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Title

Patient and provider perceptions supporting chronic pain digital therapeutics in primary care

Priority 1 (Research Category)

Pain management

Presenters

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Abstract

Context: Digital therapeutics may be uniquely positioned to address challenges reported by providers in chronic pain (CP) management. Previous studies have shown patient-provider discordance in priorities for CP management, which can be addressed in digital therapeutics development to encourage implementation and use. Objective: To assess primary care providers' and patients' perceptions of CP treatment goals and motivators for use of a digital therapeutic delivering CP related behavioral interventions. Study Design: Quantitative surveys. Setting: Participants were recruited from four primary care clinics in Washington and Colorado, two patient support groups, and one research community stakeholder group. Population Studied: The sample included 31 patients and 39 providers. Most patients identified as male (61.3%), non-Hispanic White (96.8%) and had experienced pain for one year or longer (90.3%). A mix of provider roles were included: primary care providers (46.2%), behavioral health providers (41.0%), clinical pharmacists (5.1%), and nurses (5.1%). All providers had experience treating patients with CP. Outcomes: Participants rated 10 CP treatment goals (e.g., quality of life, self-management skills) and 11 motivators for use (e.g., coaching, insurance payment coverage) of digital therapeutics on a 5-point Likert-scale. Descriptive statistics and Chi-Square tests were computed. Results: Patients and providers differed in their perceptions of importance across all treatment goals. Patients' ratings of treatment goals ranged from least to very important, whereas providers uniformly rated all treatment goals as very or extremely important (p < .05), and provider ratings of importance were consistently higher than patients (p < .05). Patients and providers on average did not rate motivators for use very high and they differed in their perceptions across six specific motivators. Providers rated friend recommendations and coaching features as more likely to motivate use than patients did (p < .05). Providers tended to rate more uniformly than patients on motivators related to insurance covering most of the cost, it being recommended by a provider or friend, and if the program was personalized with coaching (p < .05). Conclusions: Incorporating digital therapeutics in routine

primary care may help improve CP management by providing customizable features that address diverse treatment goals, and bridge differing perspectives between providers and patients.