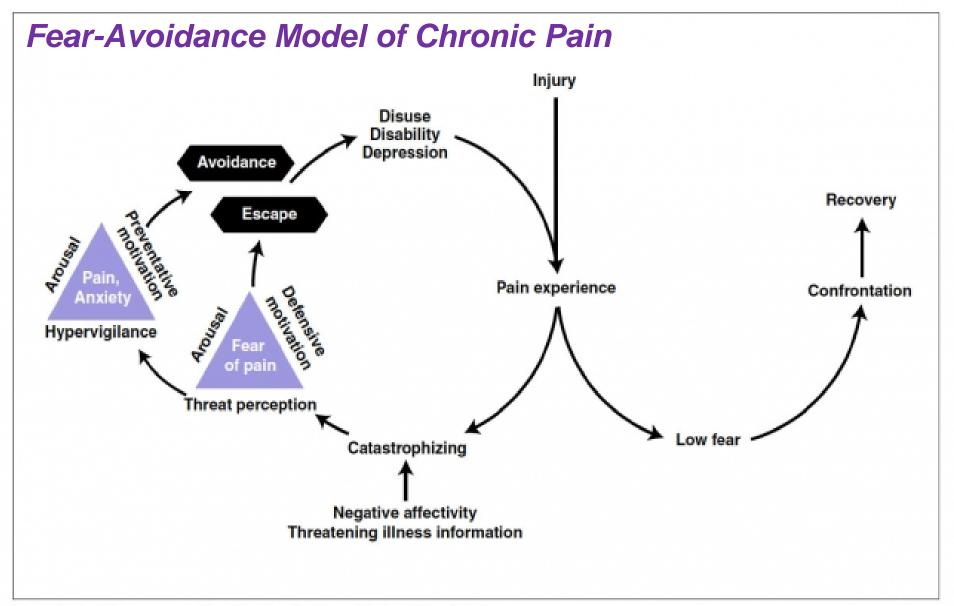


Figure 1. Graphical representation of the Fear-Avoidance Model of Chronic Pain.

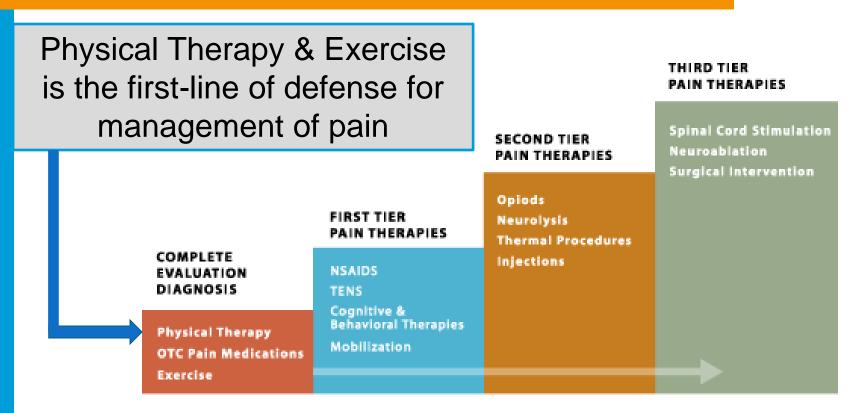
Adapted with permission from Vlaeyen JWS, Linton T. Fear-avoidance and its consequences in chronic musculoskeletal pain: a state of the art. *Pain*. 2000;85(3)317-332.¹⁷ This figure has been reproduced with permission of the International Association for the Study of Pain (IASP). The figure may not be reproduced for any other purpose without permission.

Reprinted from Leeuw M, et al. The fear-avoidance model of musculoskeletal pain: current state of scientific evidence. J Behav Med. 2007;30(1):77-94.16

Managing Pain – The 5-step Approach

- 1. Medications (medical management)
 - Passive interventions are not the answer
 - Active interventions are better option
 - Surgery is not the best option for chronic pain
- 2. Explore how thoughts and emotions are affecting the nervous system (mind-body principles)
- 3. Role of diet and lifestyle (e.g. smoking, alcohol, sleep hygiene, activity levels) sensitize the nervous system
- 4. Explore the deeper meaning of pain and personal stories; did a worrying period of life contribute to the overall pain picture?
- 5. Physical activity and function (exercise is medicine)

Continuum of Pain Management



THE PAIN TREATMENT CONTINUUM

Categories of Exercise for Pain

AEROBIC	STRENGTHENING	MEDITATIVE MOVEMENT
Walking	Weight machines, free weights and dumbbells	Tai Chi Chuan
Running	Body weight resistance	Qigong
Swimming	Isokinetic devices	Yoga



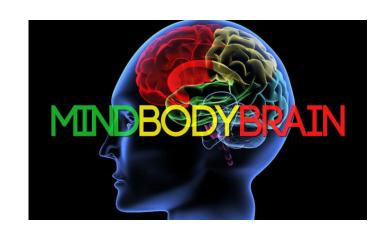




TC as Meditative Movement Therapy

Is a new category of exercise defined by:

- 1) some form of movement or body positioning
- a focus on breathing
- a calm state of mind with the GOAL of deep states of relaxation



Larkey et al. Meditative movement as a category of exercise: Implications for research. *J Phys Activity & Health*, 2009;6:230-238. *Introduced at International Tai Chi Chuan Symposium*, *Nashville*, *TN (July 2009)*

What does Tai Chi do?

Trains efficient, effective use of mental & physical energy

- Fosters a relaxed, alert state of mind
- Optimizes efficiency of movement
- Promotes appropriate decision making
- Reduces potential for physical injury





"Tai Chi and Pain"

ARTICLE TYPE	TOTAL N = 126	LAST 5 YRS N = 85
Randomized Control Trials	17	7
Reviews	48	33
Systematic Review	33	23

CONFLICTING DATA

- Meditative movement therapies (qigong, tai chi, yoga) are strongly recommended
- The quantity and the quality of CAM pain research studies are inconsistent

Lee & Ernst. Systematic Review of Tai Chi. Br J Sports Med. 2012 Aug;46(10):713-8

Convincingly positive evidence for:

- Fall prevention
- Improvement of psychological health
- General health benefits for older people
 - Chronic health conditions
 - MSK and neurologic conditions
 - Function, PAIN, Strength
 - CV health



Peng PW. Tai chi and Chronic Pain.

Reg Anesth Pain Med. 2012 Jul-Aug;37(4):372-82.

- Tai Chi contributes to pain management in 3 major areas: 1) adaptive exercise, 2) mindbody interaction, and 3) meditation
- 5 Areas (138 articles)
 - Osteoarthritis
 - Low back pain
 - Fibromyalgia

Tai Chi seems to be an effective intervention for these 3 items

- Rheumatoid arthritis
- Headache



Tai Chi for Chronic Pain Conditions

Group Exercise Physical Therapy Class

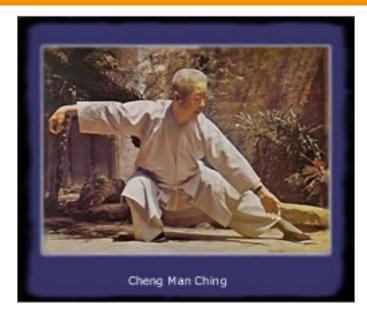
- Movement Awareness & Exercise Class for Patients with Chronic Conditions
- Part of the multi-disciplinary pain management clinic (MD, Psychology, PT)
- 6-week class based on Tricia Yu's



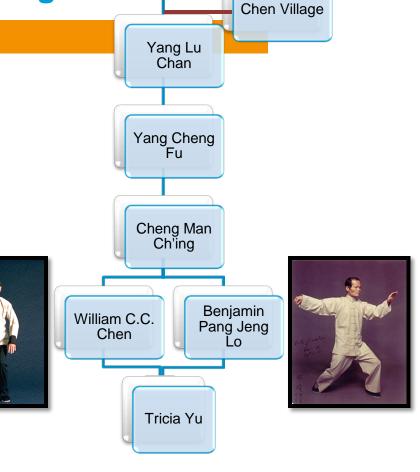


Traichis*

Modified YANG STYLE FORM Cheng Man Ch'ingTai Chi Lineage







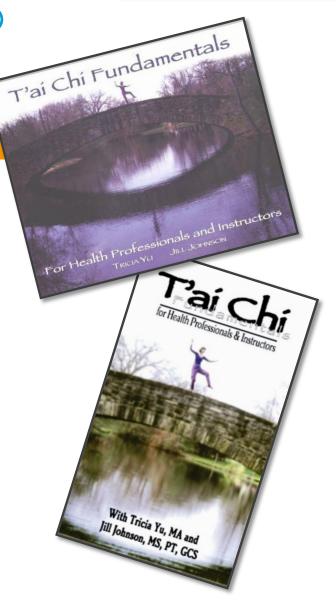
Chang San Feng

Main Lineages of Tai Chi Chuan: Yang, Chen, Wu, Sun, Wu Hao



Tai Chi Fundamentals® Program Elements

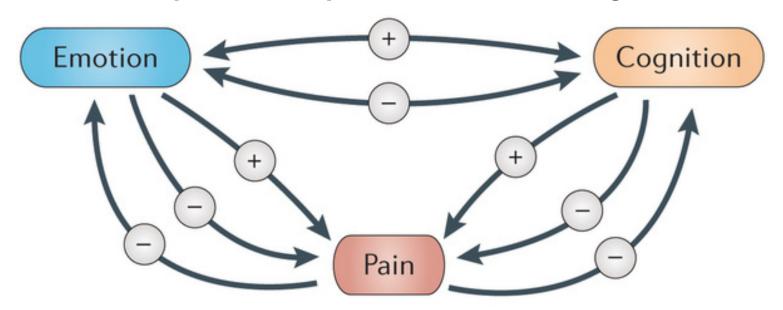
- Mind-Body Skills (3)
- Movement Patterns (16)
- Modified TCF® Form
- Guidelines for Practice (7)
- Biomechanical Analysis
- Therapeutic Applications
- Functional Applications
- Professional Certification
- Instructional Materials





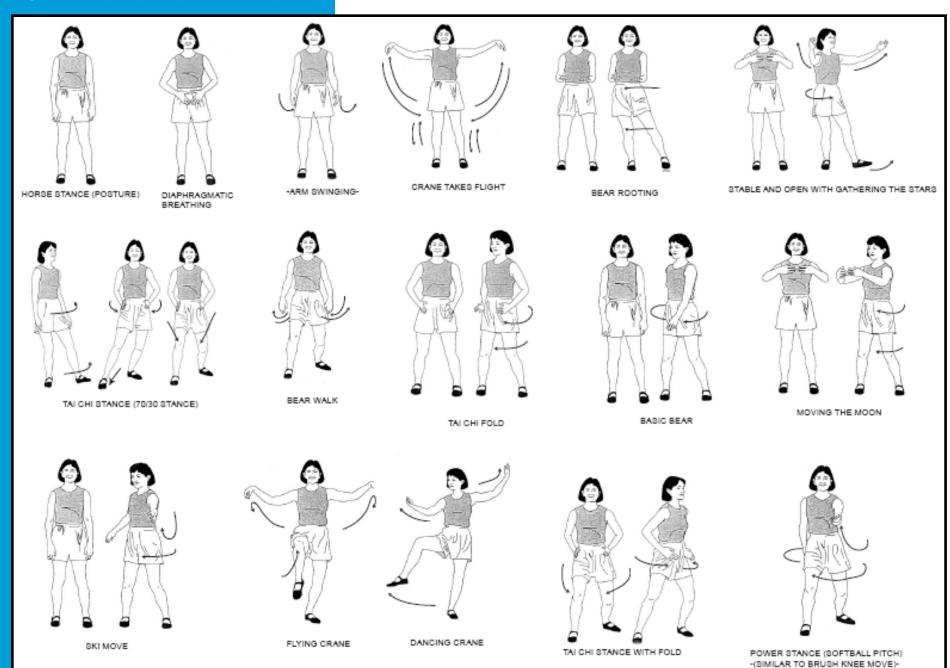
Mind-Body Principles

Feedback loops between pain, emotions and cognition



Nature Reviews | Neuroscience

TCF® Movement Patterns





TCF® Movement Patterns

DEVELOPMENTAL SEQUENCE Societal - Frontal - Transverse Plan

Sagittal ⇒ Frontal ⇒ Transverse Planes

- Trains postural alignment
- Fosters motor control
- Safe progression of movement
- Precursor to learning any style of Tai Chi



- - Gender: Female > Male
 - Age: 11 90 years
- Sample Diagnoses (including but not limited to...)
 - Chronic musculoskeletal pain (LBP, OA, FMS, etc.)
 - Neurologic Diagnoses: PD, MS, Stroke
 - Pelvic floor dysfunction
 - Juvenile Rheumatoid Arthritis and Adult RA
 - Lower limb amputation



Referrals from many sources...

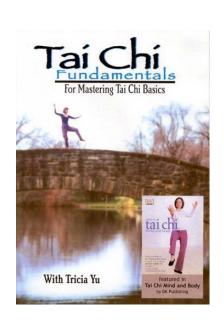
- Primary Care Physicians
- Orthopedic MDs/DOs
- Veteran's Administration MDs
- Pain Clinic
- Integrative Medicine Clinic
- Primary Care PTs & OTs
- Past clients





CLASS FORMAT

- Participants = 6 participants per class
- Visits = 5-, 6-, 8- or 10-session formats
- 60 minutes of exercise
 - Warm-up, Training, Cool-down
 - Mind/body skills practice
 - TCF® movement patterns
 - TCF® form practice
- Home Training (DVD optional) and community resources





OUTCOMES

- Improved weight-bearing tolerance (monitored by number of seated rest breaks per exercise session)
- Improved single-leg standing balance (seconds)
- Improved leg strength & transfers (sit-to-stand via Chair test)
- Decreased pain ratings over single treatment and over the course of the training sequence
- Outcome tools (e.g. TUG, DGI, ABCs, FMS impact scale, Oswestry, etc.)

Documented in Individual Medical Records



BILLING

• ICD-10-CM Codes

V 57.1 Physical therapy

- CPT Codes for Physical Therapy Procedures
 - 97150 Therapeutic procedures (2), group (2 or more individuals)
- CPT Codes for Physical Therapy Procedures
 - 97110 Therapeutic procedure, 1 or more areas, therapeutic exercises to develop strength, endurance, range of motion and flexibility
 - 97112 Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities



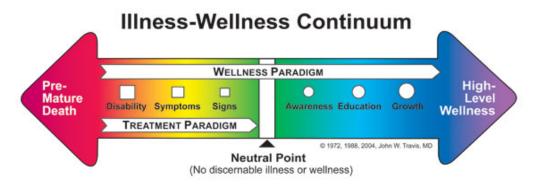
DOCUMENTATION linked to Billing Codes

- Therapeutic Exercise (#1)
 - ROM, Strength Training, Aerobic capacity
- Neuromuscular Re-education (#2)
 - Balance, coordination, kinesthetic sense, posture, and/or proprioception
- Postural & Balance Training

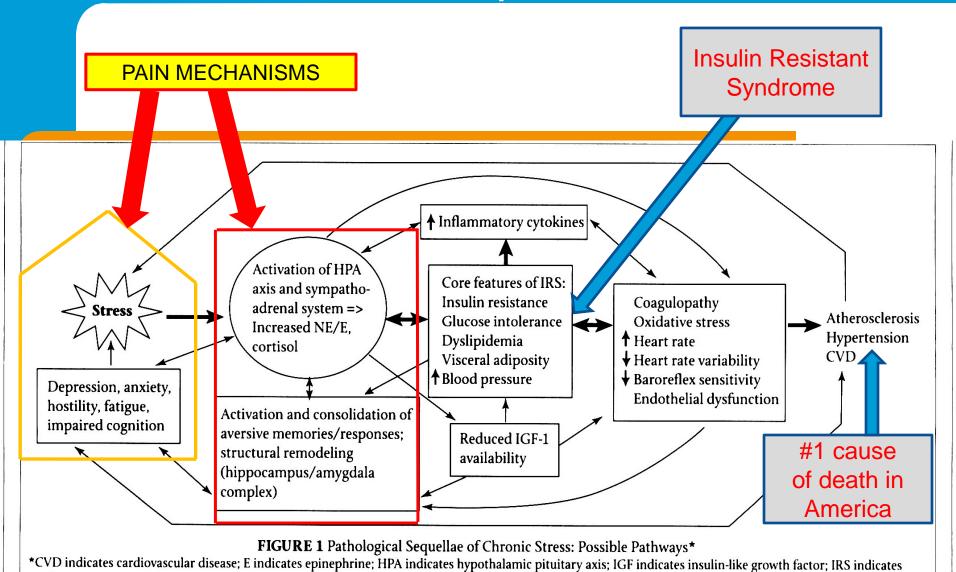
Each class session utilizes Templated Electronic Medical Record Notes

Tai Chi Integrates Mind & Body

Because Tai Chi practice encompasses exercises that promotes posture, flexibility, mental concentration, and is done in slow, and controlled fashion, it is <u>SAFE</u> for patients with chronic health conditions to perform.



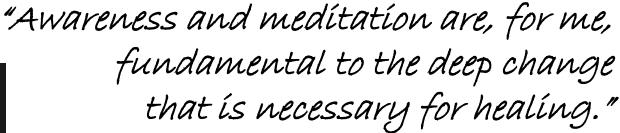
Meditative Movement Therapies & Chronic Conditions



insulin resistance syndrome; NE indicates norepinephrine.

The Role of Mindfulness in Healthcare Reform: A Policy Paper

Mindfulness practices can be an important tool in addressing our public health problems.



~James S Groden, MD





CONTACT INFORMATION

Kristi Hallisy PT, DSc, OCS, CMPT, CTI

UW-Madison SMPH

Dept. of Orthopedics & Rehabilitation

Physical Therapy Program

4180 MSC 1300 University Avenue

Madison, WI 53706-1532

hallisy@pt.wisc.edu

(608) 263-6744



BIO: Kristi Hallisy PT, DSc, OCS, CMPT, CTI

- Dr. Kristi Hallisy received a Bachelor of Science degree in Physical Therapy from the University of Wisconsin – Madison (1984), a Master of Science in Kinesiology from the University of Michigan – Ann Arbor (1992) and a Doctorate of Science in Physical Therapy from Andrews University in Berrien Springs, Michigan (2011). She is American Board of Physical Therapy Specialties certified specialist in orthopaedics (OCS), certified manual physical therapist (CMPT) and certified Tai Chi Fundamentals® Instructor (CTI).
- Dr. Hallisy is an assistant professor at the UW-Madison and her teaching responsibilities include musculoskeletal coursework, health promotion and wellness, orthotics and prosthetics. Her clinical appointment includes patient care at University Health Services (student health) and professional staff development at UW-Health Princeton Club East Outpatient PT Clinic. As part of the multi-disciplinary pain management clinic, Dr. Hallisy developed UW-Health's Movement Awareness and Exercise Class for Patients with Chronic Conditions based on tai chi mind-body principles.
- Dr. Hallisy also serves as a faculty member, instructor and mentor for the Post-Professional Orthopaedic Clinical Residency Program offered at the UW-Health and Meriter hospitals. Professionally, Dr. Hallisy provides service to the Wisconsin Physical Therapy Association (WPTA) as a member of the WPTA Board of Directors, Co-Chair of the Health Promotion and Wellness Committee and special liaison to the WPTA Continuing Education Committee.

REFERENCES (Pain Reviews)

- Zheng Z, Xue CC. Pain research in complementary and alternative medicine in Australia: a critical review. J Altern Complement Med. 2013 Feb;19(2):81-91.
- Peng PW. <u>Tai chi and chronic pain</u>. Reg Anesth Pain Med. 2012 Jul-Aug;37(4):372-382.
- Sullivan AB, Scheman J, Venesy D, Davin S. <u>The role of exercise and types of exercise in the rehabilitation of chronic pain: specific or nonspecific benefits</u>. *Curr Pain Headache Rep.* 2012 Apr;16(2):153-161.

PubMED – 51 total articles "tai chi and osteoarthritis" A select few cited below

REFERENCES MSK Pain Management

- Shengelia R, Parker SJ et al <u>Complementary therapies for osteoarthritis:</u> are they effective? Pain Manag Nurs. 2013 Dec;14(4):e274-88.
- Lauche R, Langhorst J, Dobos G, Cramer H. <u>A systematic review and meta-analysis of Tai Chi for osteoarthritis of the knee.</u> Complement Ther Med. 2013 Aug;21(4):396-406.
- Yan JH, Gu WJ, Sun J, Zhang WX, Li BW, Pan L. <u>Efficacy of Tai Chi on pain, stiffness and function in patients with osteoarthritis</u>: a meta-analysis. *PLoS One.* 2013 Apr 19;8(4):e61672.
- Gaught AM, Carneiro KA. <u>Evidence for determining the exercise</u> <u>prescription in patients with osteoarthritis</u>. *Phys Sportsmed*. 2013 Feb;41(1):58-65.
- Hochberg MC, Altman RD, April KT et al. <u>American College of Rheumatology 2012 recommendations for the use of nonpharmacologic and pharmacologic therapies in osteoarthritis of the hand, hip, and knee.</u>
 Arthritis Care Res (Hoboken). 2012 Apr;64(4):455-74. Review.

REFERENCES MSK Pain Management

- Iwamoto J, Sato Y, Takeda T, Matsumoto H. <u>Effectiveness of exercise in the treatment of lumbar spinal stenosis, knee osteoarthritis, and osteoporosis.</u> Aging Clin Exp Res. 2010 Apr;22(2):116-22. Review.
- Hall A, Maher C, Latimer J, Ferreira M. <u>The effectiveness of Tai Chi for chronic musculoskeletal pain conditions: a systematic review and meta-analysis</u>. *Arthritis Rheum*. 2009 Jun 15;61(6):717-24. Review.
- Callahan LF. Physical activity programs for chronic arthritis. Curr Opin Rheumatol. 2009 Mar;21(2):177-82. Review.
- Lee MS, Pittler MH, Ernst E. <u>Tai chi for osteoarthritis: a systematic review.</u> *Clin Rheumatol.* 2008 Feb;27(2):211-8. Epub 2007 Sep 14. Review.
- Lee MS, Pittler MH, Ernst E. <u>Tai chi for rheumatoid arthritis: systematic review.</u> Rheumatology (Oxford). 2007 Nov;46(11):1648-51.
- Morone NE, Greco CM. Mind-body interventions for chronic pain in older adults: a structured review. Pain Med. 2007 May-Jun;8(4):359-75. Review.

REFERENCES (FMS)

FIBROMYALGIA SYNDROME

- Langhorst J, Klose P, Dobos GJ, Bernardy K, Häuser W
 <u>Efficacy and safety of meditative movement therapies in fibromyalgia syndrome: a systematic review and meta-analysis of randomized controlled trials.</u> Rheumatol Int. 2012 Feb 15.
- Jones KD, Liptan GL. <u>Exercise interventions in fibromyalgia:</u> <u>clinical applications from the evidence.</u> Rheum Dis Clin North Am. 2009 May;35(2):373-91. Review.